



SB 2012

Senate Appropriations Committee
Senator Bekkedahl, Chairman



Behavioral Health Division, **Policy** | January 17, 2023

1

HHS Goal: Help ND become the healthiest state in the nation

We'll focus on three actions to accomplish this:

Invest in the **FOUNDATIONS** of well-being



Economic Health



Behavioral Health



Physical Health

Ensure everyone has the opportunity to realize their **POTENTIAL**



Strong, Stable Families



Services Closer to Home



Early Childhood Experiences

Efficiency Through Redesign

High-Performing Team

Give everyone the **OPPORTUNITY** to decide to:



Be Healthy



Be Active



Find & Prevent Disease Early



2

What is Behavioral Health?

A state of mental/emotional being and/or choices and actions that affect WELLNESS.



3

Behavioral Health is Health!



4



Mental Health and Physical Health is Fundamentally Linked.

The average lifespan for individuals with serious mental illness is 25-30 years less than the general public.

Individuals with depression have a 40% higher risk of developing heart diseases than the general population.

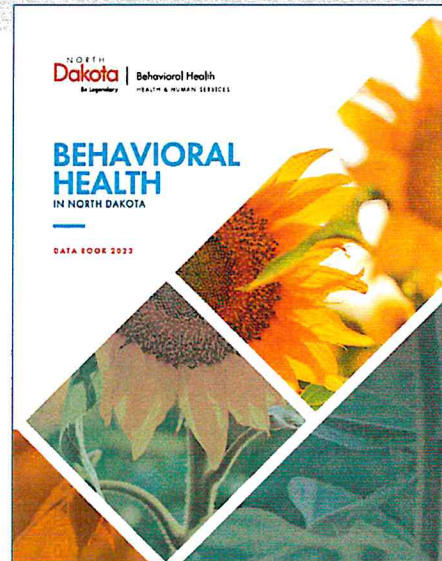


5

Behavioral Health in North Dakota

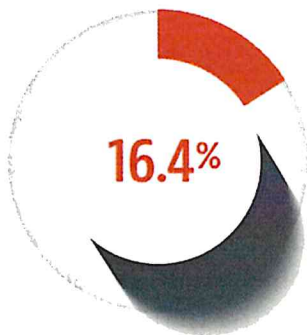
Research shows the importance of using data to guide effective and targeted behavioral health efforts.

Find the 2023 Behavioral Health in North Dakota Data Book and other resources at www.hhs.nd.gov/behavioral-health/data.



6

Adult Substance Use Disorder



An estimated 16.4% of ND adults (18+) met the criteria for a Substance Use Disorder within the last year.³

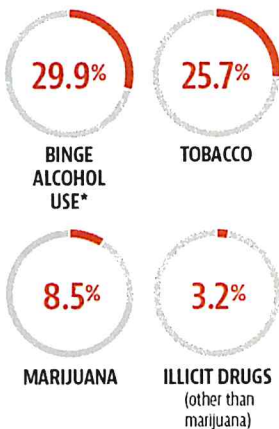
7

Adult Substance Use

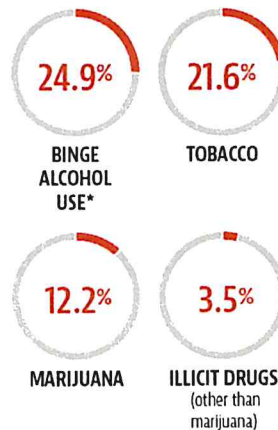
(Age 18+; past 30 days)



