### Form B - Substance Use Disorder Treatment Budget Narrative

**Local Authority:** Summit Co

**Instructions:**
In the cells below, please provide an answer/description for each question. **PLEASE CHANGE THE COLOR TO BLUE, OF SUBSTANTIVE NEW LANGUAGE INCLUDED IN YOUR PLAN THIS YEAR!**

<table>
<thead>
<tr>
<th>1) Early Intervention</th>
<th>Program Manager</th>
<th>Holly Watson</th>
</tr>
</thead>
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<tr>
<td>Form B - FY23 Amount Budgeted:</td>
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Describe local authority efforts to provide for individuals convicted of driving under the influence, a screening; an assessment; an educational series; and substance abuse treatment as required in Utah Code § 17-43-201(5)(m).

Per direction from the Summit County Council, all terms within the Area Plan are to be spelled out and the usage of abbreviations prohibited in County documents such as this Area Plan.

Individuals requiring care related to driving under the influence charges must complete the Substance Abuse Subtle Screening Inventories (SASSI) screening tool and a biopsychosocial substance use/mental health assessment before participating in the class. Any participant scoring High Probability of Having a Substance Use Disorder (SUD) will be referred for a complete Substance Use Assessment, along with those court ordered to complete a substance use evaluation. Those meeting the criteria for treatment after an assessment, will be referred to a clinician.

Identify evidenced-based strategies designed to intervene with youth and adults who are misusing alcohol and other drugs.

The Huntsman Mental Health Institute – Park City uses biopsychosocial substance use/mental health assessment including the Substance Abuse Subtle Screening Inventories (SASSI), University of Rhode Island Change Assessment (URICA), American Society of Addiction Medicine (ASAM), Outcome Questionnaire/Youth Outcomes Questionnaire (OQ/YOQ), all of which are evidence-based screening tools used to determine necessary interventions for youth and adults. For individuals who request services, and are assessed as appropriate for early intervention are referred to Alcohol & Drug Intervention (ADI) or a limited course of outpatient substance use treatment that focuses on psychoeducation. For the limited outpatient services, evidence-based psychoeducation is primarily
Describe work with community partners to implement brief motivational interventions and/or supportive monitoring in healthcare, schools and other settings.

For additional information related to school prevention programs, see Form C. For information related to identification, please see Form A.

Substance Use Disorder (SUD) intervention takes place at Huntsman Mental Health Institute – Park City through referral of network clinicians to access Medically Assisted Treatment (MAT). Treatment includes motivational interviewing skills in efforts to engage individuals in both health care and behavioral health services. Summit County contracts with Wasatch Behavioral Health to provide Mobile Crisis Outreach Teams (MCOTs) and crisis services in the community, which facilitates treatment, assessment and referral. Individuals involved in driving under the influence or other probation services are also encouraged and referred as needed. Summit County and University or Utah Health Plans interact with all Local Education Authorities (LEAs) in the area and provide services to all schools in Summit County. Schools refer students for therapy and early intervention services.

Describe any outreach and engagement efforts designed to reach individuals who are actively using alcohol and other drugs.

Courts:

Clients who are court mandated to have a behavioral health assessment are referred to the Huntsman Mental Health Institute – Park City clinic. Treatment recommendations are determined and sent to the court. Patients receive treatment at Huntsman Mental Health Institute – Park City and are tracked through the courts and case management services to completion.

Education:

Community education and identification efforts are provided to local community groups and businesses by the Summit County Behavioral Health Prevention Team, Summit County Health Promotions Team, and partner non-profits such as CONNECT Summit County. The largest of these includes annual training of Sundance Volunteers and local ski resort employees for the winter season.

Schools & Local Education Authorities:

The school-based therapy program in Summit County is robust and all students who are referred to counseling services are assessed and given a treatment plan. This assessment includes a risk of substance abuse which if present will be addressed in the treatment plan. Many students, particularly as they are in higher grades, are referred to school-based services for substance abuse in tandem with behavioral health issues.

Describe efforts to assist individuals with enrollment in public or private health insurance directly or through collaboration with community partners (healthcare navigators or the Department of Workforce Services) to increase the number of people who have public or private health insurance.

Summit County residents are provided three options to help in navigating behavioral healthcare in Summit County.
Summit County Network:
The term Summit County Network refers to the overall umbrella of services coordinated by the Behavioral Health Division, which includes the services contracted to the University of Utah Health Plans, their behavioral health department known as Healthy U. Behavioral (HUB), local non-profits which provide low to no cost care to residents, Intermountain Healthcare (IHC), the Mental Wellness Alliance, Wasatch Behavioral Health (WBH), and private clinicians within Summit County. Where appropriate, private clinicians and non-profits refer to the HUB Network for enrollment.

