

Region II Human Services Annual Report Based on program evaluations for the year 2021

Our Mission

To work toward the health, happiness and well-being of every person who works within our organization and every person served by our organization.

To provide the highest quality substance abuse and mental health services to any person in need of those services

To assure organizational survival and growth.

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Overview

This management report is a summary of the information from all programs and will provide a road map for our journey through 2022. The review indicates that the mission and values remain central to service delivery at all levels. This has been a hard year for all and yet we continued living our mission and values. All programs adapted their service provision to keep clients connected to services and to help clients remain in recovery. In 2021, the Region II Behavioral Health Authority served over 6574(duplicated count) people through direct service programs. Prevention activities touched over 40,000 people. The Region received \$5,890,554 from the state and federal contract to provide the services and system coordination. The Region had \$390,453 in County dollars. Specific Federal grants totaled \$934,706.

Our Region-wide Quality Improvement goals remain intact and were reviewed with all providers quarterly. Goals were appropriate and all were met. Program Quality Improvement, compliance and privacy reports were reviewed. No actions appeared necessary based on the review.

Contracted Services

The Region contracts with 9 agencies/coalitions for 15 different services. This includes Prevention Coalitions. During 2021, we connected with each of these agencies/coalitions on a regular basis and created a consistent connection so that clients could be better served. Each of our contracted agencies commented on and appreciated this in their evaluations. We provided support and help in making it through another COVID year. Many of our needs are being met by the contracted services and it is also clear that certain needs remain and that we need to address those needs. The demand for services is changing and we as

an organization must be planning for those changing needs. We continue seeing an increased need for services for persons with complex needs and this trend indicates a need for ongoing work together to create responsiveness to this trend. We see a need for in home services for children and families. All programs and our System of Care team discussed the need to work together to find resources for the complexity we are seeing. The challenge remains on how to create that flexibility while being tied to specific funding streams and specific service definitions.

Medicaid expansion occurred in October of 2020. This has had a direct impact on many of our services—we still served an incredible number of persons but the payment source changed. Due to this change, providers have not been able to draw down units. This means Regions are not expending all their dollars. The Region submitted proposals for the use of those dollars but has not received approval for most of the services. Several Requests for Proposals will be issued in 2022 including: Crisis Stabilization Center, Medication Assisted detox.

Other gaps noted by providers include: access for consumers to devices and internet, transportation (less of an issue with telehealth), no show rates (less of an issue due to telehealth), clients leaving residential services without completing treatment, maintaining authorizations, complex needs, step down services, long waits for disability determinations, reduced flexibility due to state mandates, access to dental care, funding for necessities while in residential care, safe affordable housing, access to health care for clients, access to visitation with kids while in residential services, lack of available clinical social workers and other professional staff, higher levels of care, and decreased flexibility in meeting client needs. These same gaps were recognized last year and agencies did what they could to fill them but many were beyond the scope of what we could make work. Some of these gaps became less significant with the move to telehealth services. Heartland buildings were outfitted with outside public Wi-Fi access so that if a client needed internet he/she could park in our parking lots and hook up to Wi-Fi.

Great Plains Health accepted Emergency Protective Custody individuals from all counties and has continued to work closely with our Emergency Support Program. An issue each year is the number of times Emergency Protected Custody clients who have to be diverted due to the unit being full or understaffed. This issue continued and worsened in 2022. This problem is being addressed by the Region, the state, and the hospital. Due to Covid, the hospital had limited staff and capabilities but our Region worked with other hospitals and made sure clients were cared for. Great Plains has been able to work with those committed clients and take care of them here in the Region. A need state wide is access to and funding for higher levels of care.

CenterPointe (dual diagnosis residential) had more Medicaid clients this year and thus less need for Region II funding. We will be exploring with Centerpointe the possibility of emergency med management via telehealth.

Houses of Hope (substance abuse halfway house for men) remains an important link in services and has created ways to include families if the clients wish to. Again access to Medicaid reduced the numbers for Region services. Affordable housing for clients at discharge remains a challenge.

