

Regional Behavioral Health Board Answers - 2022

This form is designed to collect information for the annual report to the Governor and Legislature about behavioral health services in Idaho. If you have any pictures of community events in your region, please attach them. Thank you for your help in improving the quality of behavioral health services for Idahoans!

Person Completing Form: Mallory Johnson with input from the R7BHB

Region: 7

Contact Email: mjohnson@eiph.idaho.gov

Contact Phone Number: 208-533-3221

Please list your Behavioral Health Board's Sub-Committees along with each sub-committee's Chair name and contact information:

- Children's Mental Health Subcommittee | Teriann Ness-Parker | teriannjness@gmail.com
- Bylaws Subcommittee | Chris Brayton | chris@brickhouserrecovery.com

Please list your region's top three goals:

1. Funding micro-grants that work to further the mission of the Behavioral Health Boards
2. Increasing outreach, education, and communication on the mission of the Behavioral Health Boards
3. Increasing and improving rural engagement

Please list the top 3 action items for these goals:

1. Review and vote on applications/funding requests paying attention to their alignment with the R7BHB mission.
2. Provide educational presentations and trainings to Board members at monthly meetings and share behavioral health resources via the email distribution list and EIPH's Facebook page and website: <https://eiph.idaho.gov/RBHB/rbhbmain.html>.
3. Recruit Board members from rural counties and hold monthly meetings in rural counties.

Please provide short answer on your success or outcome. If not, explain why.

1. Funded a total of three projects including:
 - Crisis Intervention Team Training Regional Certification
 - Idaho Conference on Alcohol and Drug Dependency
 - Weekly client sessions for 5 clients from September 1, 2022 to December 31, 2022 through Flourish Point, LGBTQ+ Resource Center in Rexburg, Idaho (Madison County)

2. We provided educational presentations and trainings to Board members at monthly meetings and shared behavioral health resources via the email distribution list and EIPH's Facebook page and website. Training topics/resources provided to R7BHB members, community members, and behavioral health professionals:
 - Crisis Intervention Team Training
 - Idaho Resilience Project
 - Suicide Postvention Pilot Project
 - Drug Enforcement Agency (DEA) One Pill Can Kill Campaign
 - Recovery Services - Fletcher Group Rural Recovery House Resources, Brick House Recovery, Center for Hope, Recovery Coach Training, The Phoenix Idaho
 - Mental Health Awareness - National Alliance of Mental Illness (NAMI), 9-8-8 National Mental Health Crisis Line
 - Re-entry services at the Center for HOPE/Idaho Department of Corrections (IDOC)
 - Youth Substance Use Prevention – Partnership For Success Program (Underage Drinking)
 - Opioids – Opioid Crisis and the impact, prevention, Drug Take Back events
 - Optum services and trainings
 - Mental health conditions – depression, anxiety, ADHD, etc.
 - Survivors of suicide loss support groups as well as general grief and loss support groups
 - Grief, loss, and trauma informed care
 - Suicide Prevention Month
 - Recovery Month
 - Children's Mental Health and Parent Network
 - Working with Families of children with SUD and mental health issues
 - Citizen Review Panel
 - Youth Group Homes
 - Child abuse prevention
 - Youth Support
 - Peer and family support
 - Statewide behavioral health legislation
 - Idaho Children's Trust Fund
 - Domestic violence
 - Crisis Care
 - YES, Wraparound, CANS, PCSPs
 - Anti-stigma education
 - SUD and mental health data collection

3. Sara White from Teton County joined the Behavioral Health Board as the Mental Health Advocate seat. The October 2022 Behavioral Health Board meeting will be held in Clark County and will take place during the Clark County Resource and Collaboration Efforts (RACE) meeting. The email distribution list is open to individuals living within all the counties that the Behavioral Health Board serves, including individuals from rural communities.