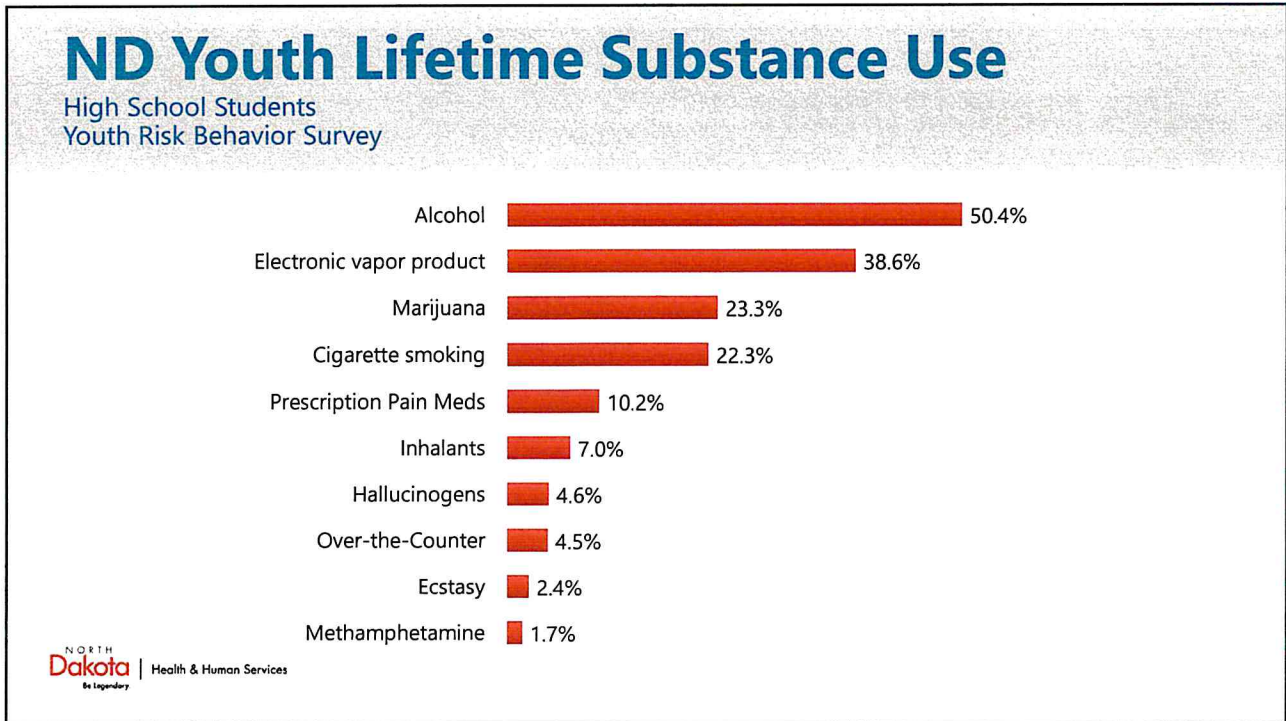
NORTH DAKOTA



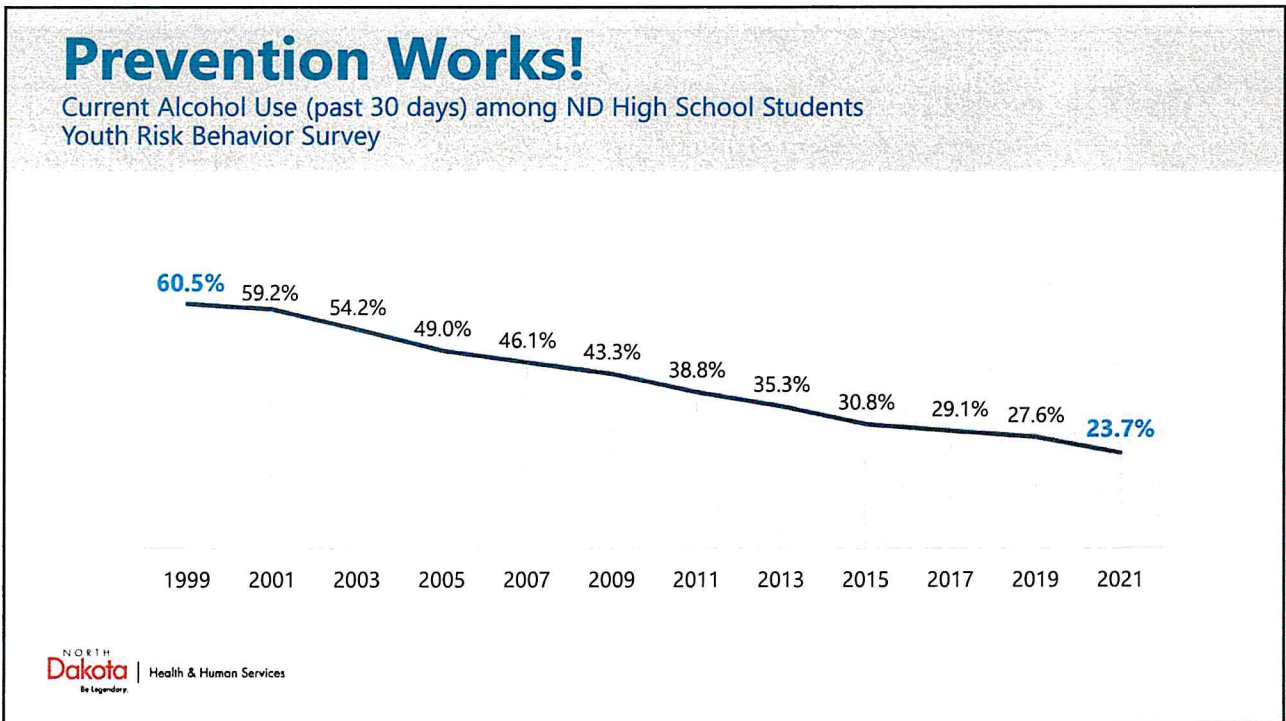
UNITED STATES



8



9



10

Adult Mental Illness



20.79% had any **mental illness** in the past year.³

Approximately 118,000 ND adults (18+) had any mental illness in the past year.³



6.1% reported a **serious mental illness** in the past year.³

Approximately 34,000 ND adults (18+) have serious mental illness in the past year.³

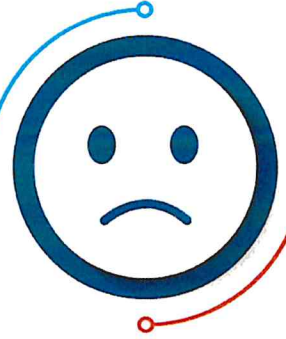
11

Youth Mental Health

ND Youth Risk Behavior Survey, 2021

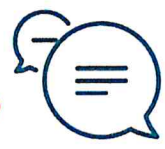
YOUTH

35.1% of ND **middle school** students report feeling sad or hopeless (almost every day for 2 weeks or more in a row during the past year).¹



