

FY2022 Annual Report



Organizational Leadership



Department of Health and Human Services

Dannette R. Smith

Chief Executive Officer



Division of Behavioral Health

Tony Green, BS

Interim Director

DBH Facilities
Larry Kahl, FACHE
Chief Operating Officer

DBH Adult Facilities
Roger Donovick, MD
Executive Medical Officer

Adult Services
Jess Russell Berring
Administrator

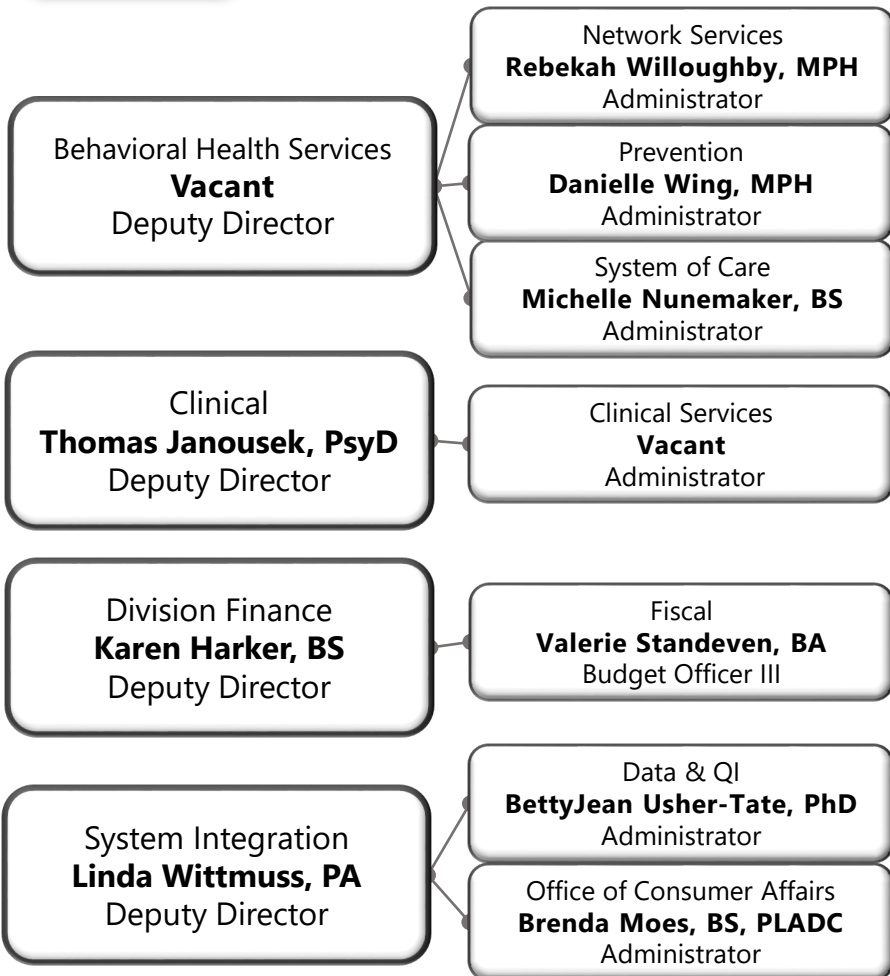
Lincoln Regional Center
Vacant
Facility Operating Officer

Norfolk Regional Center
Don Whitmire
Facility Operating Officer

DBH Youth Facilities
Matt Wittry, MD
Youth Clinical Officer

Juvenile Services
Mark LaBouchardiere
Administrator

Whitehall
Mitchell Popple
Facility Operating Officer



Governor appointed

CEO appointed

Welcome to the FY2022 Annual Report. While the impact of the 2020 pandemic created an unprecedented need for public system action, the Nebraska Public Behavioral Health System (NBHS) continues to grow and change. Providers are committed to delivering services both in-person and via telehealth so individuals and families can receive needed services. We must constantly adapt the delivery of services to access the preferences of people with lived experience.

Behavioral health awareness and focus have been elevated at both the state and national levels. More people are seeking help as we normalize the healthcare conversation to include mental health and substance use, but the demand for services grows. Though we must not forget to celebrate the system's successes, we must continue to build on existing strengths and innovate new approaches.

