

DHHS Behavioral Health

Strategic Plan

2022-2024

Influence
Integration
Inclusion
Innovation
Value

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

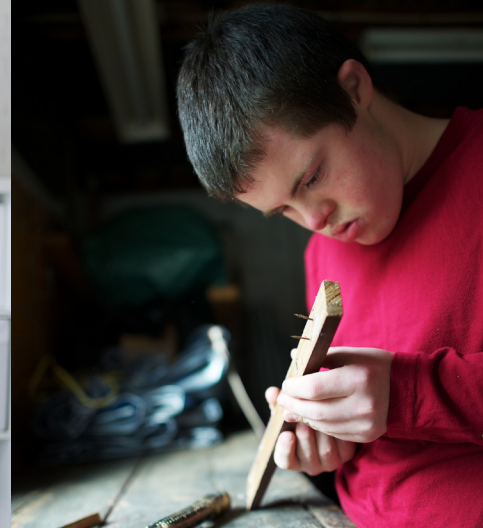


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Message from the Director, Division of Behavioral Health

Dear Nebraskans:

The Nebraska Behavioral Health System (NBHS) has grown and changed significantly over the last decades. The result is an array of services and supports that promotes community living for those we serve. Our lives as citizens and community members have been enriched by changes made over time. Over the last few years, there are successes focused on the recovery tenants, home, health, community, and purpose. The accomplishments are the result of strong collaborations with partners dedicated to improving the lives of individuals and families experiencing behavioral health challenges.

As the Division of Behavioral Health closed out fiscal year 2020, COVID-19 significantly altered the lives of the people we serve and those providing service. The impact of COVID-19 has generated unprecedented challenges that have required resiliency, innovation and openness to change. Nebraskans once again faced uncertainty with resolve. Consumers and providers adapted to alternate service delivery such as telehealth and telephone. The situation promoted new ways to engage. Services have remained open and continue to address the needs of Nebraskans with mental illness and substance use disorders. As we sunset the DBH 2017-2020 Strategic Plan and move forward with a new Plan, I sincerely applaud the responsiveness of the people we serve, teammates and partners.

I am pleased to present you with the 2022-2024 Behavioral Health Strategic Plan. I appreciate the many stakeholders that gave voice to the vision and plan. You participated virtually, by survey, by interview, or sending in your ideas. As we move forward, it is important to build upon the successes and acknowledge the lessons and challenges experienced over the last years. The simple and shared goal we have for Nebraskans is access to healthcare, our focus is on behavioral healthcare. We are driven by how we want our families and ourselves to experience the behavioral health system. Together, we must continue to build a more comprehensive array of prevention, treatment, and recovery services.

Consumer and system partners developed a strategic vision to guide the work of the Nebraska behavioral system. The new plan includes purposeful objectives and unique strategies that address a set of five distinct areas of focus setting a clear path forward for the continued delivery of behavioral health services with excellence.

Transformation pillars within the plan:

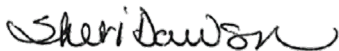
1. Enhance Behavioral Health **INFLUENCE**
2. Implement an **INTEGRATION** Strategy
3. Promote Stakeholder **INCLUSION**
4. Drive **INNOVATION** and Improve Outcomes
5. Demonstrate and Drive **VALUE**

The new plan comes at a time of continued challenges but also great opportunity given the resources afforded to us including Medicaid expansion, Covid-19 emergency grants, state opioid response grants, and other resources that work to innovate, improve and integrate services to address the whole-health needs and well-being of Nebraskans. As the chief behavioral health strategist for the state, we will serve as a catalyst for responsiveness to the needs of Nebraskans with mental illness and substance use disorders. Keeping the goals and aspirations of those we serve as the highest priority, Nebraska is uniquely situated to transform the behavioral health care experience through the pillars.

Today's challenge is to recognize that this work is a difficult journey. From certain vantage points it may be hard to identify that the journey, to this point, has much to celebrate. We also must recognize that at varying times, the journey is difficult, fearful, and exhilarating. As a system, we must continue to change and evolve. We must continue to boldly initiate and debate, even when it leads to an unsettling phase before the next moment of transformation. We can't avoid the trickier challenges of building systems of care, integrated managed care, data informed planning, and outcome or value based contracting.