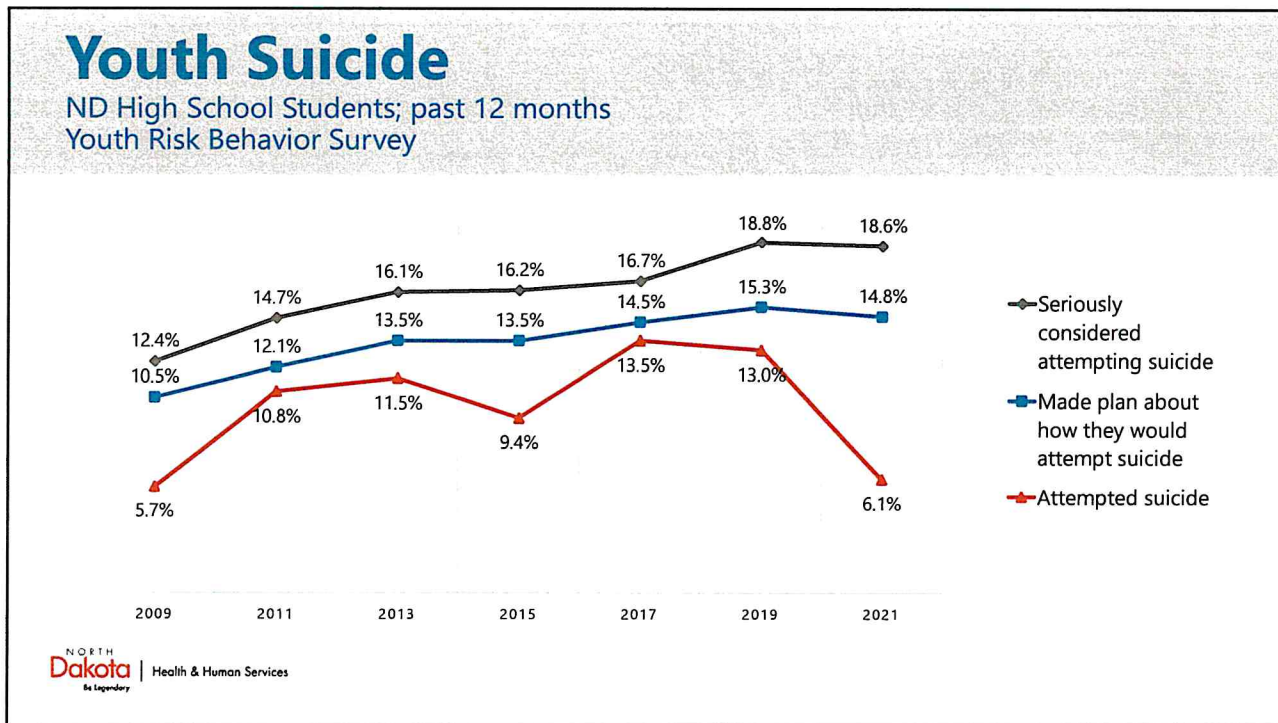
36% of ND **high school** students report feeling sad or hopeless (almost every day for 2 weeks or more in a row during the past year).¹

↑
increase from 23.8% in 2011

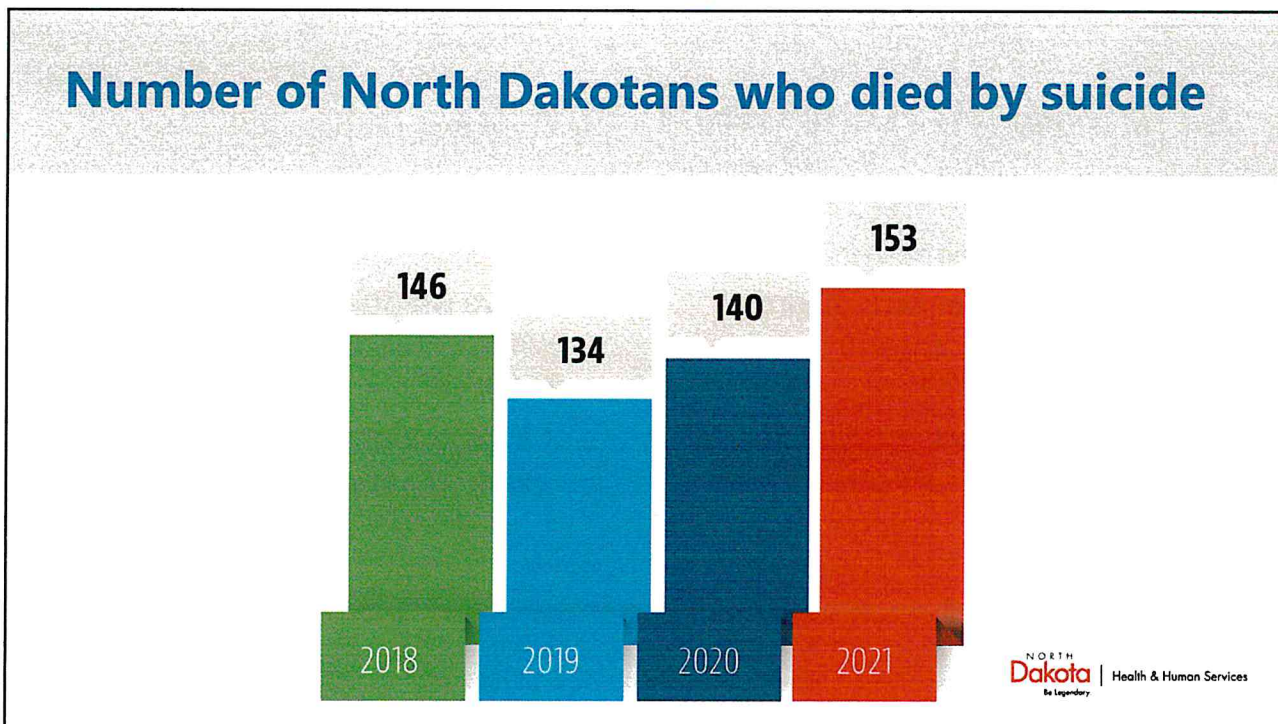


Among those who report feeling sad, hopeless, angry or anxious, **21%** of ND **high school** students report they would most likely talk with their parent or other adult member about their feelings.¹

12



13



14

Mental Health

ND Youth Risk Behavior Survey, 2021



36.4% of ND **high school** students report living with someone who was depressed, mentally ill, or suicidal at some point in their life.¹

NORTH
Dakota | Health & Human Services
Be Legendary

15

Criminal Justice Involvement

Active **Substance Use Disorder** diagnosis when entering correctional facilities:

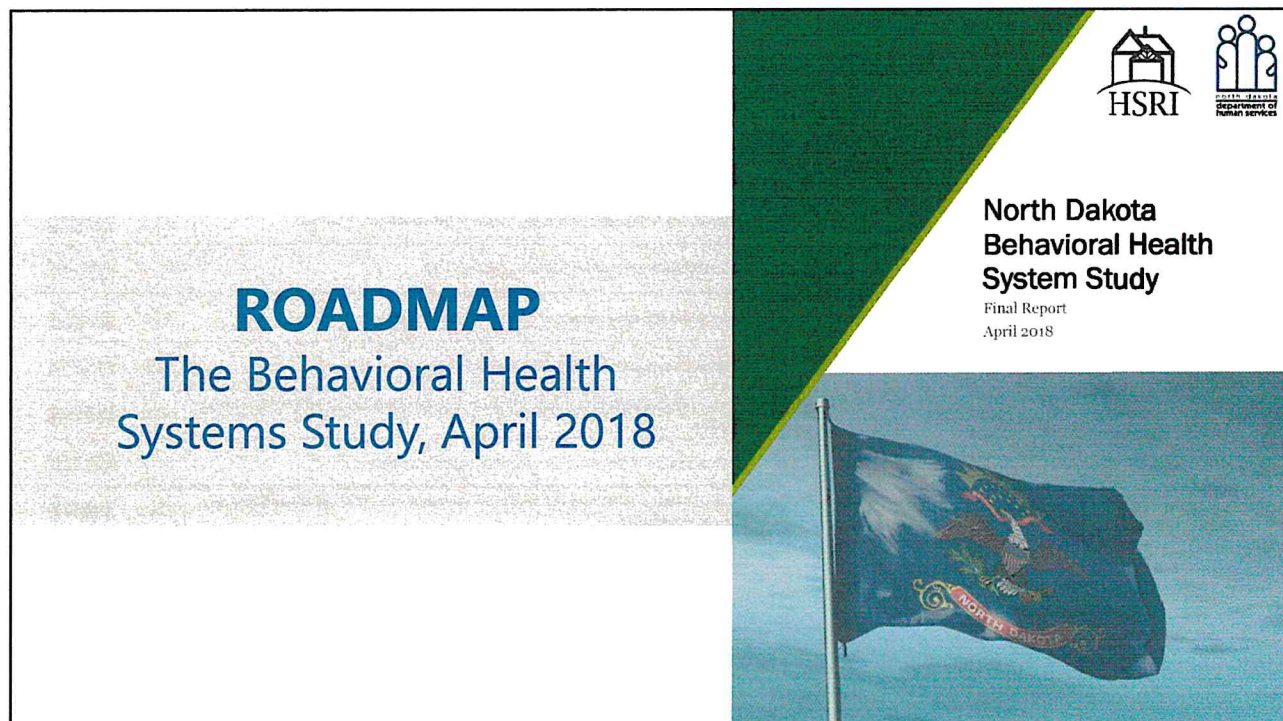
- 95% of women
- 91% of men

Active **Mental Health** diagnosis when entering correctional facilities:

- 52% of women
- 40% of men




NORTH
Dakota | Health & Human Services
Be Legendary


16



17

North Dakota Behavioral Health System Study TIMELINE

 <p>1/1/2017 to 6/30/2018</p> <p>Behavioral Health Division in contract with Human Services Research Institute (HSRI) to conduct an in-depth review of North Dakota's behavioral health system. Final report released April 2018</p>	 <p>8/1/2018 to 6/30/2019</p> <p>Behavioral Health Division in contract with HSRI to initiate and facilitate the implementation of a strategic plan based off the recommendations from the comprehensive study of ND's behavioral health system published April 2018.</p>	 <p>2019 - Present</p> <p>Behavioral Health Division in contract with HSRI to prioritize and refine the strategic plan, including goals and objectives. Initiation of the strategic plan and monitoring and sustaining this implementation.</p>
---	---	---



18

Implementation Summary

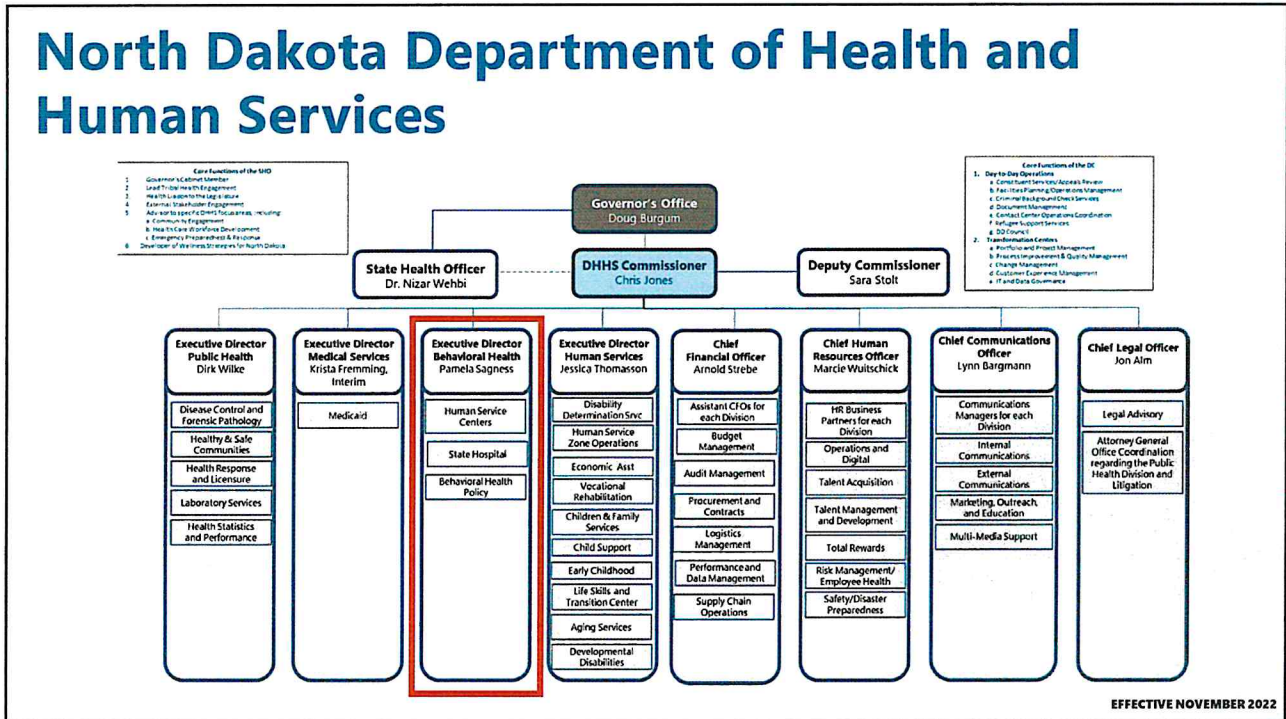
After learning from the community about their priorities for systems change, the Behavioral Health Planning Council selected 13 aims with 28 goals.