The FY22 report highlights accomplishments that are the result of strong partners who continue to transform the behavioral health system. Nebraska providers and partners developed and implemented a 988 system, focused on someone to call, someone to respond, and somewhere to be served or referred. The spending plans have supported crisis response efforts and helped to stabilize the service systems and workforce.

The healthcare continuum is in varying stages of growth across this great state. The trickier challenge of building systems and continuums of care involve integrated healthcare, data-informed planning, outcome, value-based, and alternative payment systems. Systems work is not easy, but the service delivery is expanding, aligning across payers, and looking different.

As we close out FY22, please take pride in this system, its ability to adapt to change, and in designing and inviting the future. Through the strategic pillars of innovation, integration, inclusion, outcomes, and value along with a sustained commitment to whole health, diversity, equity, and leadership; the future is bright.

I am grateful for the strong collaboration with partners who are dedicated to improving the lives of individuals and families experiencing behavioral health challenges. Thank you for your service, your resiliency, and your partnership. Embrace the change ahead that is difficult, necessary, and full of opportunity.

Sincerely,

Division of Behavioral Health

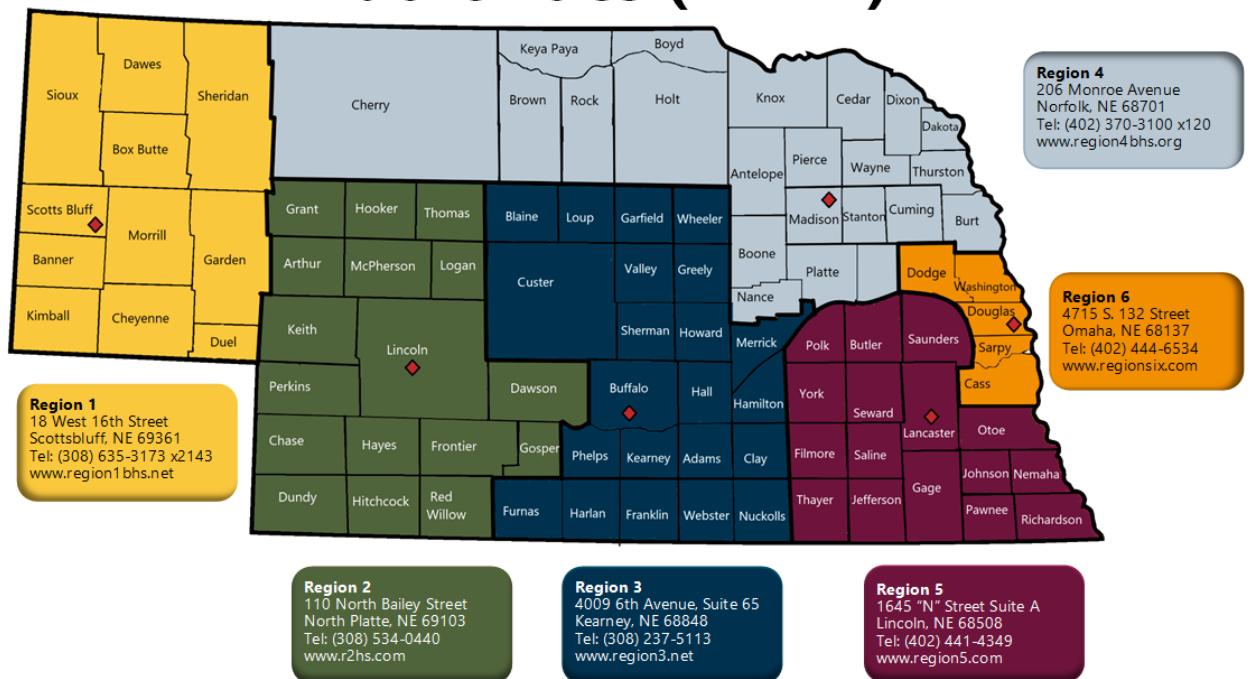
Division of Behavioral Health

The central office for the Division of Behavioral Health (DBH) operates out of the Nebraska State Office Building in Lincoln: Administration, Community-Based Services, Data, Fiscal, Prevention, and Office of Consumer Affairs.