As a healthcare leader, I am grateful and humbled to be in this position and to work alongside of you at this moment. Connecting and communicating with you as system partners is a priority. Transformation is difficult, necessary and provides opportunity. We will continue our work together on behalf of Nebraskans. Our future, our work.

Sincerely,



Sheri Dawson, Director
Division of Behavioral Health
Department of Health and Human Services



Department of Health & Human Services Behavioral Health Executive Summary

As the chief behavioral health strategist for the state, the Nebraska Department of Health and Human Services, Division of Behavioral Health (NDHHS-DBH) and a variety of Nebraskans developed a strategic plan to be a catalyst for responding to the needs of Nebraskans related to prevention, treatment and recovery of mental illness and substance use.

NDHHS-DBH engaged OPEN MINDS, a nationally recognized consulting firm, to conduct a Needs Assessment, provide a Gap Analysis and facilitate a Strategic Planning Process. Prioritized needs resulting from the needs and gaps assessment drive the identification of key objectives and prioritized strategies for the 2022-2024 strategic plan.

System partners developed a strategic VISION “to become a leader or gold standard for behavioral healthcare quality and health improvement” to guide the work of the Nebraska behavioral health system through the following five transformational pillars:

1. Enhance Behavioral Health **INFLUENCE**
2. Implement an **INTEGRATION** Strategy
3. Promote Stakeholder **INCLUSION**
4. Drive **INNOVATION** and Improve Outcomes
5. Demonstrate and Drive **VALUE**

Behavioral Health Strategic Plan Transformation Pillars/Goals and Prioritized Objectives

FY 2022-2024

Pillar 1 – Enhance Behavioral Health **INFLUENCE**

Goal: Behavioral health influences systems and impacts people in positive ways.

- Align system partners and agencies in developing a more robust cross system behavioral health continuum of prevention, treatment and recovery services and supports.
- Increase activities to reduce behavioral health stigma.
- Increase integration of Behavioral Healthcare with community resources so there is a front door for people to connect to services.

Pillar 2 – Implement an **INTEGRATION** Strategy

Goal: Behavioral health is integrated across public and private systems.

- Increase integration between substance use treatment providers and mental health treatment providers.
- Increase behavioral health services/access in a variety of settings including crisis services.

Pillar 3 – Promote Stakeholder **INCLUSION**

Goal: Stakeholders are included and contribute to the planning and development of the Behavioral Health System.

- Improve consumer and family input for service evaluation and service needs.
- Address disparities, increase diversity and health equity through cross system engagement, planning and ensuring culturally and linguistically appropriate services (CLAS).
- Increase engagement between NDHHS, DBH and other partners in serving justice populations.

Pillar 4 – Drive **INNOVATION** and Improve Outcomes

Goal: The Behavioral Health System advances effective outcomes through innovation.

- Improve competencies of behavioral health providers through partnerships and training with academic institutions
- Expand evidence-based practices through cross system engagement and planning.
- Expand use of technology for improved behavioral health outcomes.

Pillar 5 – Demonstrate and Drive **VALUE**

Goal: The public Behavioral Health System demonstrates and drives value.

- Improve interagency data sharing.
- Establish system wide BH outcomes.

What is the Vision and What is Different?

INFLUENCE

- The behavioral health system of care has strengthened and additional partnerships that propels Nebraskans through their health and wellness journey.
- Reshaping the behavioral health system by collaborating with partners, and aligning funding, services, and supports.
- Helping all Nebraskans connect to a seamless and cross system continuum of care that meets their needs whenever they need help.
- Adult and youth continuums of care are inventoried, assessed, aligned and drive future state cross system planning and funding.
- Stigma of substance use and mental illness is eliminated and a culture of no health without behavioral health is the norm.
- Every community and every Nebraskan talks about behavioral health as an essential part of overall health.

- No matter where you live, no matter your race, age, gender, all Nebraskans have equity of access to trusted services.
- Healthcare is integrated into the places people most commonly go in their daily lives.
- Access is simplified and available to all Nebraskans through developed resource connection.

INTEGRATION

- Nebraskans can access the array of needed services wherever a consumer is served.
- Working with Nebraskans, system partners, adult partners and youth and family partners, we develop a more diverse workforce that is trained, competent and accessible to meet the needs and refer individuals to helpful resources.