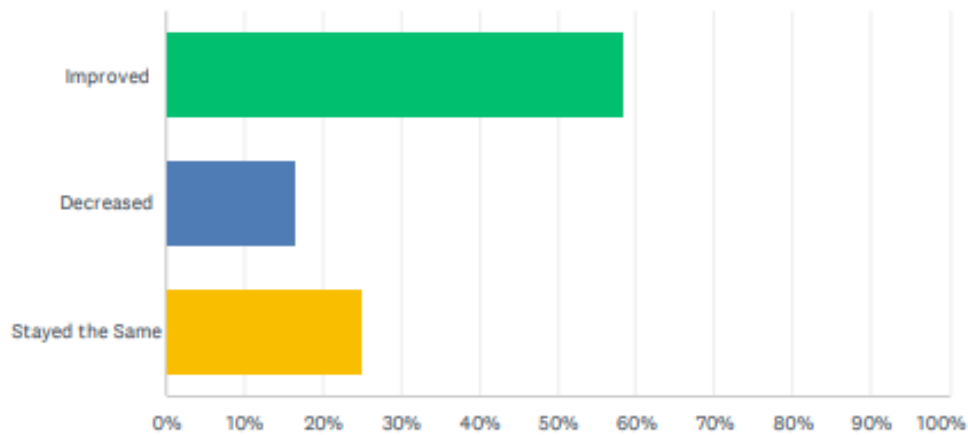
Q1: What education and/or community events did you participate in?

Citizen Review Board, Church of Jesus Christ of Latter-day Saints Relief Society meeting, Charter School Founding Board meeting, Mental Health Coalition Board Meeting, Suicide Prevention Collective Meeting, Meetings with EIPH Staff, Fremont County Resource and Collaboration Efforts (RACE) Meetings, Clark County Resource and Collaboration Efforts (RACE) Meetings, Recovery Fest, Suicide Prevention Training, Narcan Training, Madison Health Behavioral Unit, County Commissioners Meeting

Q2: What are the top three greatest gaps and needs in behavioral health in Region 7?

#	1.
1	Training for teachers and community members in mental health in children
2	medicaid transportation
3	Access to affordable counseling, peer support, and group services in rural areas
4	barriers to access MH services
5	Quicker access to mental health services
6	Adolescent residential treatment
7	Reliable transportation for accessing services- MTM has not been reliable.
8	Facilities - for youth
9	Transportation to services
10	treatment providers
11	Assisted Living Facilities accepting BH clients
12	More community awareness
#	2.
1	Suicide prevention awareness
2	youth services
3	Access to education regarding mental health topics in rural areas
4	affordable housing
5	Consistent services available to rural counties
6	adult IOP
7	Medical Detox
8	Funding for increasing behavioral health
9	Education to public
10	community knowledge of resources
11	Housing
12	Housing
#	3.
1	Increase of substance abuse problems and other problems caused by such abuse
2	homelessness
3	Access to non-law enforcement crisis response teams in rural areas
4	suicide prevention
5	Sustainable LGBTQ services
6	More counselors
7	Community Education to decrease stigma
8	Law enforcement training
9	More access/information in rural areas
10	ready access to resources
11	Transportation

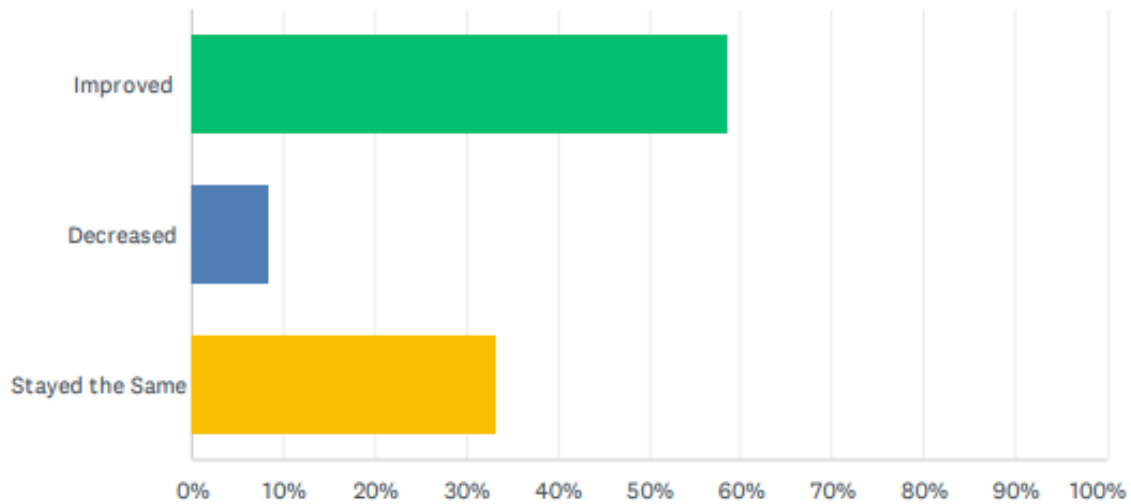
Q3: Do you feel access to Mental Health services (not SUD, which will be addressed in Question 4) in your Region has improved, decreased, or stayed the same? Please explain why.