DBH is the chief behavioral health authority for the State of Nebraska* and it is responsible for the administration and coordination of the Public Behavioral Health System. This includes the provision of planning, funding, oversight, and technical assistance to a network of Community-Based Services delivered through Federally-Recognized Tribes, Nonprofit Agencies and Organizations, and the Regional Behavioral Health Authorities.



Regional Behavioral Health Authorities (RBHA)



*Neb. Rev. Stat. §71-806

DBH Funded Community-Based Services: Demographics

25,244

Persons served in
FY2022

Gender ^a

46%
Females

54%
Males ^b

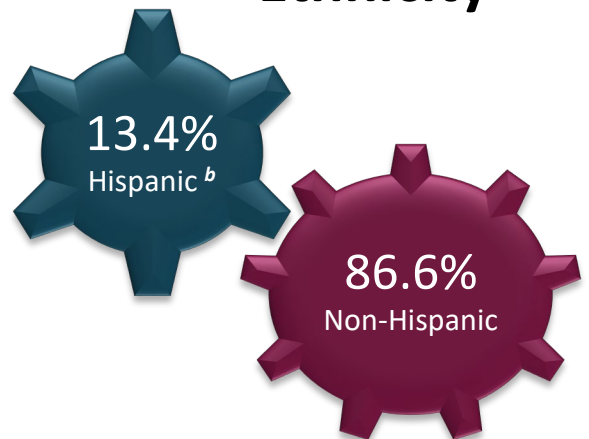
Age Groups

Youth 3-18 years	12.6%
Adult 19-24 years	12.4%
Adult 25-64 years	71.1%
Senior 65-74 years	3.0%
other	0.9%

Race ^a

American Indian/Alaska ^b	3.3%
Asian ^b	0.8%
Black/African American	9.9%
Native Hawaiian/Other	0.4%
Two or More Races ^b	1.4%
White	84.2%

Ethnicity ^a



Data Source: Centralized Data System FY22; data as of 10.1.22

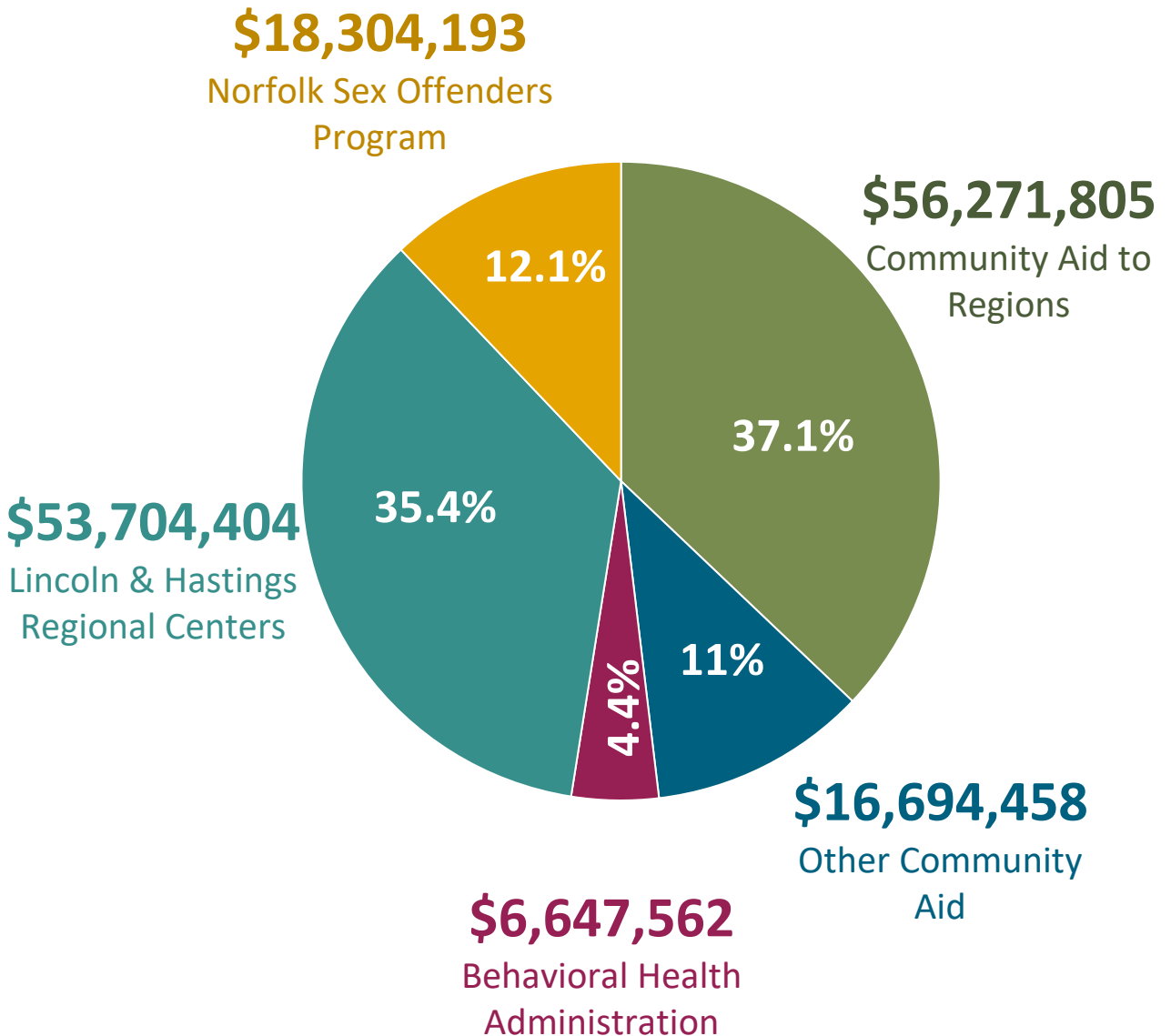
^a Demographic percentages are based on indicated responses (i.e. unknowns excluded)

