By 2020, mental and substance use disorders will surpass all physical diseases as a major cause of disability worldwide.

(SAMHSA)
To provide **quality**, **efficient** and **effective** human services, which improve the lives of people.
DHS Behavioral Health System
### Behavioral Health Division

Provides leadership for the planning, development, and oversight of the state's behavioral health system.

Work with partners within the department and the state behavioral health community to . . .
- improve access to services,
- address behavioral health workforce needs,
- develop policy, and
- ensure quality services are available for those with behavioral health needs.

### Behavioral Health Services Delivery System

Provides, directly or through contracts, a full continuum of integrated behavioral health.

- Regional Human Service Centers (HSCs) provide outpatient and residential services to a broad range of people with mental illness and substance use disorders.
- North Dakota State Hospital (NDSH) provides hospital and residential treatment to specialized populations of the mentally ill, chemically dependent, and sexually dangerous.
DHS Behavioral Health System Values:

- Person Centered
- Trauma Informed
- Recovery Oriented
- Integrated
- Data Driven
- Best Practice
- Transparency
- Accountability
Recovery-Oriented Systems

“Systems of health and human services that affirm hope for recovery, exemplify a strengths-based orientation, and offer a wide spectrum of services and supports aimed at engaging people with mental health and substance use conditions into care and promoting their resilience and long-term recovery from which they and their families may choose”

Person-Centered Care

“Care that is based on the person’s and/or family’s self-identified hopes, aspirations, and goals, which build on the person’s and/or family’s own assets, interests, and strengths, and which is carried out collaboratively with a broadly defined recovery management team that includes formal care providers as well as others who support the person’s or family’s own recovery efforts and processes, such as employers, landlords, teachers, and neighbors.”

Integrated care

is the collaboration between behavioral health and primary care providers to ensure the most effective and informative care for the consumer. Integrated care focuses on consumers and family members as partners in the healthcare process. Integrated Health Care identifies nine core competencies.

Trauma-Informed

“A trauma-informed approach to the delivery of behavioral health services includes an understanding of trauma and an awareness of the impact it can have across settings, services, and populations. It involves viewing trauma through an ecological and cultural lens and recognizing that context plays a significant role in how individuals perceive and process traumatic events, whether acute or chronic.”

A best practice is a method or technique that has consistently shown results in an effort to maintain quality and produce outcomes.
Data-driven organizations don’t only gather data; but work to understand the data.
Transparency

Disseminate findings to policy-makers, management, providers, employees, and stakeholders alike.
Understanding the results, analyzing the cause, and being responsible to improve the process.
Aligning Values with Processes

<table>
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<tr>
<th></th>
<th>Person Centered</th>
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<tr>
<td>Patient/Client Care</td>
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**DHS Behavioral Health System Goals:**

<table>
<thead>
<tr>
<th>Behavioral Health DIVISION</th>
<th>Behavioral Health Services DELIVERY SYSTEM</th>
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<tbody>
<tr>
<td>1. Systems needs assessment</td>
<td>1. Achieve accreditation</td>
</tr>
<tr>
<td>2. Strategic planning</td>
<td>2. Enhance best practices for identified core service</td>
</tr>
<tr>
<td>3. Develop consistent process and outcome measures</td>
<td>3. Reduce institutional violence</td>
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<tr>
<td>4. Enhance partnerships/collaboration</td>
<td>4. Develop clear clinical and operational leadership</td>
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<tr>
<td>5. Workforce development</td>
<td>5. Build an outcome-based and data-driven system of service delivery</td>
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</table>
DHS Behavioral Health System

Pamela Sagness, Director
Behavioral Health Division
## Behavioral Health Division Role:

<table>
<thead>
<tr>
<th>Health and Safety</th>
<th>Access to Services</th>
<th>Quality</th>
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<tbody>
<tr>
<td>Licensing (OTP, SUD, HSC, DUI, PRTF)</td>
<td>Priority status (i.e. pregnant women)</td>
<td>Outcome based contracts</td>
</tr>
<tr>
<td>Certification</td>
<td>Partnerships</td>
<td>Best practice requirements</td>
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<tr>
<td>Administrative rule updates</td>
<td>Funding – grants, Request For Proposals (RFPs)</td>
<td>Training &amp; Technical Assistance (T/TA)</td>
</tr>
<tr>
<td>Contracts</td>
<td>Policy/law changes (i.e. OTP’s)</td>
<td>Evaluation and data collection</td>
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<tr>
<td>Law/policy changes</td>
<td>Payments – Partner with payers (i.e. Medicaid)</td>
<td>Process and outcome measures</td>
</tr>
<tr>
<td>Training and Technical Assistance (T/TA)</td>
<td>Training &amp; Technical Assistance (T/TA) systems change</td>
<td>Prevention Resource &amp; Media Center (PRMC)</td>
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<tr>
<td>Data-driven planning</td>
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<td>Evaluate licensing to analyze system changes</td>
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<tr>
<td>Partners – (i.e. Academic Institutions, Tribes)</td>
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<td>Requiring fidelity</td>
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<tr>
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- Licensing (OTP, SUD, HSC, DUI, PRTF)
- Certification
- Administrative rule updates
- Contracts
- Law/policy changes
- Training and Technical Assistance (T/TA)
- Data-driven planning
- Partners – (i.e. Academic Institutions, Tribes)
- Compliance requirements
- Priority status (i.e. pregnant women)
- Partnerships
- Funding – grants, Request For Proposals (RFPs)
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- Payments – Partner with payers (i.e. Medicaid)
- Training & Technical Assistance (T/TA) systems change
- Outcome based contracts
- Best practice requirements
- Training & Technical Assistance (T/TA)
- Evaluation and data collection
- Process and outcome measures
- Prevention Resource & Media Center (PRMC)
- Evaluate licensing to analyze system changes
- Requiring fidelity
Behavioral Health Division

