Behavioral Health is Essential To Health

Prevention Works

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People Recover
Assessing Staffing, Programming, and Cultural and Linguistic Competency Needs for Community Behavioral Health Organizations

Co-Presented by:
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Purpose and Importance

• It is important for all states to complete a community needs assessment given the changes occurring in behavioral health across the board (ACA, PPS, Medicaid expansion and waivers, CCBHCs, etc.).

• The community needs assessment requirements for CCBHCs, are used as a model of how any state can conduct a rigorous local community needs assessment that ensure behavioral health needs of a community are identified and integrated into community behavioral health provider services.

Presented by: David Lloyd, MTM Services
Overview of the purpose and importance of a behavioral health community needs assessment.
A Completed Needs Assessment

Key Elements

1. The needs assessment defines geographic service areas.
2. CCBHCs or community behavioral health provider service areas conform to the needs assessment.
3. The needs assessment process has integrated consumer and family/caregiver input.
4. The needs assessment defines the unmet service needs defined by:
   - **Major diagnostic grouping** (e.g., SUD, MH),
   - **Special populations** (e.g., cultural and linguistic competency needs),
   - **Evidence-based practice needs**, and
   - **Trauma-informed, non-four walls service delivery model**
5. It is important to include in the needs assessment the level of unmet needs (if any) of populations currently being served in the potential CCBHC or community behavioral health provider geographic market areas which will need to address the following:

- **What are the methodologies that the state will use to determine levels of unmet needs (e.g., focus groups, key informant interviews, surveys, etc.)?**
- **What are the outcomes of the assessment and what is the action plan to incorporate the unmet needs data into the community needs assessment?**

**NOTE:** The state may want to pursue the possible collaborative data collection role of potential CCBHCs or community behavioral health providers in supporting the development of the state’s community needs assessment.
1. How the state can use the application submitted to HRSA to designate behavioral Health Professional Shortage Areas (HPSA) within the state:
   
   • HRSA/HPSA designations require states to define service/catchment areas....because the CCBHC program is requiring this as well, one of the threshold questions is whether your state has already developed a map of service/catchment areas or not.
   
   • Some states have already developed these maps of service/catchment areas (whether or not for HPSA designation as a behavioral shortage area) and some have not.
2. Appropriateness of currently defined geographic areas and relationship to the community behavioral health providers.

**NOTE**: The determination of service/catchment areas is the first step in needs assessment.
3. If the state has defined community behavioral health provider geographic service/catchment areas, has the state assessed the unmet needs within each of the geographic areas in terms of:

   a. *Does the state have needs data/information for all community provider geographic areas?*
   
   b. *Needs for a trauma-informed service delivery model?*
   
   c. *Identification of whether needs are solely personnel issues or their needs by specific areas of need (e.g., SUD, major diagnostic groupings)?*
   
   d. *Needs of special populations (e.g., cultural and linguistic competency needs, diagnostic groupings, etc.)?*
   
   e. *Do the needs projected conform with evidence-based practices?*
   
   f. *Defining the service needs of populations outside the four-walls (e.g., Foster Care, ER, Jails, Homeless Shelters, etc.)?*
   
   g. *Age of existing data – How old is too old?*
   
   h. *What states should do with data that is prepared/generated?*
4. Important to assess the existing level of unmet needs for the populations currently being served by the community behavioral health clinics.

5. Existing needs of persons in the community that could be, but are not currently being served by a CCBHC or community behavioral health provider (i.e., SMI and SED).
6. Has the state integrated consumer and family/caregiver input into the needs assessment process?

7. Does the assessment of needs from all of the indicators in those areas of need provide sufficient specificity and data to support the specific services that the CCBHCs or community behavioral health provider will be required to provide (e.g., the CCBHC Certification Program Requirement 4 identifies specific services that need to be provided, and SAMHSA’s CCBHC Certification Program Requirement 2: Availability and Accessibility of Services in general and specifically the requirement to provide crisis management services 24 hours a day and delivered within three hours - sec.2.c.1)?
1. Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis intervention services, and crisis stabilization.
2. Screening, assessment, and diagnosis, including risk assessment.
3. Patient-centered treatment planning or similar processes, including risk assessment and crisis planning.
4. Outpatient mental health and substance use services.
5. Outpatient clinic primary care screening and monitoring of key health indicators and health risk.
6. Targeted case management.
7. Psychiatric rehabilitation services.
8. Peer support and counselor services and family supports.
9. Intensive, community-based mental health care for members of the armed forces and veterans, particularly those members and veterans located in rural areas, provided the care is consistent with minimum clinical mental health guidelines promulgated by the Veterans Health Administration, including clinical guidelines contained in the Uniform Mental Health Services Handbook of such Administration.
Community Needs Assessment Topic
Areas and Activities

• Importance of integrating consumer and family/caregiver input into the community needs assessment process.
  • *Focus groups within the geographic areas of the community behavioral health providers.*
  • *Key informant interviews.*
  • *Written surveys that request specific unmet needs, service availability and accessibility information.*
• *Community stakeholder forums.*
Community Needs Assessment Topic
Areas and Activities

- What is the requirement for evening and weekend hours? What is the minimum expectation for evening and weekend coverage? Is it for all services or just some? If some, which ones?
- Some examples of how states might ask open ended questions in order to identify service needs and potential barriers to accessibility:
  1. *In order to best meet your needs, what services do you want/choose to assist in your recovery and what times and days would work best for you?*
  2. “*Would evening and/or weekend hours provide better accessibility to services for you from a transportation or availability standpoint?*”
  3. “*What barriers do you have in accessing our services and the day/time most convenient for you?*”
  4. “*From the standpoint of having available transportation, which days/times work best for you to access services?*”

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6. Does the data collected in the needs assessment support the state’s development of justification for all identified outliers to the service requirements?
   • *If not, additional needs data will be needed.*

7. Has the state identified a possible collaborative role of participating community behavioral health clinics in supporting the development of the state community needs assessment?
1. Participants in the webinar can schedule a 15 minute conference call based follow up call with David Lloyd, Founder of MTM Services.

2. The office hours for guidance will be available on **Monday, February 8th from 1:00 p.m. – 5:00 p.m. EST.**

3. In order to schedule a time slot, please submit via email by the close of business on **Thursday, February 4th** a preferred time and topic for the call related to issues covered in the webinar.

4. Email your request to David at [david.lloyd@mtmservices.org](mailto:david.lloyd@mtmservices.org) and send a copy your email to: [Cathleen.Crowley@samhsa.hhs.gov](mailto:Cathleen.Crowley@samhsa.hhs.gov)

5. **The purpose of these calls** is not to provide formal Federal TA on conducting a needs assessment to meet the needs of any specific grant program. Grantees should contact their Federal Government representative when seeking formal permission/TA related to grant activity. Please note that a representative from SAMHSA will also be present on the line during the call.
Questions and Answers
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