Touchstone continues to improve communication with the Regional staff involved in client care. Due to staff turnover and other events, Touchstone has had a difficult year but has implemented some changes that we think will be beneficial. They received another 3 year CARF accreditation.

St. Monica's continues serving women from our Region and throughout the year we worked with them on improving communication. Region II connects in person with clients at St. Monica's at least monthly so the communication has improved. Work was done to help clients in the Children and Family Division of DHHS access residential care as early as possible. Keeping the families connected remains an issue. Women leaving before completing treatment is another issue.

The Supported Employment Program (Goodwill) is experiencing difficulty with the continued changes that Vocational Rehabilitation is experiencing. These changes have created funding issues and the Regions and State created some new programming to better meet the needs of clients and to keep the programs open. We strongly recommend keeping this program in place, continuing to move toward evidence based practice and adding more benefits planning. A hallmark was the addition of this service to our Frontier House building. This has helped us create an integrated care center for individuals with a Severe and Persistent Mental Illness.

Intensive Outpatient services (Lutheran Family Services) continues building their program. The program is serving clients in Lexington and North Platte. We have fulfilled our goal by decreasing the need for residential by creating this level of care. Since this is a group based program, there was more difficulty in going remote. Lutheran Family Services also contracted for outpatient services and peer support. Finding staff remains a challenge.

The housing voucher program through West Central Housing Authority is working well and we initiated additional coordination with the program so that we can improve the transition from this program to other housing. Meeting regularly has helped determine how to transition more clients over to other housing programs. The addition of the Rent Wise program taught by a peer is valuable and we will look for ways to continue this.

Overall, programs on contract report satisfaction with working with the Region. Gaps include housing, transportation, client engagement in residential and IOP, connecting with kids while in treatment, detox issues. Meetings with all providers are established to individualize client services. There will not be new dollars to establish new services so we will continue working to wrap services around individual clients and to be creative with services using the dollars available. Discharge planning will begin at admission and referral sources and support

workers will be involved in the process to be sure each client has the best possible chance at recovery. We will have the opportunity to look at filling some gaps with the dollars saved now that Medicaid has expanded.

Prevention programming is greatly enhanced through our relationship with coalitions and communities. This program is stronger and more complete than ever.

Programs Provided Directly by the Region

Outpatient services continue to see a high demand for services. As noted in the program evaluation there were 4,564 persons served this year. The complexity of need and the intensity of illnesses remain difficult. Only by utilizing all parts of our system can we manage clients in their recovery. Urgent Outpatient changes due to state demand has created difficulty in continuing to meet immediate need. Clinicians have worked hard to improve percent of face to face time. Telehealth continues in all clinics for Medication Management and therapy. With the onset of COVID all services transitioned to remote telehealth. During 2021, most clinicians did a combination of in person and telehealth. Clients and staff report satisfaction with this change. Medication Management remains a crucial part of the outpatient program and the med support program is essential to its success and must be maintained. Without med support, clients would go without injections, without bubble packs, without samples and without access to pharmacy free med programs. In other words, clients need access to medication or the visit with the prescriber is worthless. The outcomes established with the state were met and this program continues.

Community Support continues improving this service as it is invaluable in keeping clients stable and in the community. Management will work on the identified needs. The state constraints on flex funds continues being a barrier. By combining Day Support, Community Support, Housing Coordination and Supported Employment in one location, we have created new access and interest in all services.

Youth Care has continued identifying individual needs and working with community agencies and the families to meet needs. Community teams remain a vital component in helping transition-age youth move toward adult services.

The Day Rehab program has transitioned to Day Support. The change to Medicaid created authorization issues and reduced the number of clients we could serve. Day Support transitioned to classes and connections via conference phone for the first 6 months of 2021.

