

Aim	Description	Progress
1	Develop and implement a comprehensive strategic plan	60%
2	Invest in prevention and early intervention	35%
3	Ensure all North Dakotans have timely access to behavioral health services	43%
4	Expand outpatient and community-based service array	68%
5	Enhance and streamline system of care for children and youth	6%
6	Continue to implement and refine the current criminal justice strategy	42%
7	Engage in targeted efforts to recruit and retain a qualified and competent behavioral health workforce	20%
8	Continue to expand the use of telebehavioral health interventions	38%
9	Ensure the system reflects its values of person-centeredness, health equity, and trauma-informed approaches	79%
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	0%
12	Diversify and enhance funding for behavioral health	75%
13	Conduct ongoing, system-wide, data-driven monitoring of need and access	60%

AIM 1. Develop and implement a comprehensive strategic plan

GOAL 1.1 Develop and implement a comprehensive strategic plan

Objective 1: Develop a strategic plan based on the recommendations in the 2018 HSRI report that reflects community priorities and contains actionable, feasible strategies for behavioral health systems change

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Conduct a survey of the community to understand goal priority to inform strategic plan development	12/31/2018	Bevin Croft	Behavioral Health Planning Council	Survey results posted on project website	Complete
1.2 Select strategic goals to include in the plan	12/31/2018	Bevin Croft	Behavioral Health Planning Council	Selected 2020 strategic goals	Complete
1.3 Develop the draft strategic plan	6/30/2019	Bevin Croft	Behavioral Health Planning Council	Draft plan reviewed by the BHPC	Complete
1.4 Finalize the strategic plan based on comprehensive review	1/5/2021	Bevin Croft	Behavioral Health Planning Council	Finalized Plan	Complete

Objective 2: Secure funding for ongoing strategic planning support

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Secure funding for ongoing strategic planning support for 2020-2021 biennium	3/31/2019	Pam Sagness	Behavioral Health Planning Council	Secured Funding	Complete
2.2 Secure funding for ongoing strategic planning support for the biennium beginning 2022	7/1/2021	Pam Sagness	Behavioral Health Planning Council	Secured Funding	Complete

Objective 3: Perform ongoing strategic plan monitoring and revisions as appropriate using quarterly progress reports

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Conduct Winter 2021 progress review and post an updated dashboard on the project website	3/31/2021	Bevin Croft	Behavioral Health Planning Council	Dashboard posted publicly	Complete
3.2 Conduct Spring 2021 progress review and post an updated dashboard on project website	6/30/2021	Bevin Croft	Behavioral Health Planning Council	Dashboard posted publicly	Complete

Objective 4: Create 2022 strategic plan based on progress to date and lessons learned

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Select goals for inclusion in the 2022 strategic plan	10/31/2021	Bevin Croft	Behavioral Health Planning Council	List of 2022 strategic goals - goals may be selected from the 2020 strategic plan or from the larger list	In progress
4.2 Develop the draft 2022 strategic plan	11/30/2021	Bevin Croft	Behavioral Health Planning Council	Draft plan reviewed by the BHPC	Pending
4.3 Finalize the 2022 strategic plan based on comprehensive review	12/31/2021	Bevin Croft	Behavioral Health Planning Council	Finalized Plan	Pending

Objective 5: Strengthen linkages between the BHPC and related stakeholder groups (governmental advisory bodies, coalitions, and community initiatives).

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Identify BHPC members who serve on related governmental bodies and explore process for establishing liaison relationships. Governmental bodies include the Autism Task Force, Brain Injury Advisory Council, Children’s Cabinet, Developmental Disabilities Council, Medicaid Advisory Committee, Olmstead Commission, Interagency Coordinating Committee (DPI).	10/31/2021	Bevin Croft, BHPC Chair	Vivien Solomon (HSRI), BHPC Executive Committee	BHPC members identified	In progress
5.2 Complete stakeholder grid identifying stakeholder groups relevant to each aim in The Plan	12/31/2021	Bevin Croft, BHPC Chair	Vivien Solomon (HSRI), BHPC Executive Committee	Stakeholder grid complete	Complete
5.3 Identify stakeholder groups that are key to progress on the goals in The Plan	11/30/2021	Bevin Croft, BHPC Chair	Vivien Solomon (HSRI), BHPC Executive Committee	Key groups identified	In progress
5.4 Establish a process for sustained communication between BHPC and the key stakeholder groups identified in action step 3.	12/31/2021	Bevin Croft, BHPC Chair	Vivien Solomon (HSRI), BHPC Executive Committee	Process for sustained communication developed for each key stakeholder group	In progress

AIM 2. Invest in prevention and early intervention

GOAL 2.1 Develop a comprehensive suicide prevention approach

Objective 1: Develop cross-cutting workgroup (including both public and private entities)

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Convene relevant entities to review and assess current suicide prevention efforts.	6/30/2021	Moriah Opp		Workgroup met	Complete
1.2 Develop roles and expectations for entities in the workgroup	11/30/2021	Moriah Opp	Workgroup	Roles and expectations documented in workgroup charter	In progress

Objective 2: Conduct a scan of suicide prevention activities in all behavioral health and primary healthcare systems in the state

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Develop a scan protocol including an instrument, data collection protocol, sample frame, and recruitment strategy	3/31/2022	Moriah Opp	Workgroup	Scan protocol developed	In progress
2.2 Complete scan and review data to establish baseline levels of suicide prevention activities	6/30/2022	Moriah Opp	Workgroup	Scan completed and baseline efforts documented	Pending

Objective 3: Engage with the community to enhance awareness and gather information on community priorities for suicide prevention to inform a comprehensive suicide prevention plan

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Hold at least one community event to enhance awareness and gather information on community priorities for suicide prevention to inform the comprehensive suicide prevention plan	2/24/2021	Moriah Opp		Awareness event held at NDSPC 4th Annual Conference	Complete
3.2 Solicit web-based community feedback (via a survey or web page) to understand community priorities to inform the comprehensive suicide prevention plan	1/1/2022	Moriah Opp	Workgroup	Web-based feedback	In progress

Objective 4: Develop the comprehensive suicide prevention plan focused on decreasing risk factors and increasing protective factors

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Create a 2021 suicide prevention funding strategy taking into account available data and stakeholder feedback.	9/30/2021	Moriah Opp	Workgroup	Funding allocated based on the strategy	Complete
4.2 Identify funding, including state suicide prevention funding, to support implementation of the comprehensive suicide prevention plan through 2023	3/12/2021	Moriah Opp		Funding awarded to 10 organizations through 2023	Complete
4.3 Create a 2022-23 data-driven Suicide Prevention Plan that incorporates activities focused on decreasing risk factors and increasing protective factors to prevent suicide into the overall behavioral health continuum of care	9/30/2022	Moriah Opp	Workgroup	Plan developed	Pending
4.4 Identify funding for the plan in the following biennium	12/30/2022	Moriah Opp	Workgroup	Funding awarded based on plan	Pending

GOAL 2.2 Expand suicide prevention activities with a focus on American Indian populations, LGBTQ communities, and military service members, veterans, family members, and survivors

Objective 1: Research and implement strategies to increase the responsiveness of suicide prevention materials and activities for LGBTQ and gender non-conforming communities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 LGBTQ+ advocates will work with the BHD to review existing suicide prevention materials and activities and provide suggestions for increasing the responsiveness of those materials and activities for LGBTQ/GNC populations	12/31/2021	Moriah Opp	LGBTQ+ advocates	Completed review; Suggestions for enhancing responsiveness of materials and activities	In progress
2.2 BHD will identify strategies and opportunities for increasing the responsiveness of suicide prevention materials and activities for LGBTQ/GNC populations	3/31/2022	Moriah Opp	LGBTQ+ advocates	List of strategies and opportunities	Pending