^b Percentage increased in FY22 from what it was in FY21

Expenditures

\$151,622,422

Total Community-Based funding expended through the Division of Behavioral Health, FY2022.



Investing in People and Recovery

Stable Living Arrangements

70.9%

(Source: FY22 CDS, 10.1.22)

Discharged to stable living arrangements across all services.

91.4%

(Source: FY22 CDS, 10.1.22)

Discharged to stable living arrangements from supported housing services.

Supported Housing Service

944

(Source: FY22 CDS, 10.1.22)

Unique persons served.

\$3,698,118

Total DBH FY2022 funding utilized for supported housing services (Mental Health & Substance Use Disorder).

171

(Source: FY22 CDS, 10.1.22)

Average length of stay in days.

Supported Employment Service

707

(Source: FY22 CDS, 10.1.22)

Unique persons served.

\$932,281

Total DBH FY2022 funding utilized in supported employment services (Mental Health & Substance Use Disorder).

166

(Source: FY22 CDS, 10.1.22)

Average length of stay in days.

Top Primary Substances Reported

39.6% of Admissions to Nebraska DBH-Funded Services reported one or more known substances used.

#1

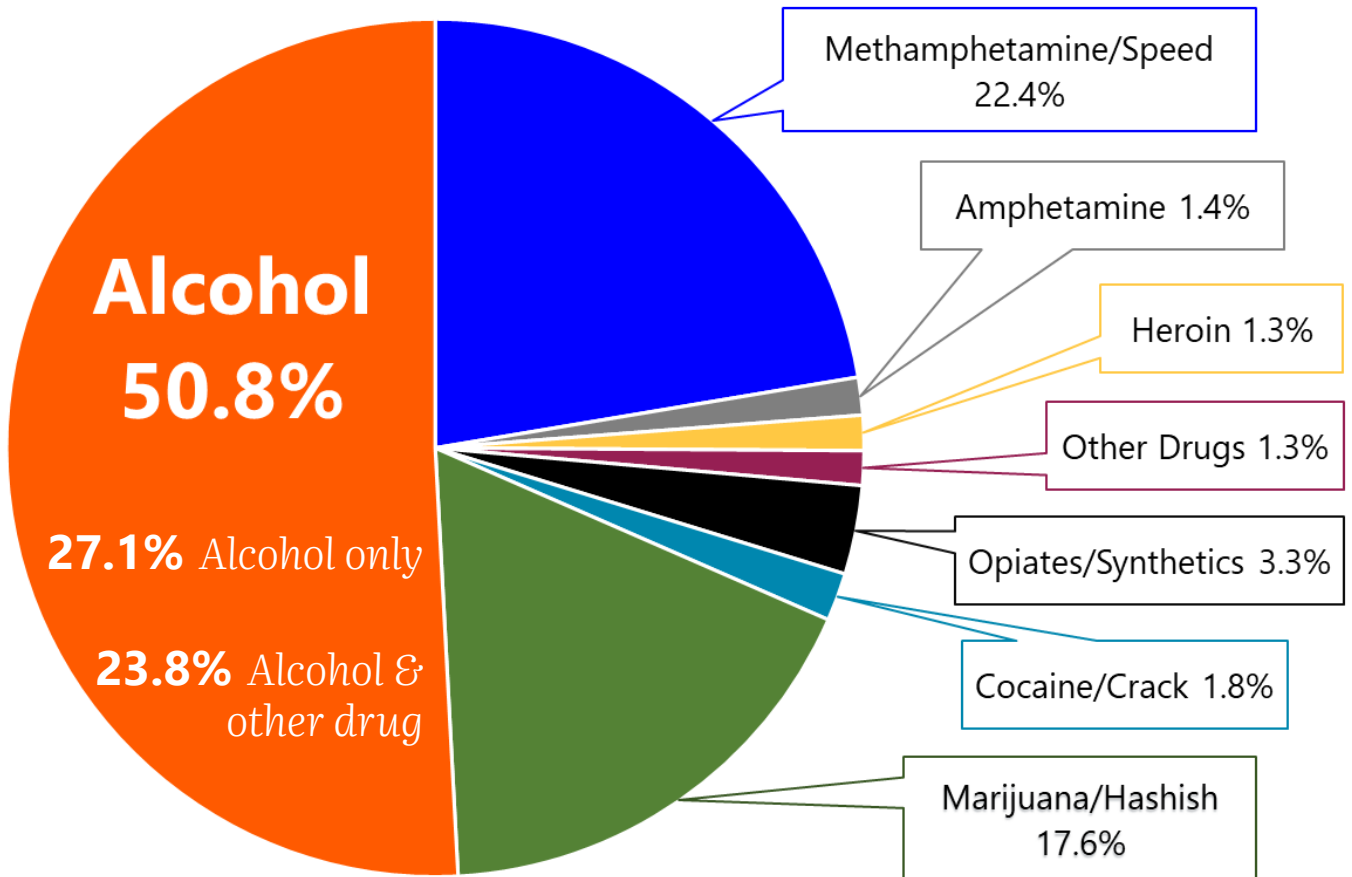
Alcohol

#2

Meth

#3

Marijuana



Prevention



Synar Tobacco Compliance Checks

The Division of Behavioral Health conducts this project in collaboration with the Nebraska State Patrol and Omaha Police Department. Of the completed checks, **5.8%** resulted in a retail violation rate.

PFS: Partnership For Success

169,570

