

Region 1 Behavioral Health Board

Gaps and Needs Analysis-2015

Identified Regional Service Needs and Gaps <i>Relating to Prevention, Treatment and Rehabilitation Services</i>	Short Falls and Challenges	Project Proposals, Progress and Accomplishments <i>Including those related to Family Support Services and Recovery Support Services</i>	Improvement and Strategy Measures
MH/SUD Crisis Services and Detox	<ul style="list-style-type: none"> • Lack of crisis services with healthcare status • Lack of general and intensive outpatient providers in outlying areas • Lack of capacity for local ERs to identify/manage/address acute crisis needs 	<ul style="list-style-type: none"> • Legislation passed ID House/Senate HB 264 	<ul style="list-style-type: none"> • CDA selected as site of crisis center 23 hour voluntary holds
Access to Psychiatric Services for both Adults & Children	<ul style="list-style-type: none"> • Funding for Tele-Health/ Insurance • Best use of existing TH facilities • PCP not willing to prescribe psychotropic Rx • Lack of Psychiatric Providers who can subscribe 	<ul style="list-style-type: none"> • Increased used of Psych NP • Legislation passed to offer loan repayment to Psych MDs to work at state hospitals 	<ul style="list-style-type: none"> • ACA increased access • Change IDAPA SUD regulations to allow clinical supervision via Tele-health
Financial help with Medications for both Children and Adults	<ul style="list-style-type: none"> • Person to apply for aid from drug companies • Complicated paperwork requiring assistance to prepare 	<ul style="list-style-type: none"> • Use a 340 B drug program for the community 	

Sustainable Housing for the Homeless and Transitional Population	<ul style="list-style-type: none"> • Community acceptance, stigma • Limited funding for housing • Lack of Safe and Sober Housing for males/females for both Adults and Juveniles • No transitional or residential care facilities in Bonner, Boundary, Shoshone, or Benewah counties 	<ul style="list-style-type: none"> • Kootenai Co had two orgs present to BHB about group homes • Apply for ID Housing monies • Housing for felons 	<ul style="list-style-type: none"> • Develop sustainable housing for men, women, youth (male & female); group homes or secure homes
Respite Care for both Children and Adults	<ul style="list-style-type: none"> • Funding to provide training 	<ul style="list-style-type: none"> • Train volunteer families to accept referrals on temp basis 	
SUD/MH Parent Education & Training for both Children and Adults	<ul style="list-style-type: none"> • Family education needed • Community resistance, stigma 	<ul style="list-style-type: none"> • NAMI Family to Family • IFFCMH Building Stronger Families; online courses, seminars • CMH ACE training in April 	<ul style="list-style-type: none"> • Use resources of advocacy groups to start: NAMI, IFFCMH • Provided 5 scholarships to ICADD for providers
School Based MH/SUD Services, to include Intervention & Prevention	<ul style="list-style-type: none"> • Community Acceptance; stigma • Individual SD Resistance • Funding from MH and SUD groups 	<ul style="list-style-type: none"> • QPR Suicide Prevention Training • ACE (Adverse Childhood Experience workshop April 30th 2015 	<ul style="list-style-type: none"> • QPR Training in Silver Valley
CMH Day Treatment/Therapeutic foster Care	<ul style="list-style-type: none"> • Funding for services • Licensure for Day Treatment • Volunteers to train for foster care 		
Transportation for MH/SUD Clients	<ul style="list-style-type: none"> • Currently no transportation in rural areas • Limited City Link bus routes in Kootenai County 		

Trauma Informed Care	<ul style="list-style-type: none"> • Inform / Educate community service providers 	<ul style="list-style-type: none"> • April 10 Presentation Building a Trauma Informed Care Community at Kroc 	
Drug Endangered Children's Protocol	<ul style="list-style-type: none"> • Increased/ start Education and training • Idaho does not have DEC Alliance protocol in place; need system in place to identify kids at risk. 	<ul style="list-style-type: none"> • BH trainings • Address needs of children in dangerous drug environments • Formation of community-based partnerships with agencies across multiple disciplines • Support state services and local communities to develop efficient/effective strategies/for avocation of victims 	<ul style="list-style-type: none"> • Identify drug endangered children the dangers they face. We will • Offer ongoing education, support and linking services
Medical Preventative Care for MH and SUD	<ul style="list-style-type: none"> • Lacking for clients not on Medicare, Medicaid or Private Insurance 	<ul style="list-style-type: none"> • SHIP Program to focus on Patient Centered Medical Home • Expand community collaboration 	<ul style="list-style-type: none"> • ACA • SHIP Program
Education for Law Enforcement and First Responders about MH and SUD issues	<ul style="list-style-type: none"> • Monies for CIT Training • Time for officers to attend training • Resistance by LE Administration 	<ul style="list-style-type: none"> • CIT Training in April 	<ul style="list-style-type: none"> • More CIT training

SUD Referrals within the Medicaid System	<ul style="list-style-type: none"> • Currently no path in place within contractors referral system to refer clients to a SUD Provider when a need is identified • Issues with Co-Occurring referrals 	<ul style="list-style-type: none"> • Develop system to track co-occurring client referrals • Increase SUD Provider network • Service Provider Contractors should reflect sub-categories being treated 	
Specialty Court Client Issues	<ul style="list-style-type: none"> • No case management for these clients • Housing is an issue 	<ul style="list-style-type: none"> • Offer housing and case management 	
Lack of Payment to Providers to create process paperwork	<ul style="list-style-type: none"> • No reimbursement from contractors for paperwork required from providers 		<ul style="list-style-type: none"> • Reimbursement rates are below average
Opiate Replacement Therapy	<ul style="list-style-type: none"> • Lack of protocol in place between physicians and courts 		<ul style="list-style-type: none"> • Implement and train state wide: SMAHSA's Opiate Replacement treatment Model