Objective 2: Research and implement strategies to increase the responsiveness of suicide prevention materials and activities for American Indian populations

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 In partnership with tribal representatives, review existing suicide prevention materials and activities and provide suggestions for increasing the responsiveness of those materials and activities for American Indian populations	12/31/2021	Moriah Opp	Indian Affairs – Brad Hawk	Completed review; Suggestions for enhancing responsiveness of materials and activities	In progress
2.2 BHD will identify strategies and opportunities for increasing the responsiveness of suicide prevention materials and activities for American Indian populations	3/31/2022	Moriah Opp	Indian Affairs – Brad Hawk	List of strategies and opportunities	Pending

Objective 3: Research and implement strategies to increase the responsiveness of suicide prevention materials and activities for service members, veterans, family members, and survivors

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 In partnership with the National Guard and North Dakota Cares coalition, review existing suicide prevention materials and activities and provide suggestions for increasing the responsiveness of those materials and activities for service members, veterans, family members, and survivors	12/31/2021	Moriah Opp	National Guard; ND Cares	Completed review; Suggestions for enhancing responsiveness of materials and activities	In progress
3.2 BHD will identify strategies and opportunities for increasing the responsiveness of suicide prevention materials and activities for service members, veterans, family members, and survivors	12/31/2021	Moriah Opp	National Guard; ND Cares	List of strategies and opportunities; 70 schools implementing a suicide prevention program, to include sustaining the current schools	Pending

Objective 4: Expand evidence-based, culturally responsive upstream/primary prevention suicide programs in schools in North Dakota and within tribal nations

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Expand evidence-based, culturally relevant upstream/primary prevention suicide programs in North Dakota schools	3/29/2021	Moriah Opp	Indian Affairs - Brad Hawk	SB 2311 passed—use Kognito for k-12, includes culturally responsive training	Complete
4.2 In partnership with tribal representatives, coordinate at least one evidence-based, culturally responsive suicide prevention program or training within each Bureau of Indian Education (BIE) school	3/29/2021	Moriah Opp	Sources of Strength; Indian Affairs - Brad Hawk	SB 2311 passed—use Kognito for k-12, includes culturally responsive training	Complete

Objective 5: Work with higher education programs that train school counselors to adopt suicide prevention training models in alignment with workgroup recommendations

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Meet with representative’s higher education programs to discuss and review current practices and potential models	9/30/2021	Moriah Opp	University System – Katie Fitzsimmons	Documentation of discussions with representatives from the three universities	Complete
5.2 Select models for use in higher education programs that train school counselors.	12/31/2021	Moriah Opp	University System – Katie Fitzsimmons	Model selected	In progress

AIM 3. Ensure all North Dakotans have timely access to behavioral

Goal 3.1 Identify universal age-appropriate, culturally sensitive, evidence-based behavioral

Objective 1: Conduct a scan of behavioral health screening instruments and processes currently used in all human services settings

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Develop a scan protocol including data collection process, sample frame, and recruitment strategy, and means of assessing cultural sensitivity and implementation readiness	12/31/2021	Sara Stolt	Rosalie Etherington; Cory Pederson	Scan protocol	In progress
1.2 Complete scan to generate list of current tools and assess adequacy of current tools, extent of use, and potential implementation barriers and facilitators	3/31/2022	Sara Stolt	Rosalie Etherington; Cory Pederson	Completed scan; Relevant entities review scan data; Documented baseline levels of screening activities	Pending

Objective 2: Identify a set of behavioral health screening instruments for use in all human services settings

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Using the scan data and research literature on best practice, select a set of culturally sensitive, evidence-based candidate screening tools	6/30/2022	Sara Stolt	Rosalie Etherington; Cory Pederson	Set of candidate tools	Pending
2.2 Meet with representatives from all human services settings to review and select from the list of candidate tools	8/31/2022	Sara Stolt	Rosalie Etherington; Cory Pederson	Meeting of representatives; Final set of screenings	Pending

Objective 3: Assess administrative rules and revise as needed to include requirements for completing screenings, and ensure all new contracts include a requirement to complete screenings

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Assess administrative rules and revise as needed to include requirements that all substance use disorder treatment providers licensed through BHD complete screenings specified by BHD	9/30/2021	Sara Stolt	Rosalie Etherington; Cory Pederson; Pam Sagness	Completed draft administrative rules that include screening requirements	Pending
3.2 Ensure all new BHD contracts with providers include a requirement to complete screenings and report screening data to BHD	12/31/2021	Sara Stolt	Rosalie Etherington; Cory Pederson; Pam Sagness	All new contracts created in state fiscal year 2020 include screening and data reporting requirements	Pending

Objective 4: Revise policies so information from evidence-based trauma screening tools are privileged and may only be used for screening, treatment, referral, and services, or in the aggregate for data monitoring and analysis

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Revise North Dakota Century Code so that information from evidence-based trauma screening tools are privileged and may only be used for screening, treatment, referral, and services, or in the aggregate for data monitoring and analysis	4/30/2019	Sara Stolt	Rosalie Etherington; Pam Sagness	Revised Century Code (passage of HB 1108)	Complete
4.2 Review and revise relevant entities' policies so that information from evidence-based trauma screening tools may only be used for screening, treatment, referral, and services, or in the aggregate for data monitoring and analysis	8/1/2019	Sara Stolt	Cory Pederson	Revised policies	Complete

Goal 3.2 Establish statewide mobile crisis teams for children and youth in urban areas

Objective 1: Expand funding for mobile crisis teams for children and youth in urban areas

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Secure funding for expanded crisis services	10/31/2019	Rosalie Etherington		Secured funding	Complete
1.2 Identify opportunities for Medicaid reimbursement for mobile crisis services	7/30/2021	Rosalie Etherington		Completed review of Medicaid state plan for potential opportunities	Complete

Objective 2: Review existing mobile crisis programs to understand implementation challenges and opportunities and inform efforts to scale the service out to other areas of the state

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Review existing mobile crisis program in Fargo to understand implementation challenges and opportunities, explore relevance to the child/youth population, and inform efforts to scale the service out to other areas of the state	7/30/2021	Lyden Ring, Alanna Zellar		Completed review	Complete
2.2 Review national crisis response programs to understand implementation challenges and opportunities and inform efforts to scale the service out to other areas of the state	7/30/2021	Lyden Ring, Alanna Zellar		Completed review	Complete

Objective 3: Create contract language for mobile crisis teams for children and youth in urban areas

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Create draft contract language for mobile crisis teams for children and youth in urban areas	7/30/2021	Lyden Ring, Alanna Zellar		Draft contract language	Complete
3.2 Finalize contract language for mobile crisis teams for children and youth in urban areas	7/30/2021	Lyden Ring, Alanna Zellar		Finalized contract language	Complete

Goal 3.3: Ensure people with brain injury and psychiatric disability are aware of eligibility

Objective 1: Review and revise Nursing Facility Level of Care criteria to reduce access barriers for people with brain injury

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Review and revise Level of Care determination required for Medicaid to reimburse for Nursing Home and HCBS to include brain injury	4/1/2020	Krista Fremming	Aging Services - Nancy Nikolas-Maier; ND BIN - Rebecca Quinn; DHS - Jessica Thomasson	Revised Level of Care screening determination	Complete