Persons reached indirectly through universal prevention strategies such as social media campaigns, radio and TV PSAs, or other information dissemination strategies.

628

Of 710 (89%) alcohol vendors passed compliance checks by not selling alcohol to underage individuals during random inspections.

4 Health Surveys

- Nebraska Risk & Protective Factors Student Survey
- Youth Risk Behavior Survey
- Youth Tobacco Survey
- Nebraska Young Adult Alcohol Opinion Survey

20,683

Individuals with increased risk factors for substance use received targeted prevention programming.

1,492

Students served through school-based underage alcohol use prevention programs.

75%

Percent of programs and strategies targeting underage and binge drinking were evidence-based programs and strategies.

Prevention

Mental Health First Aid

- Training program.
- Learn how to recognize and offer initial support until appropriate professional help is received or until the crisis resolves.

For more information, please contact the Regional Behavioral Health Office in your area.

99%

of the **943** trained would recommend Mental Health First Aid training to others.

97%

are now able to recognize the signs of a mental health crisis.

99%

are now able to connect someone with community, peer, or personal supports.

SOR: State Opioid Response

\$4,287,787 per year
(9/30/2018-Present)

3,341

Number of prescription lockboxes distributed with educational materials for collection of medications.

13,206

Naloxone nasal spray kits distributed. Naloxone can help to reverse the effects of an opioid overdose in an emergency.