INCLUSION

- The voice of the people we serve is sought, diverse, meaningful and valued. We build trust and comfortable environments where voices are shared.
- We intentionally build a diverse workforce delivering equitable and equal behavioral health services across Nebraska and the role of culture in engagement and outcomes is affected.
- The system of care for adults and youth across prevention, treatment, and recovery includes early interventions and all intercepts for justice behavioral health.

INNOVATION

- Nebraskans with behavioral health challenges are served by individuals that are recruited, educated, developed and trained to be culturally responsive.
- Nebraskans receive services that are supported through evidence and make a difference to individual engagement in their own health.
- Consumers receive services and treatment that has evidence of effectiveness in their recovery journeys.
- Consumers have access to virtual, just in time or urgent care services to achieve positive health outcomes.
- Providers continue to innovate service delivery that is engaging, convenient, and effective in improving access and health outcomes.

VALUE

- Infrastructure and policies support inter and intra agency sharing of behavioral health key outcomes and datasets.
- Nebraska has a core set of standardized client outcomes that includes measuring and promoting health equity.
- The collecting and sharing of outcomes information related to health is not limited to one determinant; one agency or one fund source.

Strategic Plan 2022-2024

Division of Behavioral Health

| Goal 1: Behavioral health influences systems and impacts people in positive ways. | | |
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| | Objectives | Strategies |
| INFLUENCE | <p>1.1 Align system partners and agencies in developing a cross system behavioral health continuum of prevention, treatment and recovery services and supports.</p> | <ul style="list-style-type: none"> • Create DHHS cross agency behavioral health infrastructure/system of care framework for youth and adult services and supports, outcomes, and blended funding models. • Develop an implementation plan to address assessed needs and gaps that will grow the behavioral health continuum of care for youth and adults including inpatient/residential/detention and community based services. • Establish admission and discharge process and criteria for Lincoln Regional Center • Develop a cross system capacity and waitlist process, a cross system bed registry, same day services, and crisis system best practices, alternatives to the emergency department. • BH partners review 30 day and 180 day readmission rates by provider and service and develop a cross system familiar faces data review process. • A plan to maximize facility and community based services capacity to decrease wait times and improve access. |
| INFLUENCE | <p>1.2 Increase activities to reduce behavioral health stigma.</p> | <ul style="list-style-type: none"> • Develop a Recovery Friendly Workplace Initiative. • Develop a cross agency and cross system multilingual stigma campaign. • Expand virtual trainings, with an emphasis on community education (Mental Health First Aid, Question Persuade Refer and Assessing and Managing Suicide Risk). • Increase utilization of the Certified Peer Support Specialist (CPSS) workforce. • Explore ways to incentivize CPSS certification, CPSS utilization/employment, increasing peer trainers, and increase diversity of the CPSS workforce. |

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| INFLUENCE | <p>1.3 Increase integration of behavioral health with community resources so there is a front door for people to connect to services.</p> | <ul style="list-style-type: none"> • Crisis response mapping and 988 mapping to connect with state resources and implement 988 by July 2022. • Inventory and consolidate resource lines for behavioral health clients. • Crosswalk resource lines and databases. Identify efficiencies in maintaining real time accurate resources and referrals. |
|------------------|--|--|

Goal 2: Behavioral health is integrated across public and private systems.

| | Objectives | Strategies |
|--------------------|--|--|
| INTEGRATION | <p>2.1 Increase behavioral health services/ access in health care settings including behavioral/physical health crisis services best practices.</p> | <ul style="list-style-type: none"> • Complete an assessment of integrated practices and services, noting strengths, barriers and outcomes. • Develop more rapid responses for behavioral health consultations (crisis and primary care settings). • Develop training program specific to targeted provider types to improve provider knowledge base in behavioral health engagement techniques; assign CEUs. • Expand virtual access to care consultation with emphasis on rural areas and hospital emergency rooms (ER). • Develop plan to reduce high ER utilization. • Engage state Medicaid and private payers to create cost sharing strategy that incentivizes (alternative payment strategy/Value - Based reimbursement) ED avoidance based on care management and community tenure of the identified population. • Provide leadership to statewide opioid coalition and settlement workgroup. |
| INTEGRATION | <p>2.2 Increase integration between mental health and substance use treatment providers.</p> | <ul style="list-style-type: none"> • Determine best practices for co-occurring capability and establish guidance and explore incentives for using behavioral health screening/evaluation tools. • Review system policies and practices to address barriers and reduce administrative burden re: dual credentials, coding, integration, funding, and service definitions across behavioral health system. • Provide training on dual diagnosis EBP- Integrated Dual Diagnosis Treatment (IDDT). |