Objective 2: Review eligibility determination processes across all DHS Divisions to identify access barriers for people with brain injury

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Review eligibility determination processes across all DHS Divisions to identify access barriers for people with brain injury	3/31/2021	Jessica Thomasson	ND BIN – Rebecca Quinn; DHS DD – Tina Bay; DHS Aging – Nancy Nikolas Meier; DHS FS – Rosalie Etherington; DHS CFS – Cory Pedersen; DHS Med Svc – Caprice Knapp; DHS BHD – Pam Sagness	Completed review of eligibility determination processes	Complete

Objective 3: Based on the review, revise policy and procedure to reduce access barriers for people with brain injury

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Based on the review, revise policy and procedure to reduce barriers in access to treatment	12/31/2021	Jessica Thomasson	ND BIN - Rebecca Quinn	Revised policy and procedure	In progress

Objective 4: Promote provider awareness of services and eligibility using accurate and up-to-date materials

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Create guidance for all DHS providers on eligibility determination processes	3/31/2022	Jessica Thomasson	ND BIN – Rebecca Quinn; DHS inter-division team	Guidance created	Pending
4.2 Issue guidance for all DHS providers on eligibility determination processes	6/30/2022	Jessica Thomasson	ND BIN – Rebecca Quinn; DHS inter-division team	Guidance issued	Pending

Objective 5: Establish navigation to facilitate eligibility determination and referral to services for people with brain injury

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Establish a hub to facilitate eligibility determination and referral to brain injury service	6/30/2022	Jessica Thomasson	ND BIN - Rebecca Quinn	Hub established	Pending

Objective 6: Incorporate information about brain injury prevention into existing behavioral health

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
6.1 Incorporate information about brain injury prevention into existing behavioral health prevention programming	3/31/2022	James Knopik	DHS - Jessica Thomasson; ND BIN - Rebecca Quinn; DoH Injury Prevention	Revised behavioral health prevention programming	Pending
6.2 Incorporate brain injury prevention materials into prevention dissemination avenues including Parentslead.	1/31/2022	James Knopik	ND BIN - Rebecca Quinn	Revised and disseminated behavioral health materials	In progress

AIM 4. Expand outpatient and community-based service array

Goal 4.1 Provide targeted case management services based on assessed need, with a focus on enhancing self-sufficiency and connecting to natural supports and appropriate services

Objective 1: Revise the Medicaid state plan to include private providers of targeted case management services for adults with serious mental illness and children with serious emotional disturbance

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Adjust the Medicaid plan to include private providers of targeted case management services for adults with serious mental illness and children with serious emotional disturbance.	5/1/2020	Krista Fremming		Revised Medicaid state plan	Complete

Objective 2: Use the Daily Living Activities Functional Assessment (DLA) to inform transitions to and from targeted case management consistently across Human Service Center (HSC) regions

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Ensure DLA data are accessible in the electronic health record	12/31/2019	Rosalie Etherington		DLA accessible in electronic health record	Complete
2.2 Analyze data at the individual and regional level to identify individuals ready for transition out of targeted case management services and into appropriate alternative services	12/31/2019	Rosalie Etherington		Data reports identifying transition readiness and demographic and regional trends	Complete

Objective 3: Expand capacity within HSCs to support transitions from HSC services to primary care for

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Educate HSC prescribers to collaborate with health systems to support transition and act in a consultative role	12/31/2019	Dr. Laura Kroetsch, Rosalie Etherington		Provider competency evidenced by successful completion of orientation and training; Prescribers identify one community provider with whom they can partner	Complete

Goal 4.2 Expand evidence-based, culturally supportive housing

Objective 1: Receive technical assistance through the Medicaid Innovation Accelerator Program

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Complete all activities associated with the Medicaid IAP TA Plan for North Dakota	8/1/2020	Jake Reuter	MA – Dawn Pearson	Completion of TA	Complete

Objective 2: Increase access to supportive housing in rural areas

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Strengthen linkages between existing affordable housing and supportive services in rural areas	12/31/2020	Jake Reuter	MA – Dawn Pearson; NDHFA – Jennifer Henderson; BHD – Tami Conrad; FS – Tonya Perkins	Outreach and information sharing events in each HSC region	Complete
2.2 Conduct outreach to increase awareness about the application process for affordable housing – including Section 8 – particularly in rural communities	8/31/2021	Jake Reuter	MA – Dawn Pearson; NDHFA – Jennifer Henderson; BHD – Tami Conrad; FS – Tonya Perkins	At least two outreach events conducted in each region	Complete

Objective 3: Establish quality standards for all supportive housing services in the state

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Based on national best practice and local context, create a plan for assessing quality and cultural responsiveness to single site supportive housing. And determine who should monitor quality service delivery.	10/31/2021	Jake Reuter	MA – Dawn Pearson; BHD – Tami Conrad	Single site quality supportive housing standards developed	Complete
3.2 Create best practices for quality and cultural responsiveness for supportive service delivery to scattered site supportive housing projects. Identify services and gaps related to tenants in the project.	10/31/2021	Jennifer Henderson	Aging Services - Jake Reuter	Scattered site quality supportive services standards developed	In progress

Objective 4: Engage in evaluation and continuous quality improvement to support sustainability of supportive housing services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Through 1915i state plan amendment process define supportive housing services and apply those definitions across continuum of care, as applicable.	3/31/2022	Jake Reuter	Heather Brandt MA- Dawn Pearson; BHD- Tami Conrad	Ongoing funding for data analysis and monitoring	Pending
4.2 Create a protocol for analyzing outcomes and quality of current and planned supportive housing	6/30/2022	Jake Reuter	Heather Brandt MA- Dawn Pearson; BHD- Tami Conrad	Outcomes and Fidelity Protocol	Pending
4.3 Review capacity of all supportive housing providers to collect and report required outcomes and quality data	9/30/2022	Jake Reuter	Heather Brandt MA- Dawn Pearson; BHD- Tami Conrad	Documentation of provider capacity	Pending
4.4 Revise contractual requirements to include outcomes and quality measurement and reporting requirement	12/31/2022	Jake Reuter	Heather Brandt MA- Dawn Pearson; BHD- Tami Conrad	Revised contractual requirements	Pending

Objective 5: Finance additional permanent supportive housing

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Collaborate with communities to identify where projects with PSH services could feasibly be implemented and determine locations for future development	10/31/2019	Jennifer Henderson		Projects identified	Complete
5.2 Secure state financing for additional permanent supportive housing	5/31/2021	Jake Reuter		Secured financing	Complete
5.3 Finalize state financing for additional permanent supportive housing	11/30/2021	Jake Reuter		Approved financing	In progress
5.4 Develop additional supportive housing for families with children	8/14/2019	Jake Reuter		Plans for additional project in place	Complete
5.5 Examine state plans and funding eligibility documents to ensure opportunities for innovative approaches to delivery of supportive housing	12/31/2021	Jake Reuter		List of opportunities for innovative approaches for future consideration	In progress

Goal 4.3 Expand school-based mental health and substance use disorder treatment services

Objective 1: Maximize opportunities for Medicaid reimbursement of school-based mental health and substance use disorder treatment services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Create training/resource documents to help schools understand the options for Medicaid reimbursement for school-based services.	1/29/2021	Krista Fremming	BHD – Pam Sagness, Amanda Francis	Completed review; List of Medicaid-reimbursable services	Complete
1.2 Disseminate information about Medicaid reimbursement of school-based services through webinars, conferences and emails.	5/31/2022	Krista Fremming	BHD – Pam Sagness, Amanda Francis	Information disseminated using five methods	Pending