HUB Network:
The term HUB Network refers to the network administered by University of Utah Health Plan's behavioral health arm known as Healthy U. Behavioral (HUB), and is responsible for providing through a network of clinicians, all of the mandated services as outlined in Utah Administrative Code. Additionally, University of Utah Health Plans holds the Medicaid Contract and is responsible for its administration and service delivery. Network clinicians operating within the HUB Network are not limited to taking Medicaid, state, or University of Utah Health Plans funds. Many have additional panels and are able to be referred within the Network.

CONNECT:
A local non-profit, CONNECT Summit County, has established a peer navigator service free to residents of Summit County. Through use of their service database, individuals and navigators are able to search for specific types of services and see what insurance a clinician takes. If an individual is unable to pay for services and is not on Medicaid or state funding, the navigators are able to coordinate with non-profit clinicians for scholarship opportunities. The database can be found here: https://summit.ut.networkofcare.org/mh/

Describe activities to reduce overdose.
1. educate staff to identify overdose and to administer Naloxone;
2. maintain Naloxone in facilities,
3. Provide Naloxone kits, education and training about overdose risk factors to individuals with opioid use disorders and when possible to their families, friends, and significant others.

The Summit County Health Department provides distribution and training for any agency, school, business, or individual wishing to receive free Naloxone kits. Prior to COVID, trainings were held monthly and are expected to resume this fall. Successful training is required before any Nalone kit is released. Trainings are overseen by the Director of Nursing Services.

Describe any significant programmatic changes from the previous year.
N/A

2) Ambulatory Care and Withdrawal Management (Detox) ASAM IV-D, III.7-D, III.2-D, I-D or II-D

| Form B - FY23 Amount | $38,756 | Form B - FY23 Projected | 6 |
Describe the activities you propose to assist individuals prevent/alleviate medical complications related to no longer using, or decreasing the use of, a substance. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.

University of Utah Health Plans has a contractual agreement with Volunteers of America to provide non-medical detoxification services for Summit County patients. Medical detoxification services are available through the Huntsman Mental Health Institute - Salt Lake City, and direct admission is available through the Huntsman Mental Health Institute – Park City. Huntsman Mental Health Institute inpatient detoxification program ensures safe withdrawal and the beginning of the recovery process. Patients are detoxified under the care of a psychiatrist, nurses, social workers, and psychologists who provide medication, monitoring, and support during the withdrawal period. Additional treatment includes group therapies and activities throughout the day to address the disease of addiction. To ensure continued success when the patient leaves the hospital, HMHI creates discharge plan outlines with the patient and family for appropriate follow-up coordination of care into the HUB Network.

Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).

Increased cost of services from an average cost of $6,810 per person to $7,627.

Describe any significant programmatic changes from the previous year.

N/A

If this service is not provided by the Local Authority, where are individuals accessing this level of care when needed? Who in your community provides this service? How is the service paid for?

Medical detoxification services will be provided at Huntsman Mental Health Institute – Salt Lake with other detoxification services provided at Volunteers of America in Salt Lake City.
Describe the activities you propose and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and identify the population served (Men, Women, Youth).

University of Utah Health Plans uses contracted clinicians, Odyssey House, First Step House, Salt Lake Behavioral Health, House of Hope and others, for residential services. Consideration is given to funding sources and services available for placement. There are no residential treatment facilities in Summit County. While in residential treatment case managers and care managers coordinate and arrange after care through network clinicians. Services consist of evaluation and treatment planning, individual and group therapy, skill development, case management, recovery support services, social detoxification, smoking cessation and, when indicated, medication management and Medically Assisted Treatment (MAT). Clients receive assistance in transitioning to lower levels of care as indicated by the American Society of Addiction Medicine (ASAM) placement tool.

Please refer to the Healthy U. Behavioral Health Network clinician link for a full list of network clinicians available at https://healthyubehavioral.com/

Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).

Increased cost of services from an average cost of $23,570 per person to $28,125.

Describe any significant programmatic changes from the previous year.

N/A

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<td>Form B - Actual FY21 Clients Serviced as Reported by Locals</td>
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Describe the activities you propose and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and summarize the services they will provide for the local authority.

Currently, methadone services are not provided in Summit County. Resources are provided through Project Reality in Salt Lake City. Project Reality serves adults with opioid use disorder diagnoses for recovery and wellness and offers buprenorphine, methadone, and naltrexone combined with physical and mental health services.
Describe any significant programmatic changes from the previous year.

N/A

5) Office-based Opioid Treatment -(Vivitrol, Naltrexone, Buprenorphine)  

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<td>Form B - Actual FY21 Clients Serviced as Reported by Locals</td>
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Describe activities you propose to ensure access to Buprenorphine and Naltrexone (including Vivitrol) and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider.

University of Utah Health Plans provides these services through the HUB Network primarily through Huntsman Mental Health Institute – Park City to prescribe Buprenorphine, Vivitrol and Naltrexone on-site by a prescriber. Services include medication evaluation and management for Medically Assisted Treatment (MAT) services with supplemental treatment services and recovery supports to include group therapy, individual therapy, case management, Peer Support Specialist (PSS), and urine-drug screening. Services are determined by assessment and screening with individualized treatment plans. Medically Assisted Treatment (MAT) services are offered by network clinicians, for inpatient and outpatient services, like Odyssey House and First Step House who contract with Project Reality for overdose treatment programs.