Goal 3: Stakeholders are included and contribute to the planning and development of the Behavioral Health System.

| | Objectives | Strategies |
|------------------|---|---|
| INCLUSION | 3.1 Improve engagement between DHHS, DBH, and Justice partners in addressing Justice Behavioral Health needs and gaps, access to services, sequential intercepts, and Justice/ Behavioral Health outcomes. | <ul style="list-style-type: none"> • Identify specific/targeted interventions for justice involved behavioral health consumers. • Establish DHHS/DBH/Justice workgroups to conduct a needs analysis, identify service gaps and develop appropriate services; develop shared system goals and quality outcome measures. |
| INCLUSION | 3.2 Improve consumer and family voice in planning and evaluation of services. | <ul style="list-style-type: none"> • Conduct gap/barrier analysis of current community organizations engagement practices by groups and demographics. • Inventory of communication platforms, including social media, being utilized to reach consumers and families; determine best practices; consolidation or expansion to promote participation. • Create an infrastructure for consumer and family voice. • Increase survey utilization for engaging broader and diverse voices. |
| INCLUSION | 3.3 Increase diversity and health equity through cross system engagement, planning and ensuring culturally and linguistically appropriate services (CLAS). | <ul style="list-style-type: none"> • Align goals with the Office of Equity and Disparity; create overarching holistic plan. • Complete a systemic CLAS need assessment and baseline data for culturally and linguistically appropriate services. • Create cross-agency infrastructure to carry out plan. • Develop strategies to strengthen a competent behavioral health workforce which is racially, ethnically/culturally and linguistically diverse. • Develop strategies to increase bi-lingual/ bi-cultural behavioral health workforce. |

Goal 4: The Behavioral Health System advances effective outcomes through innovation.

| | Objectives | Strategies |
|-------------------|--|--|
| INNOVATION | 4.1 Improve the competencies of behavioral health providers through partnerships and training with academic institutions. | <ul style="list-style-type: none"> • Assess needs and develop training plan across the behavioral health system. • Partner with academic institutions to assure workforce competency training is aligned with emerging consumer needs and treatment continuum needs and gaps. • Assure trainings are being promoted to providers across the state and virtual/on-line access is available. |
| INNOVATION | 4.2 Expand use of technology for improved behavioral health outcomes. | <ul style="list-style-type: none"> • Survey state providers/organization to determine current capacity and needs. • Develop technology trainings for providers; including use of surveys for patient engagement, satisfaction and outcomes via telehealth. • Explore incentives and payer sources for technology solutions for providers and consumers. • Identify and implement technology solutions to address consumers with complex needs (improve community tenure and provide success in servicing; support transitions between levels of care). • Expand competency and training in digital technology/telehealth. |
| INNOVATION | 4.3 Expand evidence-based practices through cross system engagement and planning. | <ul style="list-style-type: none"> • Inventory of cross-system evidence-based practices and identify need for additional EBPs. Create cross-system workgroup to conduct a needs assessment, determine appropriate EBPs and develop an implementation/expansion plan. • Create baseline of EBP data, determine best source of EBP data collection, and explore incentives for the use of evidenced-based practices (consider Value-Based Reimbursements (VBR)). |

Goal 5: The public Behavioral Health System demonstrates and drives value.

| | Objectives | Strategies |
|--------------|--|---|
| VALUE | 5.1 Improve interagency data sharing for system planning. | <ul style="list-style-type: none"> • Crosswalk behavioral health system partner metrics, dashboards, and data sources. • Prioritize and identify year 1, 2, and 3 metrics which must include health disparities and consumer experience. • Regularly scheduled interagency-meeting to review data and develop strategies for quality improvement on selected metrics. • Develop detailed and accessible DHHS behavioral health dashboards. • Develop cross system dashboards for implementation. |
| VALUE | 5.2 Establish system wide BH outcomes. | <ul style="list-style-type: none"> • Identify outcomes and indicators for cross division behavioral health providers. • Build upon outcomes developed with DBH partners to begin value based contracting across DHHS divisions. |



Although Some
Flowers Are Struggling,
All Flowers Deserve
Love! #MentalHealth
IS Important