ANSWER CHOICES	RESPONSES
Improved	58.33%
Decreased	16.67%
Stayed the Same	25.00%
TOTAL	

#	PLEASE EXPLAIN THE REASON FOR YOUR ANSWER:
1	I think steps are being taken and general help is being offered, however there is a systemic problem in agencies and organization working together to promote mental health needs.
2	Agencies have waiting lists for all services
3	Due to the R7BHB and other community stakeholders/organizers the resources in our community have increased. Folks are more aware of resources and better able to access care.
4	I think there are services available but there are often waiting lists.
5	I have participated in more suicide prevention training over the last year as well as am aware of training offered to first responders on mental health.
6	It has improved due to access to care with Medicaid expansion. We still need more therapists.
7	Very long wait lists. Shortage of qualified professionals.
8	More people seem to be comfortable seeing out help
9	Our region has really great resources for mental health in the crisis center and in our community connections. These resources become better known to community members who are then better able to access this service with the passage to time. But the needs are increasing rapidly and there are not enough providers of services to keep up with the demand.
10	Access due to telehealth options are improved. CIT completed two academies. In-person appointments are more accessible. Implementation of 988 for BH crisis

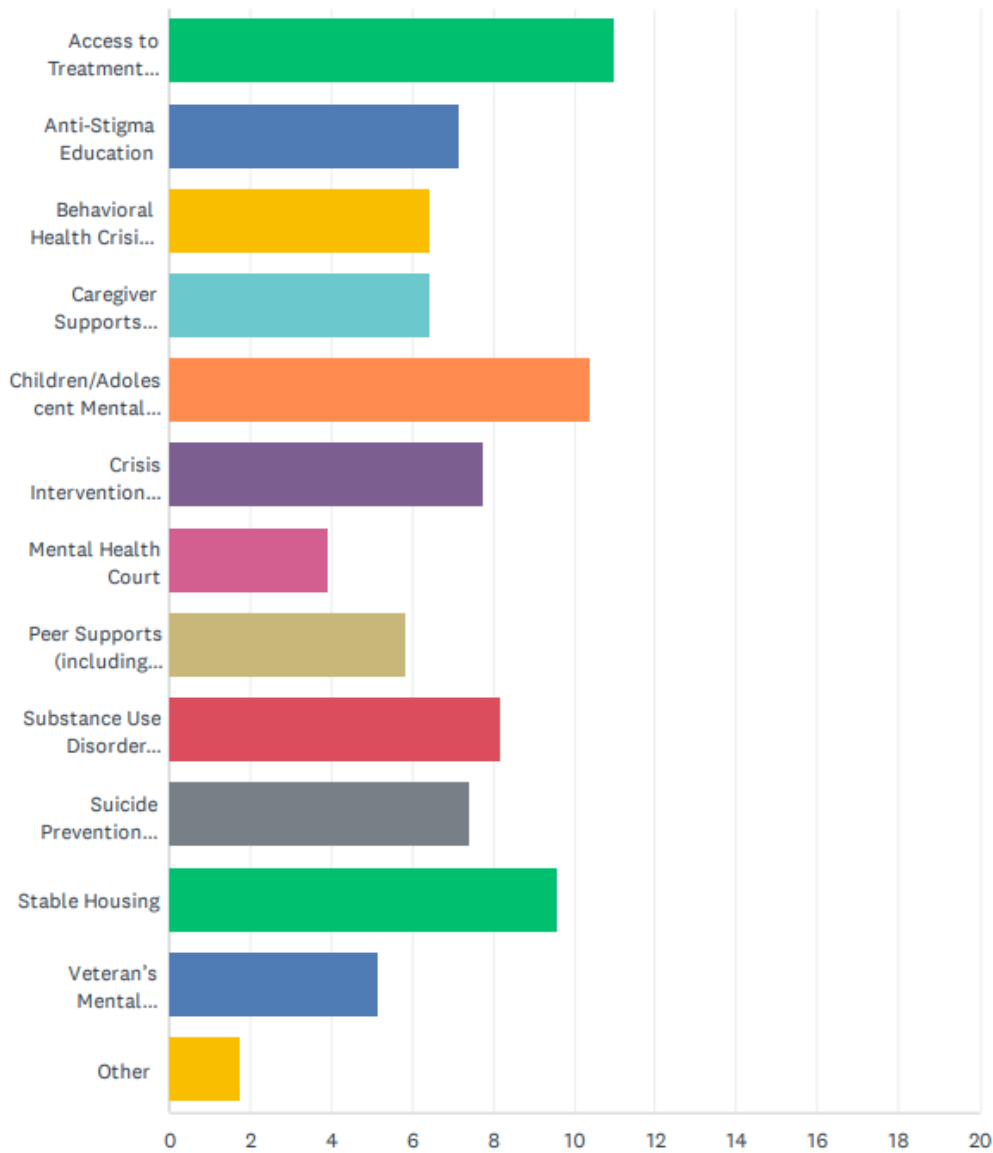
Q4: Do you feel access to Substance Use Disorder services (Prevention, Treatment, Recovery) in your Region has improved, decreased, or is staying the same? Please explain why.