Objectives	Complete or In Progress and On Time
1. Develop and implement a comprehensive strategic plan	91%
2. Invest in prevention and early intervention	86%
3. Ensure all North Dakotans have timely access to behavioral health services	81%
4. Expand outpatient and community-based service array	92%
5. Enhance and streamline system of care for children and youth	47%
6. Continue to implement and refine the current criminal justice strategy	71%
7. Engage in targeted efforts to recruit and retain a qualified and competent behavioral health workforce	92%
8. Continue to expand the use of telebehavioral health interventions	82%
9. Ensure the system reflects its values of person-centeredness, health equity, and trauma-informed approaches	78%
10. Encourage and support communities to share responsibility with the state for promoting high-quality behavioral health services	100%
11. Partner with tribal nations to increase health equity for American Indian populations	78%
12. Diversify and enhance funding for behavioral health	100%
13. Conduct ongoing, system-wide, data-driven monitoring of need and access	80%

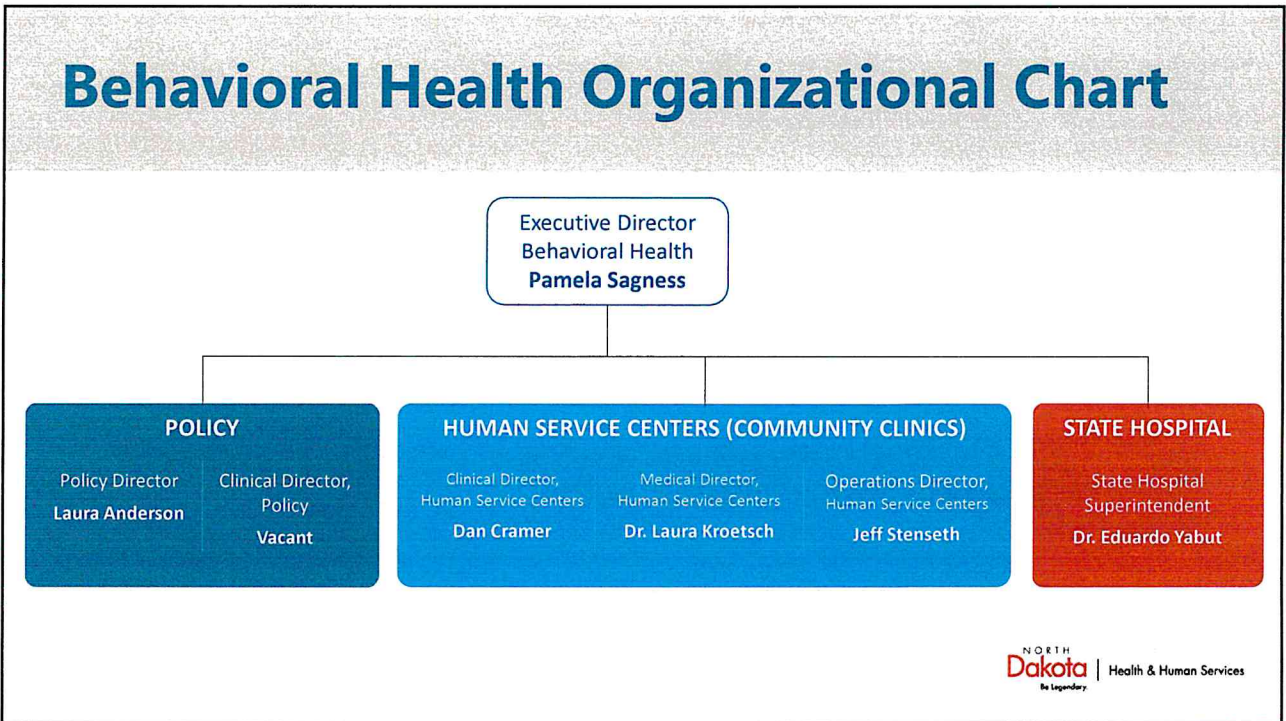
Behavioral Health Division

Who we are



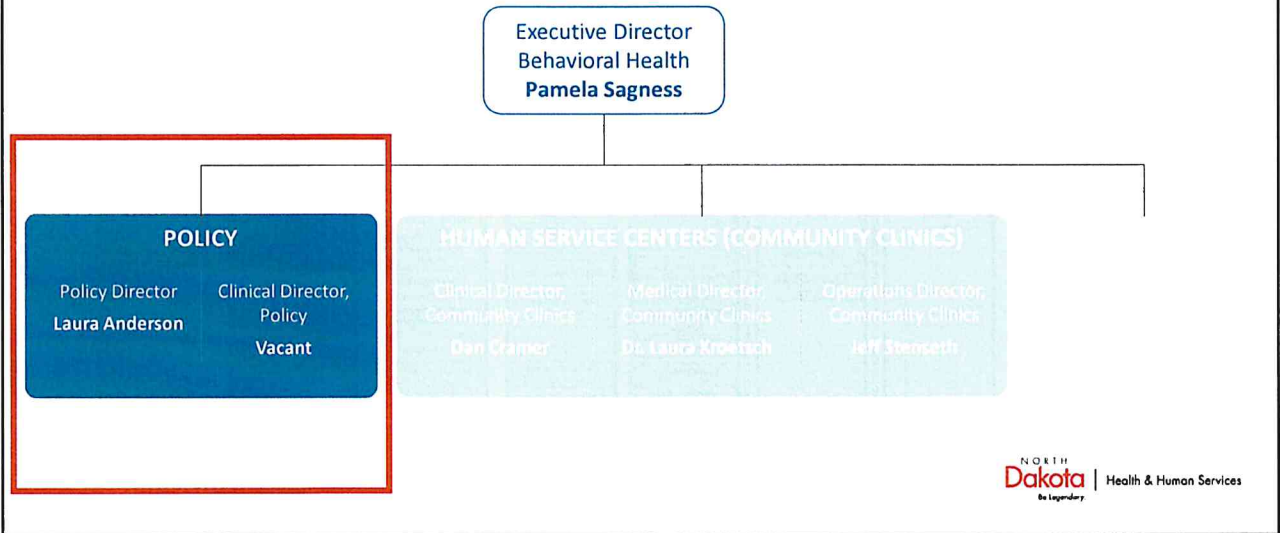


21



22

Behavioral Health Organizational Chart



23

The Behavioral Health Division - Policy Team Responsibilities

NDCC 50-06-01.43 and NDCC 50-31



Reviewing and **identifying service needs and activities** in the state's behavioral health system in an effort to:

- ensure health and safety,
- access to services, and
- quality services.



Establishing **quality assurance standards** for the licensure of substance use disorder program services and facilities



Providing **policy leadership** in partnership with public and private entities

24

We want to see:

Individuals, families and communities with positive behavioral health.

Individuals struggling with behavioral health conditions achieve independence and live a self-directed life in recovery.



25

We achieve this by:



Supporting the Full Continuum of Care



Increasing Community-Based Services















Preventing Criminal Justice Involvement for Individuals with a Behavioral Health Condition



26

Our role is to provide policy leadership, regulate providers, administer programs, and provide training and technical assistance to meet the following goals:

PREVENTION AND PROMOTION	CHILDREN'S BEHAVIORAL HEALTH	ADULT ADDICTION	ADULT MENTAL HEALTH	COMMUNITY SUPPORTS