Objective 2: Develop and disseminate a tool for schools to use in developing comprehensive behavioral health supports

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Adopt a crosswalk between the Multi-Tiered System of Support (MTSS) and the behavioral health system of care	5/31/2019	Amanda Francis		Crosswalk of MTSS and BH Continuum of Care	Complete
2.2 Review outcomes and implementation data from the Simle Middle School Behavioral Health Pilot to identify aspects that should be scaled out to other schools in the state.	5/31/2019	Amanda Francis		Review of outcomes completed	Complete
2.3 Identify successful (evidence-based, culturally responsive, trauma-informed, youth-centered) local and national models of school-based services that could be adopted	6/30/2019	Amanda Francis		List of promising models	Complete
2.4 Develop tool that summarizes aspects of the pilot and other models that could be adopted by schools	6/30/2021	Laura Anderson, Amanda Francis		Tool developed	Complete
2.5 Disseminate tool to North Dakota schools	7/31/2021	Laura Anderson, Amanda Francis	Russ Riehl	Tool disseminated	Complete

AIM 5. Enhance and streamline system of care for children and youth

Goal 5.1 Establish and ratify a shared vision of a community system of care for children and youth

Objective 1: Establish a vision of a state system of care for children and youth

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Draft preliminary materials depicting a state system of care for children and youth based on the System of Care literature and national best practice, informed by state-specific contexts and groups	3/31/2022	Jessica Thomasson	CFS; BHD; Field; Tribal and Other Partners	Draft System of Care materials	In progress
1.2 Meet with relevant entities and representatives from relevant initiatives and work groups to review and discuss the draft materials	6/30/2022	Jessica Thomasson	Consumers; Community Partners; Child and Family Advocacy Groups	Meetings with all relevant entities; Summary of community feedback and reflections	Pending
1.3 Amend draft materials based on stakeholder feedback	9/30/2022	Jessica Thomasson	CFS; BHD; Field; Tribal and Other Partners	Final System of Care materials	Pending

Objective 2: Convene all relevant stakeholders to ratify the shared vision of a community system of care for children and youth

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Meet with all relevant stakeholders to ratify the shared vision of a community system of care for children and youth	9/30/2022	Jessica Thomasson	Consumers; Community Partners; Child and Family Advocacy Groups; CFS; BHD; Field; Tribal and Other Partners	Ratified System of Care materials	Pending

Objective 3: Submit a response to the SAMHSA System of Care Expansion and Sustainability Grant Funding Opportunity Announcement to support system of care planning and expansion in North Dakota

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Submit a response to the SAMHSA System of Care Expansion and Sustainability Grant Funding Opportunity Announcement	7/31/2019	Kelli Ulberg		Response submitted	Complete

Goal 5.2 Expand culturally responsive, evidence-based, trauma-informed wraparound services for children and families

Objective 1: Establish a shared definition of wraparound services that will be used in future contractual and policy documents

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Draft a statewide definition of wraparound services based on national and local best practice that aligns with the shared vision of the community system of care (Goal #4.1)	3/31/2022	Sara Stolt	FS – Rosalie Etherington	Draft definition	In progress
1.2 Review and finalize definition with all relevant entities	6/30/2022	Sara Stolt	FS – Rosalie Etherington	Finalized definition	Pending

Objective 2: Establish fidelity standards to apply to all wraparound services in the state

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Conduct a scan of existing fidelity standards used in the state and national fidelity standards, and assess those standards for cultural responsiveness and applicability to local programs	3/31/2022	Sara Stolt	FS – Rosalie Etherington	Scan of local and national fidelity standards	In progress
2.2 Based on the scan, identify fidelity standards to use with all wraparound services in the state	6/30/2022	Sara Stolt	FS – Rosalie Etherington	State-specific fidelity standards	Pending

Objective 3: Engage in evaluation and continuous quality improvement to support sustainability of wraparound services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Secure needed resources for ongoing data analysis and monitoring	6/30/2022	Sara Stolt	FS – Rosalie Etherington	Resources allocated	Pending
3.2 Create a protocol for analyzing outcomes and fidelity to wraparound services	9/30/2022	Sara Stolt	FS – Rosalie Etherington	Outcomes and Fidelity Protocol	Pending
3.3 Ensure all wraparound providers have the capacity to collect and report required outcomes and fidelity data	9/30/2022	Sara Stolt	FS – Rosalie Etherington	Documentation of provider capacity	Pending
3.4 Ensure all contracts include outcomes and fidelity measurement and reporting	12/31/2022	Sara Stolt	FS – Rosalie Etherington	Revised contractual requirements	Pending

Goal 5.3 Expand in-home community supports for children, youth, and families— including family skills training and family peers

Objective 1: Map the current capacity, location, financing, oversight, eligibility, staffing, and populations served for all existing in-home services in the state

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Map the current availability, financing, oversight, eligibility, staffing, and populations served for existing in-home services in the state and use this information to inform expansion and quality improvement activities.	6/30/2022	Sara Stolt	BHD - Kelli Ulberg; FS - Rosalie Etherington	Complete and comprehensive map of in-home services	In progress

Objective 2: Expand access to in-home community supports for Medicaid beneficiaries

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Review Medicaid eligibility requirements and eligibility determination processes to identify potential barriers to access to medically necessary services, and identify strategies to address those barriers	3/31/2022	Sara Stolt	Pam Sagness; Cory Pederson	Completed review of eligibility requirements; Strategies to expand access	In progress
2.2 Create an action plan to address access barriers and implement strategies to expand access to in-home community supports for Medicaid beneficiaries	6/30/2022	Sara Stolt	Pam Sagness; Cory Pederson	Action plan	Pending

Objective 3: Expand access to in-home community supports for individuals without Medicaid

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Meet with relevant entities to identify a set of actionable, feasible strategies to expand access to in-home supports for individuals who can't access these services through other means	6/30/2022	Sara Stolt	Pam Sagness; Cory Pederson	Strategies to expand access	In progress
3.2 Draft an action plan to implement strategies to expand access to in-home supports for individuals who can't access these services through other means	9/30/2022	Sara Stolt	Pam Sagness, Cory Pederson	Action plan	Pending

AIM 6. Continue to implement and refine the current criminal justice strategy

Goal 6.1 Implement a statewide Crisis Intervention Team training initiative for law enforcement, other first responders, and jail and prison staff

Objective 1: Identify and secure training resources

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Identify grant funding opportunities to support a statewide CIT initiative	1/31/2022	Amy Veith	BHD – Heather Brandt	Training resources identified	In progress
1.2 Pursue grant funding for a statewide CIT initiative	9/30/2022	Amy Veith	BHD – Heather Brandt	Submitted grant application	Pending
1.3 Identify additional funding sources to support a statewide CIT initiative	9/30/2022	Amy Veith	BHD – Heather Brandt	Available resources secured	In progress

Objective 2: Create a plan for a statewide Crisis Intervention Team initiative based on local and national best practice