ANSWER CHOICES	RESPONSES
Improved	58.33%
Decreased	8.33%
Stayed the Same	33.33%
TOTAL	

#	PLEASE EXPLAIN YOUR ANSWER:
1	The work of the recovery centers has been great. More work needs to be done in rural areas.
2	relapse continues more than clean and sober life.
3	This has stayed the same in our community. There are little to no local resources related to SUD and most folks travel out of our community to receive services.
4	Services are available but unfortunately, there are often waiting lists before anyone can be seen
5	I have been apart of and have been invited to many trainings in this area over the last year. Awareness in this field of work and as a community has increased.
6	Same with above. Increased access through Medicaid expansion
7	Medicaid expansion helped to allow more access to covered services. Medicaid did a rate decrease for those services recently which makes it a little harder from a provider standpoint.
8	More awareness
9	It has improved with better access to Medicaid. These increased resources are a vast improvement but the needs seem to build faster than access can be provided.
10	Access due to telehealth options are improved. In-person appointments are more accessible. Implementation of 988 for BH crisis Recovery Center

Q5: Please rank each of the following categories in Region 7, with 1 being the most critical. If you identify a critical need that is not listed below, please rank it as “Other”. Then, in Question 6, please identify what the “Other” need is.



Q6: In the previous question, if you chose “Other”, please identify what the critical need is.

#	RESPONSES
1	Coordination of services across region
2	n/a
3	n/a
4	N/A
5	Medical Detox
6	Law enforcement
7	None
8	It wouldn't let me go further without checking Other
9	none

“Mental Health is very important to me. Some of the things that need to be addressed are:

1. When peer get out of prison, they have no prescribing doctor to go to so they can get their meds refilled.
2. I believe that Homelessness plays a significant role in mental health in our area.
3. People are reluctant to get services for mental health due to stigma.” – Donna Johnson

Donna Johnson holds the R7BHB seat of Adult Substance Use Disorder Consumer Representative. She is a Certified Peer Support/Certified Peer Recovery Coach at the Center for HOPE Peer Recovery Center.

For questions, please contact Mallory Johnson: mjohnson@eiph.idaho.gov