CORE FUNCTIONS:

Executive Director
Maggie Anderson

BHD Director
Pamela Sagness

DHS Medical Director
Dr. Andy McLean

Regulation
Administration
Workforce Development
Prevention & Promotion
Partnerships
Behavioral Health Division

CORE FUNCTIONS:

Executive Director
Maggie Anderson

BHD Director
Pamela Sagness

DHS Medical Director
Dr. Andy McLean

Regulation
Administration
Workforce Development
Prevention & Promotion
Partnerships
Regulation

- Substance Abuse Treatment Licensing
- Opioid Treatment Program Licensing
- Human Service Center Licensing
- Psychiatric Residential Treatment Facility Licensing
- DUI Seminar Program Licensing
- Administrative Rules
Behavioral Health Division

CORE FUNCTIONS:

Executive Director
Maggie Anderson

BHD Director
Pamela Sagness

DHS Medical Director
Dr. Andy McLean

Regulation
Administration
Workforce Development
Prevention & Promotion
Partnerships
Administration

- Mental Health Block Grant
- Substance Abuse Block Grant
- Community & Tribal Prevention
- Problem Gambling
- Brain Injury
- First Link – 211
- Robinson Recovery
Behavioral Health Division

CORE FUNCTIONS:

- Executive Director
  Maggie Anderson

- BHD Director
  Pamela Sagness

- DHS Medical Director
  Dr. Andy McLean

- Regulation
- Administration
- Workforce Development
- Prevention & Promotion
- Partnerships
Workforce Development

- Training & Technical Assistance
  - Best Practice
  - Program Licensing
  - Prevention
  - Data Collection/Assessment
  - Evaluation
- Behavioral Health Conferences
- Mental Health First Aid
- Partnerships with Institutions/Consortiums
Behavioral Health Division

CORE FUNCTIONS:

- Executive Director
  Maggie Anderson

- BHD Director
  Pamela Sagness

- DHS Medical Director
  Dr. Andy McLean

- Prevention & Promotion

- Regulation
- Administration
- Workforce Development
- Partnerships
Prevention & Promotion

• Parent’s LEAD
• Prevention Resource & Media Center
• Speaks Volumes
• Tribal Prevention Programs
• Community Prevention Programs
• Prescription Drug Take Back
Behavioral Health Division

CORE FUNCTIONS:

Executive Director
Maggie Anderson

BHD Director
Pamela Sagnness

DHS Medical Director
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Regulation
Administration
Workforce Development
Prevention & Promotion
Partnerships
Partnerships

- Mental Health & Substance Abuse Planning Council
- Governor’s Prevention Advisory Council (GPAC)
- State Epidemiological Outcome Workgroup (SEOW)
- Brain Injury Advisory Committee
- Problem Gambling Advisory Council
- ND Cares
DHS Behavioral Health System

Rosalie Etherington, PhD
Superintendent of the ND State Hospital
1. Client/Consumer

2. Provider/Clinician

3. Supports (fiscal, IT, billing, legal)
ND Public Behavioral Health Service Delivery:
Public behavioral health provides comprehensive, evidence-based community and hospital service with priority for three broad special classes of clients:
Extended care services, defined as an integrated and full continuum of medically necessary treatment and rehabilitative services for adults with severe and persistent mental illness to enhance opportunity for productive community living. This continuum requires 24-hour emergency care including access to hospitalization, assertive community treatment/intensive case management, and active chronic disease management including medication management, therapy services, including addiction therapy. Other services include psychosocial rehabilitation and/or day treatment, peer and family support services, supported employment, supported housing, and various levels of residential environments.

Specialized children’s services, defined as an integrated and full continuum of treatment and support services for severely emotionally disturbed children including mental, substance abuse, social, educational and juvenile services.

Substance use disorder services, defined as an integrated and full continuum of psychotherapeutic and rehabilitative services with priority given to IV drug users, pregnant females, and the uninsured.
The comprehensive services, provided directly or through managed contracts, include:
- 24-hour emergency services, including in-person and telephonic crisis assessment, crisis residential services, and mobile crisis management (not all regions)
- Specialized assessment and engagement services, including open-access assessment, court ordered substance use evaluation, and disaster assessment
- Comprehensive and intensive case management services for the purpose of chronic disease management
- Psychotherapy services, including individual and group addiction counseling, psychotherapy of severely traumatized children and adults, integrated dual disorders treatment, and low risk sex offender treatment, including the residential treatment of the sexually dangerous.
Medication services, including the prescription of psychotropic medications, daily delivery and monitoring of medication adherence, adherence counseling

Residential and supported housing

Supported employment

Psychological testing and assessment services, including parental capacity and sex offender risk assessment

Peer support services including recovery center environments, peer managed support groups, and recovery management education
WHY?
- Improve client safety and services
- Increase provider efficiency and satisfaction
- Meet accreditation and payers requirements
  - Joint Commission, SAMHSA,
  - CMS, Medicaid, Commercial Payers

Electronic Health Record
We can prevent and reduce chronic disease and promote wellness by treating behavioral health needs on an equal footing with other health conditions. (SAMHSA)