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Engage with law enforcement, jail administrators, and EMS groups to understand their preferences and priorities for a statewide CIT Initiative	2/28/2019	Lisa Peterson, Amy Veith	DoH - Chris Price and Kerry Krikava; Jail Administrators Group; Sheriffs and entities	Documented conversations with law enforcement groups jail administrators, and EMS	Complete
2.2 Conduct a local and national scan of best practice in CIT initiatives	5/31/2018	Lisa Peterson, Amy Veith	BHD – Heather Brandt; DoH – Chris Price and Kerry Krikava; Heartview – Doug Herzog	Scan completed	Complete
2.3 Conduct a scan of best practice in cultural adaptations of CIT for American Indian populations	5/31/2018	Lisa Peterson, Amy Veith	BHD - Heather Brandt	Scan completed	Complete
2.4 Create a plan for a statewide CIT initiative based on local and national best practice	5/31/2022	Amy Veith	BHD - Heather Brandt	Draft plan	In progress

Objective 3: Secure buy-in and commitment from at least one agency of each type in each human services region

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Secure buy-in and commitment from at least four law enforcement agencies	12/31/2020	Lisa Peterson, Amy Veith	BHD – Heather Brandt	MOUs with law enforcement agencies	Complete
3.2 Secure buy-in and commitment from at least four EMS providers	5/31/2022	Amy Veith	BHD – Heather Brandt	MOUs with EMS providers	In progress
3.3 Secure buy-in and commitment from at least two jail administrators	5/31/2022	Amy Veith	ID – Heather Brandt	MOUs with jails	In progress
3.4 Secure buy-in and commitment from DOCR to implement CIT Training in the ND State Penitentiary	12/31/2020	Lisa Peterson, Amy Veith	BHD – Heather Brandt	MOUs with DOCR	Complete

Goal 6.2 Implement training on trauma-informed approaches—including vicarious trauma and self-care—for all criminal justice staff

Objective 1: Select trauma training curricula

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Apply to send representatives to the PRA trauma training train-the-trainer event	4/30/2019	Lisa Peterson, Amy Veith	BHD - Heather Brandt	Application submitted	Complete
1.2 Participate in the train-the-trainer event (if selected) and evaluate the PRA trauma training and others for suitability for North Dakota	6/30/2019	Lisa Peterson, Amy Veith	BHD – Heather Brandt; Sara Durvin	Completed train-the-trainer PRA trauma training; Trainings evaluated for sustainability	Complete
1.3 Select a training on vicarious trauma and self-care	7/31/2022	Amy Veith	BHD – Heather Brandt; Sara Durvin	Selected training	In progress

Objective 2: Develop internal staff resources to help move the DOCR from trauma-sensitive to trauma-responsive and trauma-informed

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Designate a Trauma-Responsive Program Administrator to manage and coordinate trauma reform efforts.	9/1/2019	Lisa Peterson	BHD - Heather Brandt	Have a staff member identified in this role	Complete
2.2 Identify and develop the skills of key trauma-informed leaders who will work towards cultural change towards trauma-responsive practices by addressing policy and practice issues in vivo.	3/31/2021	Lisa Peterson	BHD - Heather Brandt	The first cycle of training and projects for the key leader program is complete	Complete
2.3 Identify, develop, and support staff working on larger trauma-reformed projects through a workgroup and skill share program.	2/10/2020	Lisa Peterson	BHD - Heather Brandt	A workgroup is formed with rolling membership for individuals working on large scale trauma-responsive programs	Complete
2.4 Create a program that addresses the intersection of trauma-responsivity and employee wellness	4/30/2021	Lisa Peterson	BHD - Heather Brandt	The formation of a joint committee with the trauma-responsive and employee wellness programs	Complete

Objective 3: Secure buy-in and commitment from DOCR divisions

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Develop a proposal for a comprehensive DOCR move towards being trauma-informed	2/24/2020	Lisa Peterson	BHD - Heather Brandt	Accepted and approved plan for trauma-reform	Complete

Objective 4: Create an evidence-guided trauma treatment program

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Conduct research as to the prevalence of trauma exposure, PTSD symptoms, and Traumatic Brain injury in incarcerated residents in North Dakota	7/31/2022	Amy Veith	BHD - Heather Brandt	Research project completed through the preliminary results phase	In progress
4.2 Create a comprehensive, culturally responsive, evidence-guided trauma treatment program.	7/31/2022	Amy Veith	BHD - Heather Brandt	The implementation of a multilevel treatment program	In progress

Objective 5: Create a plan for sustainability for trauma-reform projects

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Integrate trauma-informed principles in training, practice, and culture	9/30/2022	Amy Veith	BHD - Heather Brandt	A final report on the integration into DOCR practices and future directions is submitted and accepted by DOCR leadership	Pending
5.2 Create a comprehensive sustainability plan for all ongoing programs which includes oversight and quality assurance measures	9/30/2022	Amy Veith	BHD - Heather Brandt	A plan for sustainability is submitted and accepted by DOCR leadership	Pending

Goal 6.3 Review jail capacity for behavioral health needs identification, support, and referral, and create a plan to fill gaps

Objective 1: Obtain buy-in from local jails to examine and address behavioral health needs

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Meet with leadership from local jails to review and provide feedback on this goal, objective, and action steps and obtain buy-in on activities related to this goal	6/30/2021	Lance Anderson	BHD - Pam Sagness	Documented conversations with jail administrators	Complete

Objective 2: Conduct a review of behavioral health identification, support, and referral capacity in jails

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Conduct a review of capacity in jails that includes: detailed list of gaps related to behavioral health need identification, support, and referral; and potential solutions to address gaps	10/31/2021	Lance Anderson	BHD - Pam Sagness	List of gaps with accompanying solutions	In progress
2.2 Conduct a review of funding sources by individual’s status (i.e. county, state, federal) to better understand how treatment services in jails can be financed	10/31/2021	Lance Anderson	BHD - Pam Sagness	Identification of funding sources by jail	In progress

Objective 3: Create a plan to address gaps based on review of behavioral health needs identification, support, and referral capacity

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Create a plan to address gaps based on review of behavioral health needs identification, support, and referral capacity	1/31/2022	Lance Anderson	BHD - Pam Sagness	Jail behavioral health capacity expansion plan	Pending
3.2 Execute MOUs with jails based on jail capacity expansion plan	3/31/2022	Lance Anderson	BHD - Pam Sagness	MOUS with jails	Pending

Objective 4: Implement universal mental health and substance use disorder screening tools in at least one jail in each HSC region

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Select a brief mental health and substance use disorder screening tool for use in jails	3/31/2022	Amy Veith	BHD - Pam Sagness	Screening tool selected	Pending
4.2 Obtain buy-in from jail administrators to implement the screening instrument	5/31/2022	Amy Veith	BHD - Pam Sagness	MOUS with jails	Pending
4.3 Implement universal mental health and substance use disorder screenings in at least one jail in each HSC region	9/30/2022	Lance Anderson	BHD - Pam Sagness	At least one jail in each HSC region routinely implementing screening with all individuals	Pending

Aim 7. Engage in targeted efforts to recruit and retain a qualified and competent behavioral health workforce

Goal 7.1 Designate a single entity responsible for supporting behavioral health workforce implementation

Objective 1: Convene a Behavioral Health Workforce Collaborative, with representatives from relevant groups and initiatives invited, to review and collaborate on workforce-related goals and establish a mechanism for sharing activities and aligning efforts

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Convene a Behavioral Health Workforce Summit to review and collaborate on workforce-related goals	12/31/2021	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson, Kalee Werner	First meeting of Behavioral Health Workforce Collaborative	In progress
1.2 Establish a basic Behavioral Health Workforce Collaborative charter, identify topic-specific work groups as applicable, and create a meeting schedule	3/31/2022	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson, Kalee Werner	Behavioral Health Workforce Collaborative charter; Meeting schedule	Pending
1.3 Convene the Behavioral Health Workforce Collaborative for at least one additional meeting to review progress and continue collaboration on workforce-related strategic goals	3/31/2022	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson, Kalee Werner	At least one additional meeting of the Behavioral Health Workforce Collaborative	Pending