 Supporting the full continuum of care Increase implementation of effective prevention statewide ^{1,2} Decrease underage drinking ² Decrease adult binge drinking and related consequences ² Decrease opioid misuse and overdose ²	 Supporting the full continuum of care Partner with schools to support children's behavioral health across the continuum ¹	 Supporting the full continuum of care Develop and enhance recovery support services ¹ Develop early intervention capacity ^{2,3}	 Supporting the full continuum of care Develop and enhance recovery support services ¹ Develop early intervention capacity ^{2,3}	 Supporting the full continuum of care Develop and enhance recovery support services ¹
 Increase access to community-based services Promote mental health ¹ Decrease death by suicide ¹⁻³	 Increase access to community-based services Develop early intervention capacity ^{2,3} Increase capacity for community-based services ^{1-3,4} Improve access to quality services ² Improve family-driven services and supports ¹	 Increase access to community-based services Improve access to quality services ² Increase capacity for community-based services ^{1-3,4} Stop shame and stigma surrounding addiction ²	 Increase access to community-based services Increase capacity for community-based services ^{1-3,4} Stop shame and stigma surrounding mental health ²	 Increase access to community-based services Increase capacity for community-based services ^{1-3,4,5}
	 Prevent criminal justice involvement Develop diversion capacity and support children with behavioral health conditions in the justice system ¹			 Prevent criminal justice involvement Develop diversion capacity and support individuals with behavioral health conditions in the justice system ¹

The superscript numbers referenced behind each goal align with the ND Behavioral Health System Study 13 Recommendations

27

Accomplishments



Mental Health Directory



SUD Voucher Grant



Recovery Housing Assistance Program



Permanent Supportive Housing



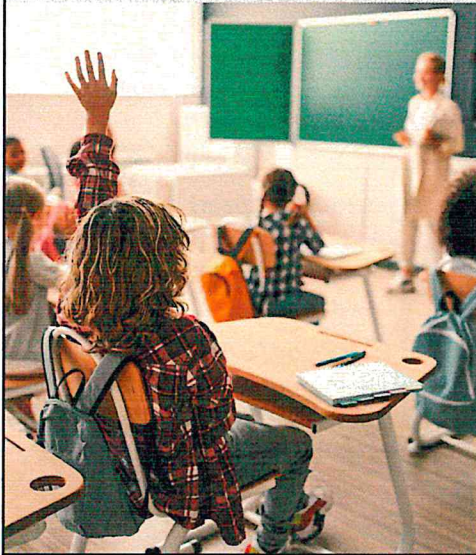
Virtual Behavioral Health Professional Development – Education System (Kognito)



988 Launch

28

Behavioral Health and Education



- Behavioral Health School Grant
- Prevention and Early Intervention Pilot
- Behavioral Health Resource Coordinators (B-HERO)
- Virtual Behavioral Health Professional Development – Education System (Kognito)



29

FREE THROUGH

Recovery

Free Through Recovery is a community based behavioral health program designed to increase recovery support services to individuals involved with the criminal justice system who have behavioral health concerns.

