## Region 5 Behavioral Health Board

### Gaps and Needs Analysis

**September 2017**

<table>
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<tr>
<th>Identified Regional Service Needs and Gaps</th>
<th>Short Falls and Challenges</th>
<th>Project Proposals, Progress and Accomplishments Including those related to Family Support Services and Recovery Support Services</th>
<th>Improvement and Strategy Measures</th>
<th>Outcomes</th>
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| **Housing (Crisis, Transitional, Permanent)** | Need for crisis/transitional housing far exceeds availability in all Region 5 counties. Barriers such as felonies, credit checks, and the need for deposit/first-month rent money screen out many individuals. Single men have minimal housing options. | - Well-managed, clean transitional housing units  
- Recovery housing that supports clean and sober living while providing structure and accountability  
- Housing opportunities that “screen in” individuals rather than “screening out” individuals | - Engage our community members while educating about the social and fiscal benefits of crisis/transitional housing  
- Capture sources of funding for first-months rent and deposits  
- Research functioning housing models in other regions/states and address hurdles encountered during start-up  
- Grants and funding dollars that support the unique population needs of Region 5 | - |
| Transportation | Limited transportation available to serve the rural areas of Region 5. Many services/resources are only available in Twin Falls and in some cases Boise (see Access to care in rural areas), therefore citizens in outlying communities and counties have limited opportunities to even make those appointments. The lack of transportation also creates barriers to employment opportunities. | • Promotion and support of the possibility of Twin Falls having a public transportation system  
• Coordination of a shared ride/cost program  
• Combine and coordinate individual vehicle fleets from multiple organizations/agencies/providers to offer efficient public transport from a single transit organization/central dispatch | • Investigate rural transportation models that have proved successful in areas with similar a geographic/population make-up  
• Research and address potential conditions that may affect the operation and coordination of public transit to rural areas  
• Seek expanding the use of Section 5311 funds to communities with populations less than 50,000 |
| Access to Care in Rural Areas | Many providers and services are limited only to the city of Twin Falls. This creates a lack of utilization and access (see Transportation) for citizens around Region 5 that live in the rural areas of our 8 counties. | • Enhance tele-health access by providing a facility/site to house the equipment needed.  
• Use of existing facilities and buildings that are not currently being used to house Community Recovery Centers, Centers for Community Health, and as satellite sites for providers.  
• With Twin Falls on the verge of being considered “Small Urban” | • Research and seek out funding sources and programs that support tele-health initiatives such as  
- The Healthcare Connect Fund  
- Agency for Healthcare Research and Quality Small Research Grant Program  
• Start a ‘mobile clinic’ |
| **Medication Management** | Demand exceeds availability | • Increase access to medication management to reduce avoidable readmissions  
• Enhance communication with care-givers across the continuum of care  
Improve the perception of “Med. Management” and why it is a necessary component of care | • Create awareness and provide accurate information about what medication is  
• Engage and include community providers in the conversations addressing this need  
• Increase access to medications by addressing cost and affordability |
| **Psychiatric Bed Availability (Plan B)** | Law enforcement, providers, and consumers are lacking options when the few beds available fill. | • Increase number of bed availability for adults and youth.  
• Alternative resources for the waiting period until a bed | • Enhance communications between providers and law enforcement to create a more efficient process  
• Seek funding |
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<th><strong>Law Enforcement Training</strong></th>
<th>Difficult for smaller areas to attend full trainings and keep staffed during that time</th>
<th>• CIT trainings are offered and well-received by local law enforcement, however many rural areas are unable to coordinate due to the length of the course.</th>
<th>Propose the idea of shorter mini-training sessions to reach locations that are unable to attend the week-long trainings in one block</th>
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| **Public Education and Outreach** | There is a need to educate the general public about “behavioral health”. The lack of accurate information, on top of media being the general public’s main source of information about mental illness and addiction, contributes to stigma and negative perception. Parenting classes are available in region 5, however very low turn-outs are reported. | • Create mental health education/outreach programs for elementary and middle school aged children  
• Mental health/addiction 101 type trainings for teachers.  
• Develop a resource for employers that addresses common questions, thoughts, and concerns when employing clients and those in recovery in an effort to support success for both parties.  
• Expand Mental Health First Aid trainings to all 8 counties “Normalize” the concept of attending parenting classes in effort to boost attendance and provide valuable tools for families | • Include media outlets such as newspapers, local television, and local radio in conversations about behavioral health and community wellness  
• Seek funding sources for promotion and delivery of educational materials  
• Collaborate with OPTUM to promote and expand the Mental Health First Aid Trainings to a broader audience  
  Work towards evaluating why parenting classes have low attendance and consider re-evaluating how and where parenting classes are presented to the community |
<p>| <strong>Optum SUD</strong> | No system with Optum’s referral system to refer a | Increase diagnosis and Tx for SUD and co-occurring disorders | Request enhanced data reports and measures from |</p>
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<th>Referrals</th>
<th>Translation, Interpreters</th>
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<td>client to a Substance Abuse Provider when that need is identified.</td>
<td>Region 5 lacks interpreter/translators for languages, hearing and visually impaired persons</td>
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| Optum to ensure providers operate within scope of practice. | • Increase access to care for individuals that require interpretation or translation  
• Improved quality of care and outcomes |
| | • Promote and educate regarding the need for this type of service in our region  
Seek funding sources that aim to address this need by promoting training, certification, and community education |