Goal 7.2 Develop a program for providing recruitment and retention support to assist with attracting providers to fill needed positions and retain skilled workforce

Objective 1: Conduct a scan of local and national programs to identify preexisting untapped resources, barriers to effectiveness of existing resources, and best practice

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Conduct a scan of existing programs in North Dakota that provide recruitment and retention support for behavioral health and related fields to identify untapped resources and barriers to effectiveness of these resources for behavioral health professio	9/30/2021	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson, Kalee Werner	Completed scan; List of existing resources; Identified barriers and challenges with existing resources	Complete
1.2 Conduct a scan of national best practice for programs that support behavioral health workforce and recruitment, and assess those practices for relevance to North Dakota	9/30/2021	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson, Kalee Werner	List of national best practice	Complete

Objective 2: Draft parameters for a program for providing recruitment and retention support based on the scan

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Draft parameters for a program for providing recruitment and retention support based on review of local and national programs	3/31/2022	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson; Kalee Werner	Draft parameters	Pending
2.2 Review draft parameters with the Behavioral Health Workforce Work Group and revise based on their feedback	5/31/2022	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson; Kalee Werner	Revised parameters	Pending

Goal 7.3 Expand loan repayment programs for behavioral health students working in areas of need

Objective 1: Review current loan repayment programs to identify best practice and barriers to effectiveness

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Review current loan repayment programs to identify best practice and barriers to effectiveness	12/30/2021	Rebecca Quinn	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson; Kalee Werner	List of best practice; List of barriers to effectiveness	Pending

Objective 2: Revise and/or expand loan repayment programs for behavioral health students working in areas of need

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Create a plan to revise and/or expand loan repayment programs for behavioral health students working in areas of need in the next two years	3/31/2022	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Laciresha Graham; BHD - Laura Anderson; Kalee Werner	Loan repayment expansion plan	Pending
2.2 Work with stakeholders to revise and/or expand existing loan repayment programs	6/30/2022	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Laciresha Graham; BHD - Laura Anderson; Kalee Werner	Revise and/or expand at least two existing loan repayment programs	Pending

Goal 7.4 Establish a formalized training and certification process for peer support specialists

Objective 1: Designate personnel to oversee formalized training and credentialing process

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Obtain funding for needed personnel	4/30/2019	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Funding secured	Complete
1.2 Designate and train oversight personnel	2/29/2020	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Personnel designated; Personnel trained	Complete

Objective 2: Establish a formalized training and credentialing process based on local and national best practice that includes tracks for specific sub-groups including culturally specific peers, family peers, and youth peers

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Review current training and credentialing process to identify strengths/assets and areas for expansion	2/29/2020	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Completed review; List of strengths/assets and areas for expansion	Complete
2.2 Revise current training process as needed based on review	2/29/2020	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Revised peer training process	Complete

Objective 3: Establish a track for culturally specific (specific to American Indian and New American populations) peer services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Convene local advocates to understand current resources and gaps for culturally specific peer support	12/31/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Local advocates convene with lead staff	In progress
3.2 Based on conversations with local advocates, create a culturally specific peer support model description	1/31/2022	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Model description	Pending
3.3 Incorporate the culturally specific peer support model (defined in 3.2) into the peer training and certification process	3/31/2022	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Revised peer training process that includes culturally specific model	Pending

Objective 4: Establish a track for family peer services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Convene local advocates to understand current resources and gaps for family peer services	12/31/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Local advocates convene with lead staff	In progress
4.2 Based on conversations with local advocates, create a family peer model description	1/31/2022	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Model description	Pending
4.3 Incorporate the family peer support model (defined in 4.2) into the peer training and certification process	3/31/2022	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Revised peer training process that includes family peer model	Pending

Objective 5: Establish a track for youth peers

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Identify best practice models for peer support	12/31/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Best practices identified	In progress

Objective 6: Establish a track for brain injury peer support

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
6.1 Identify best practice models for brain injury peer support	6/30/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Best practices identified	In progress
6.2 Create a brain injury peer model description	9/30/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Model description	In progress
6.3 Incorporate the brain injury peer support model (defined in 6.2) into the peer training and certification process	12/31/2021	Heather Brandt	BHD - Tami Conrad; UND - Rebecca Quinn	Revised peer training process that includes brain injury peer model	Pending

Goal 7.5 Implement a program of core competencies for staff providing direct support to people with psychiatric disabilities, substance use disorders, and brain injury (e.g., mental health technicians, case aides, coordinators)

Objective 1: Identify existing and planned behavioral health services and positions for which a core competencies program should be applied

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1. Identify existing and planned behavioral health services and positions for which a core competencies program should be applied	9/30/2021	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson	List of existing and planned services and positions	Pending
1.2 Identify existing and planned training, credentialing, and certification programs that the core competencies should be applied to	10/31/2021	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson	List of existing and planned training, credentialing, and certification programs	Pending

Objective 2: Establish a set of core competencies for staff providing direct support to people with psychiatric disabilities, substance use disorders, and brain injury

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Identify state funding for covering or subsidizing certifications, if any	10/31/2021	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacresha Graham; BHD - Laura Anderson	Core competencies set identified	Pending

Objective 3: Modify existing training, credentialing, and certification programs for all positions identified in objective 1 to incorporate the core competencies set

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Modify existing training, credentialing, and certification programs for all positions identified in objective 1 to incorporate the core competencies set	12/31/2021	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacrosha Graham; BHD - Laura Anderson	Modified training, credentialing, and certification programs	Pending

Objective 4: Incent the use of the core competencies in state regulations, policies, and protocols

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Explore revising Medicaid policy to add core competencies into existing policy if appropriate	12/31/2021	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacrosha Graham; BHD - Laura Anderson	Documentation of options for revising Medicaid policy	Pending
4.2 Ensure all relevant service descriptions include the core competencies	6/30/2022	Behavioral Health Workforce Collaborative Workgroup Chair TBD	DoH - Kelly Nagel; UND - Mandi Peterson; UND - Stacy Kusler; BHD - Lacrosha Graham; BHD - Laura Anderson	Service descriptions include core competencies	Pending

Aim 8. Continue to expand the use of telebehavioral health

Goal 8.1 Increase the types of services available through telebehavioral health

Objective 1: Identify and facilitate resolution of any regulatory or funding barriers to adoption of telebehavioral health services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Conduct preliminary scan of challenges to implementing telebehavioral health	12/31/2019	Rosalie Etherington	UND - Rebecca Quinn and Mandi Peterson	Preliminary scan conducted	Complete
1.2 Conduct a scan of procedural and regulatory challenges for implementing telebehavioral health, beginning with the 2018 UND report	10/31/2021	Rosalie Etherington, Mandi Peterson		List of procedural and regulatory challenges	In progress
1.3 Conduct a scan of national best practice regarding procedural and regulatory guidelines for telebehavioral health	12/31/2021	Rosalie Etherington, Mandi Peterson		National scan	In progress
1.4 Generate strategies for resolving procedural and regulatory barriers based on review	3/31/2022	Rosalie Etherington, Mandi Peterson		List of strategies	Pending

Objective 2: Develop clear, standardized procedural and regulatory guidelines for telebehavioral health