The mission of Free Through Recovery is to:

- improve healthcare outcomes
- reduce recidivism



4,973 participants since February 2017



1,311 active participants




38 providers

Overall, from March 2018 through October 2022, **68%** of the time participants achieved 3 of 4 outcomes.




30




CommunityConnect
My Recovery. My Story.

Community Connect is a community based behavioral health program designed to increase recovery support services to individuals who have behavioral health concerns.


The mission of Community Connect is to provide quality, community-based behavioral health services to meet the needs of each person.



4,025 participants since February 2021




1,899 active participants

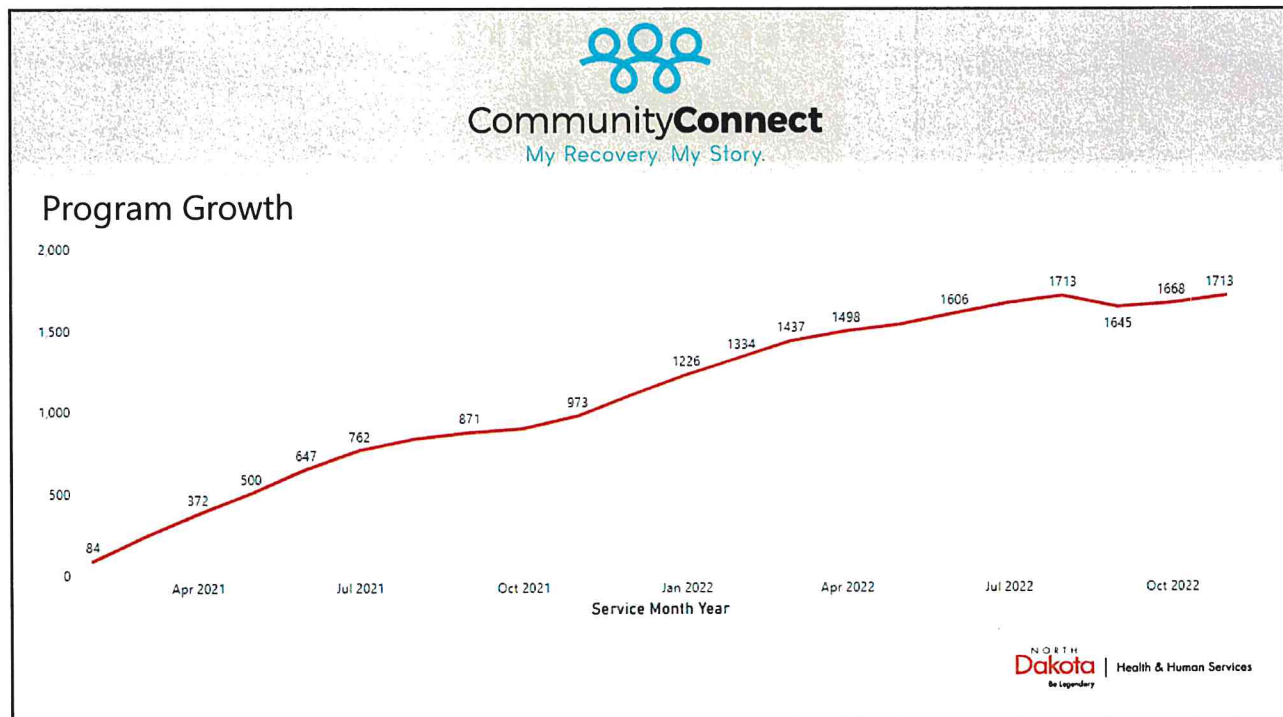


46 providers

Overall, from February 2021, through December 2022, **66%** of the time participants achieved 3 of 4 outcomes.



31



32



2023-2025 Budget request

The **program, systems and workforce support** necessary to continue to serve North Dakotans