The Emergency Support Coordination Program has continued its excellent response to emergency behavioral health needs. Management will work with the program and the state to maintain the flexibility that make this program a strong resource. Goals this year include working on every EPC and commitment

discharge with the hospital so that ongoing care can continue. Crisis response for youth continued being a part of this program.

Prevention services continue across the Region. Every county was touched by some form of prevention message. Every effort will be made to continue this level of service. Challenges remain when there is not paid staff in coalitions.

Regional Coordination

The Region coordinates an extraordinary amount of activity. Coordination includes emergency, prevention, youth systems, housing, disaster and consumer. All of the system coordination areas met their deliverables and have worked hard to measure and fill gaps as noted in the program evaluation.

Overall this organization remains true to its mission and goals. Clients come first and their needs are valued in every decision made.

Our Consumer Specialist continues providing the administration with priorities based on client needs as they discover those needs in conversations and in peer support groups.

The Outreach COVID grant connected with community and church groups in every county in our area. They did specific outreach to health care workers and others most impacted by COVID.

Regional Administration continues coordinating community groups to enhance and coordinate services for those we serve.

Conclusions

2021 has been a hard year of challenges as the health care environment changes and the pandemic continued. The entire Region, agency and contracted programs, did an amazing job of staying connected to clients and families. Every resource was utilized in staying connected and caring. In addition, the Region maintained care for staff and their families as well. We have experienced significant challenges as the Medicaid program continues evolving. In the midst of those changes staff and programs have stayed constant in their work for and with clients. We have improved our system of care, communication, quality of care, and increased the use of community based services. The complexity of client needs makes service delivery more challenging each year. Keeping adequate and creative support available to all staff is a priority. Keeping clear communication within all programs delivered and funded is also a priority. As we develop systems of care and systems of documentation, we must keep our mission and values in place. In the process, we remain fiscally responsible for each dollar spent. This is done through reports to the Advisory and Governing Boards and State.

The organizational changes continue as experience teaches us what will work best for client centered care while we continually adjust to changes required by funding sources.

We will remain accredited and licensed in all areas required. Our Advisory Committee will remain active in recommendations to the Board and will continue representation of our area and our consumers. All boards and programs continue valuing participation from consumers, families, and interested persons in mental health and substance abuse.

This management plan is considered part of the strategic plan for the Region. The Governing Board, Advisory Committee, consumers and all staff and providers review the program evaluation and this report. The program evaluations and the management report are used to help create the Regional Budget Plan. The Regional Administrator meets with persons served in the creation of goals and in the planning effort. Our Consumer Specialist meets with consumers across the region on a regular basis and bring concerns, needs and ideas forward to the Regional Administrator monthly. Our goal to add these reports, client satisfaction surveys and other communication tools to the web site will continue.

No trends were noted of significance in incident reporting. A full analysis of incidents is completed annually. The cultural competency and diversity plans were reviewed and enhanced. The programs didn't receive any written complaints in 2021.

**It is evident that this organization is living and working the mission established and will continue doing so over the coming year.
All compliance and privacy requirements were met.
All programs passed internal and external audits.**

Review of Goals set last year:

Increase access to high end services

The Region was able to create Letters of agreement with Secure Residential and other residential services as needed.

- **Create programs to fill gaps**
The Region submitted ideas and programs to the state for the reinvestment of dollars saved. (Little action has been taken)
- **Work to maintain the integrity of the Region**
In 2004, the Legislature said that any Region directly providing services could continue to do so. The state continues to challenge us on this. We are consulting on this.
- **Maintain and enhance the Medication support program**
Outcomes were met and program continues.

- **Create new programming with all providers**
Lutheran Family Services added services that they provide for us.
Continue our efforts to plug the gaps.

Goals for 2022

- **Continue working with the state and community to fill gaps and needs with the dollars saved through Medicaid expansion.**
- **Create new ways to deliver services that helps accommodate the huge needs that are emerging.**
- **Continue caring for staff and their needs**
- **Expand crisis services to meet the needs of the new 988 crisis number.**