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Draft clear, standardized procedural and regulatory guidelines for telebehavioral health based on local and national scan	6/30/2022	Rosalie Etherington, Mandi Peterson		Draft telebehavioral health guidelines	Pending
2.2 Review Medicaid and HSC policy and procedure for alignment with draft guidelines and revise as needed	3/31/2022	Rosalie Etherington, Mandi Peterson		Completed review of Medicaid policy and procedure; Completed review of HSC policy and procedure; Revised telebehavioral health guidelines	Pending

Objective 3: Identify priority services for telebehavioral health expansion

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Identify priority services for telebehavioral health expansion	7/31/2021	Rosalie Etherington, Mandi Peterson		Identified services	Complete

Objective 4: Expand capacity for school-based telebehavioral health services

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Using available data, identify schools to invite to participate in the Pediatric Mental Health Care Access Program, and determine their current capacity for expansion of telebehavioral health services	12/31/2021	Rosalie Etherington	Jennifer Faul, Pediatric Mental Health Access	Schools identified; Capacity for telebehavioral health services assessed for each school	Pending
4.2 Secure buy-in from school administrators to participate in the Pediatric Mental Health Care Access Program	3/31/2022	Rosalie Etherington	Jennifer Faul, Pediatric Mental Health Access	MOUs with school administrators	Pending
4.3 Develop and disseminate a packet of informational materials for school administrators that illustrates the benefits of offering school-based telebehavioral health services	4/30/2022	Rosalie Etherington	Jennifer Faul, Pediatric Mental Health Access	Materials developed; Materials disseminated to school administrators across the state	Pending

Objective 5: Capitalize on learnings and best practices for telebehavioral health practices that were expanded as a result of the pandemic.

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Expand telebehavioral health services to meet pandemic-related needs.	3/31/2020	Rosalie Etherington		Telebehavioral health expanded	Complete
5.2 Establish policies for ongoing access to effective telebehavioral health services that were temporarily expanded during the pandemic	5/31/2020	Rosalie Etherington		List of policies established	Complete
5.3 Secure private and public funding to expand effective telebehavioral health services that were originally expanded during the pandemic	5/31/2021	Rosalie Etherington		Funding secured	Complete

Aim 9. Ensure the system reflects values of person-centeredness, health equity, and trauma-informed approaches

Goal 9.1 Develop and initiate action on a statewide plan to enhance overall commitment to person-centered thinking, planning, and practice

Objective 1: Apply for technical assistance to support statewide plan development and initiation

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Secure needed partnerships with state and advocacy organizations to demonstrate cross-system collaboration and service user engagement in technical assistance application	2/28/2019	Pam Sagness	Jake Reuter	Partnerships identified in technical assistance application	Complete
1.2 Apply for technical assistance through the National Center on Advancing Person-Centered Practices and Systems	2/28/2019	Pam Sagness	Jake Reuter	Completed technical assistance application	Complete

Objective 2: Designate an entity to facilitate the development and initiation of statewide plan to enhance person-centered thinking, planning, and practice

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Develop and issue an RFP for facilitating development and initiation of the statewide plan	9/30/2019	Pam Sagness	Jake Reuter	Completed RFP	Complete
2.2 Select an entity to facilitate the development and initiation of the statewide plan	10/31/2019	Pam Sagness	Jake Reuter	Entity selected	Complete

Objective 3: Engage with public stakeholders to outline the importance of person-centered thinking, planning, and practice and inform the statewide plan development

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Create a guide outlining best practice for participant engagement in North Dakota	6/30/2020	Pam Sagness	Jake Reuter	Participant engagement guide	Complete
3.2 Create an Asset Map to clarify engagement aims, target groups, existing engagement assets, and engagement gaps	3/31/2020	Pam Sagness	Jake Reuter	Engagement Asset map	Complete
3.3 Create fully accessible webpage on ND DHS website to provide information on person-centered practice, including the assessment process, status updates, and ways to provide input and direction.	8/31/2020	Pam Sagness	Jake Reuter	Web page posted	Complete
3.4 Hold a Person-Centered Practices Summit, open to the public, to raise awareness about the DHS person-centered practices initiatives.	11/30/2020	Pam Sagness	Jake Reuter	Summits held	Complete

Objective 4: Build capacity among DHS leadership and administration on person-centered thinking, planning, and practice

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Develop or identify informational and training materials suitable for DHS leadership	10/31/2019	Pam Sagness	Jake Reuter	Training materials identified	Complete
4.2 Conduct training sessions for and distribute informational materials to all ND DHS executive leadership	11/30/2019	Pam Sagness	Jake Reuter	Completed training sessions for all ND DHS executive leadership; Materials distributed to all ND DHS leadership; Demonstration of understanding via post-training survey	Complete

Objective 5: Conduct a cross-system organizational self-assessment of person-centered thinking, planning, and practice

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Develop a protocol for an organizational self-assessment that includes meaningful engagement with service user and family groups throughout the process	2/29/2020	Pam Sagness	Jake Reuter	Self-assessment protocol	Complete
5.2 Conduct a cross-system organizational self-assessment, informed by service user/family and community priorities	9/30/2022	Pam Sagness	Jake Reuter	Organizational self-assessment completed	Pending

Objective 6: Develop and execute an action plan to enhance the Behavioral Health Division’s commitment to person-centered thinking, planning, and practice based on public engagement and organizational self-assessment

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
6.1 Develop an action plan based on public engagement and organizational self-assessment	11/30/2022	Pam Sagness	Jake Reuter	Action plan	Pending
6.2 Initiate action on the statewide plan	12/31/2022	Pam Sagness	Jake Reuter	Statewide plan initiated	Pending

Aim 10. Encourage and support communities to share responsibility with the state for promoting high-quality services

Goal 10.1 Include dedicated trainings and sessions at the state Behavioral Health Conference on advocacy skills and partnerships with advocacy communities

Objective 1: Identify local or national experts who can deliver presentations and trainings

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Identify local or national experts who can deliver presentations and trainings on advocacy skills and partnerships with advocacy communities at the state behavioral health conference	6/1/2021	Alyssa Kroshus		Identified presenter	Complete

Objective 2: With the presenters, develop at least two sessions on advocacy skills and partnerships with advocacy communities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Develop a session on promoting advocacy skills for people with lived experience (target audience: people with lived experience)	7/15/2021	Alyssa Kroshus		Session description	Complete
2.2 Develop a session on partnering with advocacy communities to provide high quality behavioral health services (target audience: providers)	7/15/2021	Alyssa Kroshus		Session description	Complete

Objective 3: Include dedicated trainings and sessions at the state Behavioral Health Conference on advocacy skills and partnerships with advocacy communities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Include dedicated trainings and sessions at the state Behavioral Health Conference related to advocacy skills and partnerships with advocacy communities	10/29/2020	Alyssa Kroshus		Sessions included in behavioral health conference	Complete

Aim 11. Partner with tribal nations to increase health equity for American Indian populations

Goal 11.1 Convene state and tribal leaders to review behavioral health strategic goals and explore an aligned strategic planning process and options for a training program for all behavioral health professionals that includes modules on health equity and American Indian history, culture, and governance

Objective 1: Attend a meeting of tribal leaders to present strategic planning process and invite leaders to

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Meet with tribal leaders to present strategic planning process and offer an invitation to partner	12/31/2021	Laura Anderson, Brad Hawk		Meeting with tribal leaders	In progress
1.2 Work with tribal leaders to identify key stakeholders to invite to first convening.	3/1/2022	Laura Anderson, Brad Hawk		Key contacts and stakeholder groups identified for each tribal nation	Pending