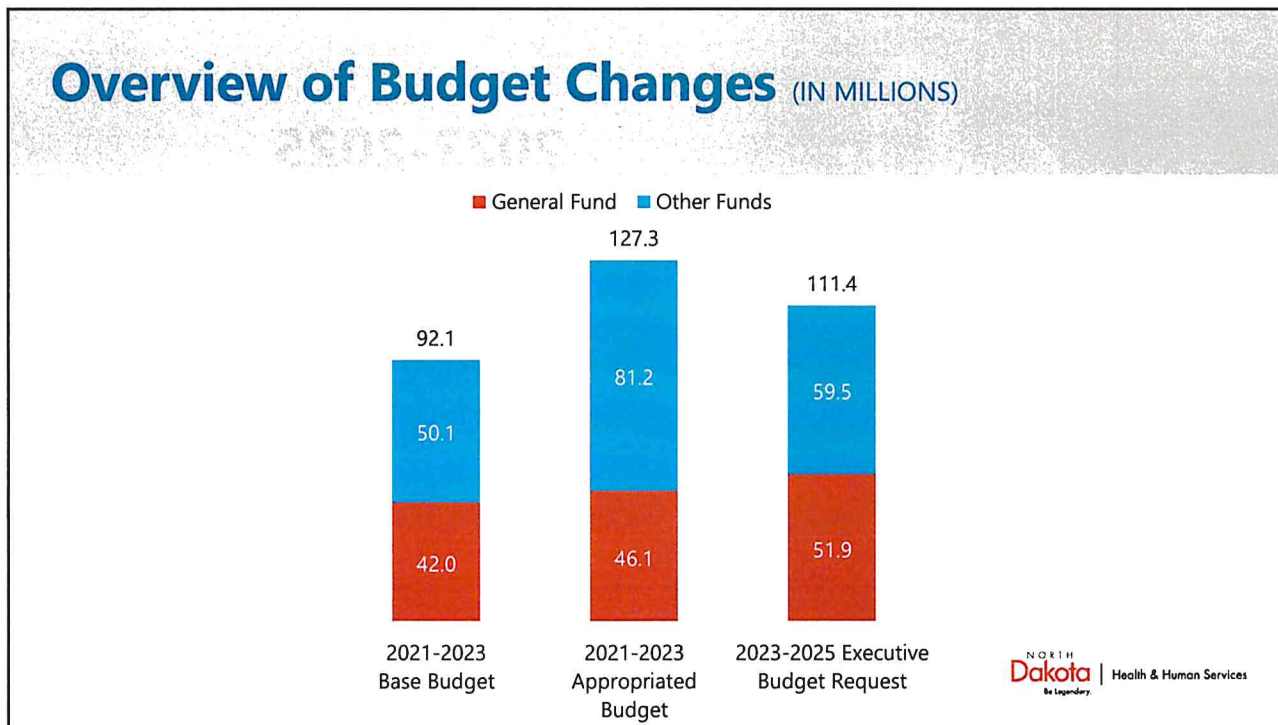
33

Overview of Budget Changes

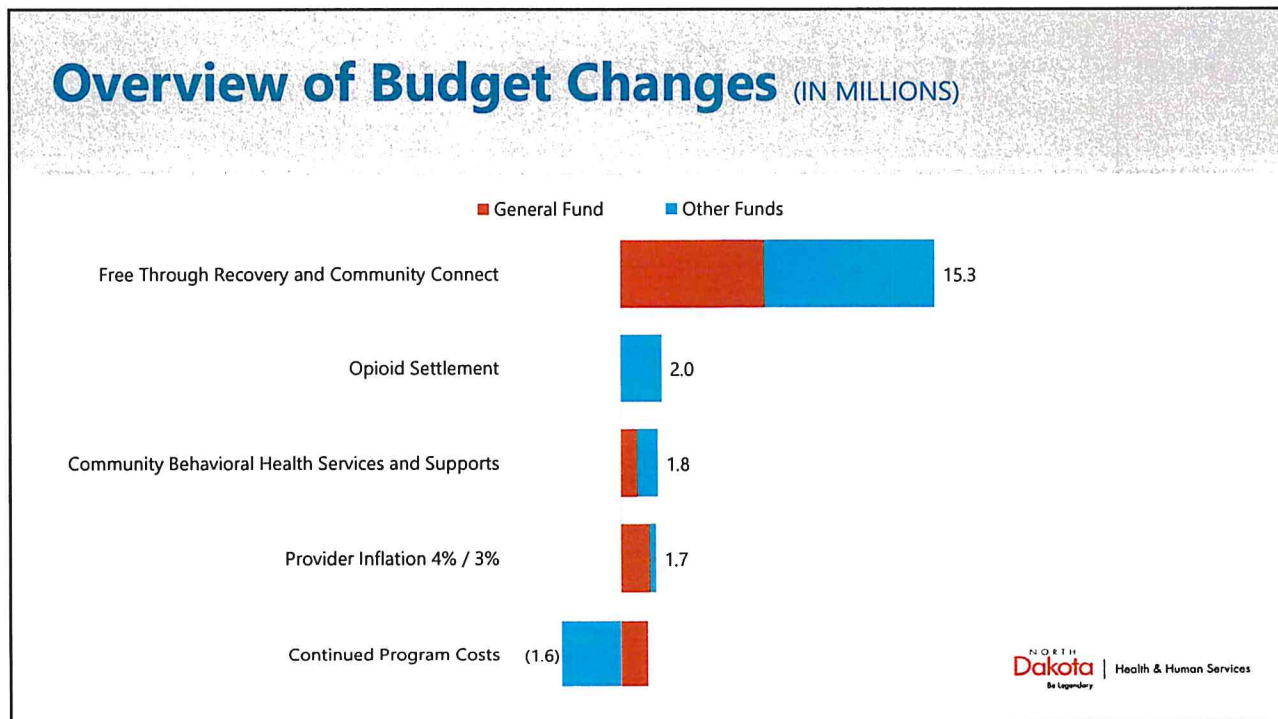
Description	2021 - 2023 Budget Base	Increase/ (Decrease)	2023 - 2025 Executive Budget
Salaries and Benefits	\$7,193,820	\$1,256,196	\$8,450,016
Operating	56,684,267	12,074,085	68,758,352
IT Services	-	-	-
Capital Asset Expense	-	-	-
Capital Assets	-	-	-
Grants	28,220,135	5,932,356	34,152,491
Total	\$92,098,222	\$19,262,637	\$111,360,859
General Fund	\$42,025,043	\$9,877,067	\$51,902,110
Federal Funds	42,297,585	(1,774,062)	40,523,523
Other Funds	7,775,594	11,159,632	18,935,226
Total Funds	\$92,098,222	\$19,262,637	\$111,360,859
Full Time Equivalent (FTE)	37.00	2.00	39.00



34



35



36



Contact Information

Behavioral Health Executive Director

- Pamela Sagness
- psagness@nd.gov

Policy Director

- Laura Anderson
- lauranderson@nd.gov

www.behavioralhealth.nd.gov

NORTH
Dakota | Health & Human Services
Be Legendary