444

Number of Nebraska healthcare providers who have taken the MAT 101: Recognizing and Treating Opioid Use Disorder training.

3,840

Views of DBH's Pain Management Guidance document videos.

121,887

Pounds of unused medicine collected in take-backs through end of FY2022.

36

Executive fellows have completed the Addiction Medicine Executive Fellowship.

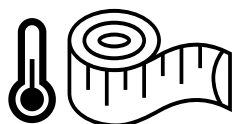
2022 DBH Consumer Survey

88.8%

Adult Overall Satisfaction: as indicated by the adult consumers who completed the survey in 2022.

81.5%

Youth Overall Satisfaction: as indicated by caregivers of youth who completed the survey in 2022.



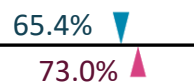
Recent Items



Alternative Service Delivery [Telehealth / Phone]

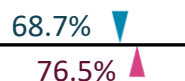
Adult respondents who indicated that they have also accessed telehealth or phone services reported significantly higher levels positive responses on **3 domains** when compared to those who indicated that they accessed only traditional services.

Outcomes



Traditional
Alternative

Functioning



Traditional
Alternative

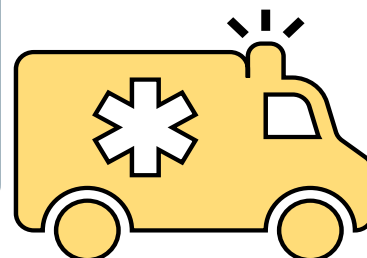
**Social
Connectedness**



Traditional
Alternative

Crisis Response

79.2% of adult respondents reported that it was important to have a *Crisis Response Team* meet them in their home or community versus going to a type of Behavioral Health Crisis or Urgent Care setting.



Tracked Items in the Annual Consumer Survey

2017 Baseline

2022 Result

86.1%

Increase consumer satisfaction with the services they receive.



88.8%

of adult consumers expressed satisfaction with the services they received.

79.4%

Increase consumer satisfaction with the quality of service they receive.



81.1%

of adult consumers agreed that the services they received improved their quality of life.

81.9%

Increase the provider return rate for calls to consumers.



80.9%

of adult consumers reported that staff returned their calls within 24 hours.

80.5%

Increase the access to services needed.



82.2%

of adult consumers reported they were able to get all the services they needed.

70.5%

Improve family relationships.



73.4%

of adult consumers reported they get along better with family as a result of services received.

"Staff were sensitive to my cultural background." (language, race, religion, etc.)

86.6%

"I am better able to handle things when they go wrong."

74.1%

"I am an active member of my community."

44.4%

DBH Accomplishments

Baseline (2017)

22

Increase the number of active Medication Assisted Treatment Prescribers.

90.3%

Increase the access rate for Medication Management Services within 21 days from inpatient discharge.

74.0%

Increase percentage of consumers who admitted to Supported Employment within 14 days of referral.

57.5%

Increase the number of persons employed at discharge from Supported Employment Services.

37.4%

Decrease percentage of persons 19-25 years who report binge drinking in the past month.

Achieved (2022)

178

Certified providers for Medication Assisted Treatment Prescribers.

(Source: SAMHSA's website)

88.3%

of consumers accessed appointments for Medication Management Services within 21 days of discharge.

(Source: CDS Access Reports)

81%

of consumers were admitted to Supported Employment within 14 days of referral.

(Source: CDS Access Reports)

78.8%

of persons were employed at discharge from Supported Employment Services.

(Source: FY22 CDS, 10.1.22)

29.9%

of persons 19-25 years reported that they were binge drinking in the past month.

(Source: CY22 Youth Adult Alcohol Opinion Survey)

Office of Consumer Affairs

The Office of Consumer Affairs focuses on consumer and peer support services, relationships, planning, research, and advocacy for all consumers.



Certified Peer Support Specialists (CPSS)

A CPSS is a person who is trained to use their personal lived experience and recovery with mental health and/or substance use disorders to mentor others who want to achieve recovery.