Objective 2: Convene a group of key stakeholders in each tribe to further explore alignment with the Strategic Plan. The group will be determined by tribal leadership and may include IHS, tribal health, Urban Indian collaborative (based at NATIVE, Inc.),

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Convene (in person if possible) key stakeholders in the Turtle Mountain Band of Chippewa Indians to further explore alignment with the strategic plan.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending
2.2 Convene (in person if possible) key stakeholders in the Standing Rock Sioux Tribe to further explore alignment with the strategic plan.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending
2.3 Convene (in person if possible) key stakeholders in Spirit Lake Nation to further explore alignment with the strategic plan.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending
2.4 Convene (in person if possible) key stakeholders in the Mandan, Hidatsa, Arikara Nation to further explore alignment with the strategic plan.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending
2.5 Convene (in person if possible) key stakeholders in the Sisseton-Wahpeton Oyate to further explore alignment with the strategic plan.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending

Objective 3: Ensure alignment and cultural relevance from an Urban Indian perspective

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Convene Urban Indian stakeholders to discuss opportunities for alignment and further explore cultural relevance for and needs of Urban Indian populations.	6/30/2022	Laura Anderson, Brad Hawk		Convening; opportunities for alignment identified	Pending

Objective 4: Ensure the strategic planning process is and continues to be aligned with the priorities and initiatives of tribal nations and Urban Indian populations, which may include revisions or additions to the strategic plan

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Ensure the strategic planning process is aligned with the priorities and initiatives of tribal nations and Urban Indian populations, which may include revisions or additions to the strategic plan	8/31/2022	Laura Anderson, Brad Hawk		Summary of learnings from objectives 1-3; Revisions to strategic plan	Pending
4.2 Identify next steps to secure an ongoing partnership with tribal leaders, Urban Indian Collaborative, and their designees for current and future strategic planning efforts, including next steps for developing and implementing training for behavioral health	9/30/2022	Laura Anderson, Brad Hawk		Next steps for continued alignment identified	Pending

Objective 5: Explore options for creating an ongoing training program for behavioral health professionals that includes modules on health equity and American Indian history, culture, and governance.

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
5.1 Review trainings related to health equity and American Indian history, culture, and governance. Review should include trainings used in ND Department of Public Instruction, Native American Essential Understandings, ND Department of Health and Human Services	9/30/2022	Laura Anderson, Brad Hawk		Completed review	Pending

AIM 12. Diversify and enhance funding for behavioral health

Goal 12.1 Develop an organized system for identifying and responding to behavioral health funding opportunities

Objective 1: Secure funding for Behavioral Health Division staff time to complete the remaining objectives

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Secure funding for Behavioral Health Division to complete the remaining objectives	4/30/2021	Laura Anderson, Pam Sagness		Funding secured	Complete

Objective 2: Designate personnel to coordinate identification and response to behavioral health funding opportunities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Designate personnel to coordinate identification and response to behavioral health funding opportunities	12/30/2021	Laura Anderson, Pam Sagness		Personnel designated	In progress

Objective 3: Develop a system for identifying behavioral health funding opportunities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Conduct a scan of public (e.g. federal grants) and private (e.g. foundations) funding sources and existing connections with potential funders	9/30/2021	Laura Anderson, Pam Sagness		Completed scan	Complete
3.2 Create a protocol for tracking funding opportunities on an ongoing basis	9/30/2021	Laura Anderson, Pam Sagness		Tracking protocol	Complete

Objective 4: Develop a process for responding to behavioral health funding opportunities

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
4.1 Convene entities to explore how to feasibly disseminate information about funding opportunities, support grant and proposal-writing, and foster collaboration across agencies and between agencies and community partners	6/30/2022	Laura Anderson, Pam Sagness	TBD	Notes from discussions on response process	Pending
4.2 Create a protocol for responding to behavioral health funding opportunities	6/30/2022	Laura Anderson, Pam Sagness	TBD	Response protocol	Pending

Goal 12.2 Establish 1915(i) Medicaid state plan amendments to expand community-based services for key populations

Objective 1: Secure legislative approval for the 1915(i) state plan amendments

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Secure legislative approval for the 1915(i) SPA for adults	4/30/2019	Dawn Pearson		Legislative approval	Complete
1.2 Secure legislative approval for the 1915(i) SPA for children and youth	4/30/2019	Dawn Pearson		Legislative approval	Complete

Objective 2: Draft 1915(i) state plan amendments

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Obtain CMS technical assistance to support development of the 1915(i) SPAs	8/31/2019	Dawn Pearson		TA obtained	Complete
2.2 Engage in preliminary conversations with CMS about proposed SPAs	10/31/2019	Dawn Pearson		Conversations documented	Complete
2.3 Draft a 1915(i) SPA for adult services based on parameters developed in 2018	12/31/2019	Dawn Pearson		Draft 1915(i) for adults	Complete
2.4 Draft a 1915(i) SPA for children and youth based on materials developed in 2015 and revised in January 2019	3/1/2020	Dawn Pearson		Draft 1915(i) for children and youth	Complete

Objective 3: Submit 1915(i) state plan amendments to CMS for approval

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Finalize and submit the 1915(i) SPA for adults to CMS	4/30/2020	Dawn Pearson		Submitted 1915(i)	Complete
3.2 Finalize and submit the 1915(i) SPA for children and youth to CMS	4/30/2020	Dawn Pearson		Submitted 1915(i)	Complete

Goal 12.3 Establish peer services as reimbursed service in the Medicaid state plan

Objective 1: Secure legislative approval to add peer support as a Medicaid state plan service

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Secure legislative approval to add peer support as a Medicaid state plan service	4/30/2019	Krista Fremming		Legislative approval	Complete

Objective 2: If legislative approval is secured, amend the Medicaid state plan to include peer support as a Medicaid state plan service

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Amend the Medicaid state plan to include peer support as a Medicaid state plan service	9/30/2022	Krista Fremming		Amend the state plan	Pending

Aim 13. Conduct ongoing, system-wide data-driven monitoring of need and access

Goal 13.1 Draft a 10-year plan for aligning DHS and other state and local data systems to support system goals of quality, equity, transparency, cross-system collaboration and coordination

Objective 1: Establish a data work group with representatives from each relevant entity

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
1.1 Identify representatives from each relevant entity to serve on a statewide data work group	7/30/2020	Laura Anderson, Bevin Croft	State Epidemiological Workgroup	Data work group roster	Complete
1.2 Establish a schedule of meetings and scope of work for the data work group	7/30/2020	Laura Anderson, Bevin Croft	State Epidemiological Workgroup	Schedule of meetings and scope of work	Complete

Objective 2: Conduct a review of current alignment of state and local data systems

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
2.1 Obtain information about current data systems and their interoperability with other data systems	12/31/2020	Laura Anderson, Bevin Croft	State Epidemiological Workgroup	Information about data systems of all relevant entities	Complete
2.2 Map data systems and interoperability (or lack thereof)	12/31/2022	Laura Anderson, Bevin Croft	State Epidemiological Workgroup	State and local data system map	In progress

Objective 3: Draft a 10-year plan based on review of state and local data systems

<i>Action step</i>	<i>Completion Date</i>	<i>Lead staff</i>	<i>Supporting staff</i>	<i>Indicator</i>	<i>Status</i>
3.1 Draft a ten-year plan based on review of state and local data systems	12/31/2022	Laura Anderson, Bevin Croft	State Epidemiological Workgroup	10-year plan	Pending