187 Total Number of CPSS Certified

185 Current Certified

24 Certified in FY2022

Training and Assessment for CPSS

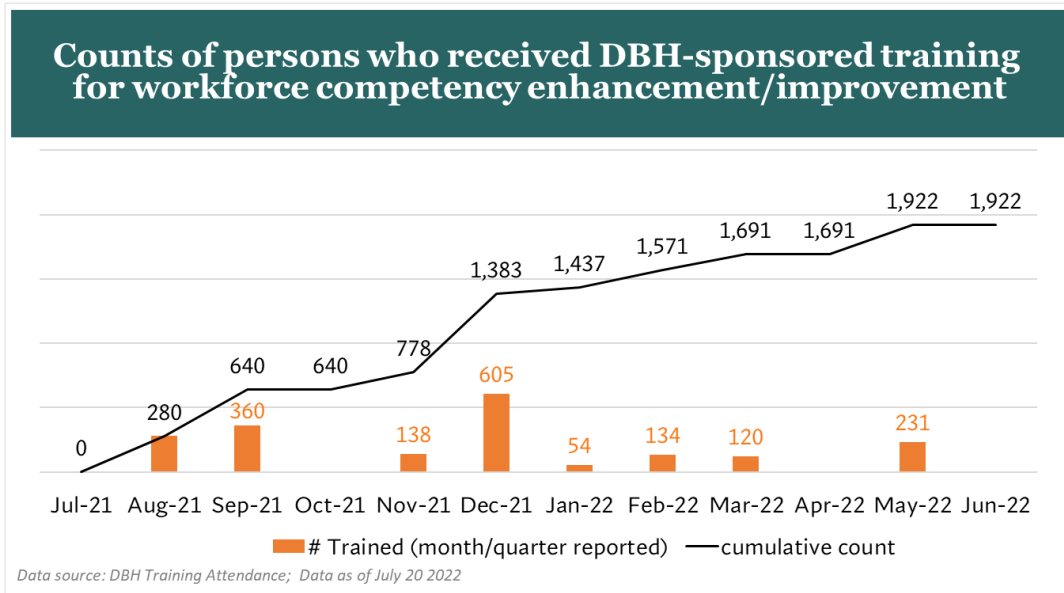
95%

Passing rate for those who were trained and have taken the peer recovery exam.

Providing Training & Support

1,922

participants in training sessions that were organized by DBH and Academic partners.



<https://portal.networkofcare.org/NebraskaBehavioralHealth>

The Network of Care (NOC) is a DBH-sponsored web-based platform that functions much like a *directory* which includes Behavioral Health (BH) providers and associated services throughout the State of Nebraska. On the homepage you may initiate a search by selecting a county on the map or a Region from the tabs.

FY22 developments on the NOC site:

- **Text Feature-** text the word **“FIND”** and the **zip code** to **402-788-4141** and you will get a listing of available agencies and services in or near that zip code.
- **Guided search-** this feature incorporates a series of questions into an algorithm that helps a user to get a more meaningful or narrowed search result.
- **Suicide Prevention and Support-** section on the NOC came online in Nebraska in February 2022.

Website analytics indicate that in FY2022 the NOC site indicate that the site had 243,092 page views and 123,285 active searches/visits.

DBH Contact Information

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*"I will always fight good and hard, even if I have to fight alone."
Susan LaFlesche Picotte, MD*

Nebraska's Division of Behavioral Health

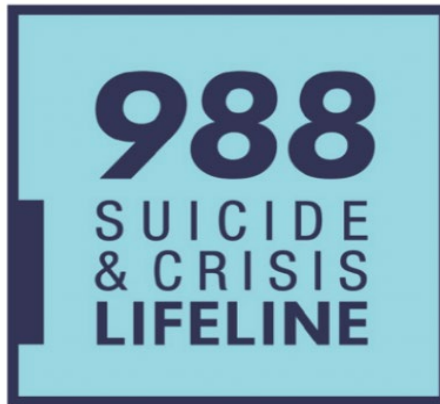


DBH

Annual Report FY 2022

If you are in need of services to help address a *mental health* or a *substance use* issue or disorder, know that *you are not alone.*

There are resources available to you.



If you or someone you know needs support now,
CALL OR TEXT: 988
CHAT: 988lifeline.org

Talk with us.



888.866.8660



800.464.0258



[https://portal.networkofcare.org/
NebraskaBehavioralHealth](https://portal.networkofcare.org/NebraskaBehavioralHealth)