The University of Utah School of Psychiatry and the Huntsman Mental Health Institute, have created a program to help people struggling with opioid addiction known as BRIDGE. If a patient is experiencing opioid dependency or suffering from withdrawal symptoms, they can receive immediate treatment. Patients are given an initial buprenorphine dose as well as a prescription for the initial month of medication. After receiving the medication they need, they’re referred to an outpatient clinic that will continue treatment by developing a custom-tailored long-term care program. There is no cost to the patient. The program is state funded by a grant that aims to fight the opioid epidemic in Utah. The goal is to get the patient’s addiction stabilized and their head clear so they can focus on the other struggles in their life.

Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).

Currently, it is unclear as to the reason, but clinicians report seeing fewer people with an Opioid Use Disorder after COVID, and report that this trend began during the pandemic. Summit County Behavioral Health Division will monitor this during FY23. One possible explanation may be the concerted effort of
both Intermountain Healthcare and the University of Utah to make prescription of opioids a medication of last resort.

Describe any significant programmatic changes from the previous year.

N/A

6) Outpatient (Non-methadone – ASAM I)

| Form B - FY23 Amount Budgeted: | $538,347 | Form B - FY23 Projected clients Served: | 675 (Number is expected to change as seasonal workers return.) |
| Form B - Amount Budgeted in FY22 Area Plan | $328,262 | Form B - Projected Clients Served in FY22 Area Plan | 723 |
| Form B - Actual FY21 Expenditures Reported by Locals | $83,709 | Form B - Actual FY21 Clients Serviced as Reported by Locals | 15 |

Describe the activities you propose and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.

Standard Outpatient services are provided at American Society of Addiction Medicine (ASAM) 1.0 through the HUB Network with Huntsman Mental Health Institute – Park City providing the backbone operations for Substance Use Disorder (SUD) treatment in Summit County. Standard Outpatient group therapy is offered Wednesdays, weekly, from 4pm-5pm at Huntsman Mental Health Institute – Park City, with additional groups provided through CONNECT Summit County. Services also include individual therapy, case management, peer support specialist and other recovery support services, urine drug screening and medication management when applicable. Services are determined through assessment and screening with individualized treatment recommendations/plans. Services are provided to men, women and adolescents who are voluntarily seeking treatment and to those referred for treatment from the judicial system. American Society of Addiction Medicine (ASAM) placement criteria are utilized to determine appropriate treatment levels. Other groups available include process groups, psychoeducation, Moral Reconation Therapy (MRT), family interventions, gender specific treatment and skills-based groups. University of Utah Health Plans is partnered with the National Jewish Health online programs to offer smoking cessation groups.

A portion of outpatient services are offered through contracted network clinicians outside of the county when appropriate. These outpatient services are provided to increase treatment access and timeliness and to ensure an effective integration into the community as a transition from more intensive treatment to less intensive outpatient services.

Youth Outpatient Services:
Outpatient youth services are offered in conjunction with school-based services and through the HUB Network. School-based clinicians work with University of Utah Health Plans to ensure warm hand-offs when youth transition into new services. In Kamas and Coalville, Youth services are supported by Huntsman Mental Health Institute – Park City in the South Summit School District and North Summit School District through Expansive Horizons Counseling and Huntsman Mental Health Institute – Park City.

Please refer to the University of Utah Health Plans Network Clinician link for a full list of network clinicians available at https://healthyubehavioral.com/

Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).

Currently, it is unclear as to the reason, but clinicians report seeing fewer people with a Substance Use Disorder after COVID, and report that this trend began during the pandemic. Summit County Behavioral Health Division will monitor this during FY23. One possible explanation may be the shortage of seasonal and part-time workforce during the COVID pandemic and the recent ski season. As normal operations of our resort economy resumes, we are planning for a return to pre COVID amounts, or even an increase reflecting the high rates of problematic substance use that is reported across the county. We expect to treat a majority of the clients on an outpatient basis and so we have allocated the majority of our funding to outpatient treatment services.

Describe any significant programmatic changes from the previous year.

N/A

7) Intensive Outpatient (ASAM II.5 or II.1)  

| Form B - FY23 Amount Budgeted: | $94,196 | Form B - FY23 Projected clients Served: | 80 |
| Form B - Amount Budgeted in FY22 Area Plan | $153,046 | Form B - Projected Clients Served in FY22 Area Plan | 100 |
| Form B - Actual FY21 Expenditures Reported by Locals | $133,120 | Form B - Actual FY21 Clients Serviced as Reported by Locals | 19 |

Describe the activities you propose and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.

Intensive Outpatient services are provided at American Society of Addiction Medicine (ASAM) 2.1, through the Hub Network, primarily through the Huntsman Mental Health Institute – Park City in Summit County. Intensive Outpatient (IOP) group therapy is offered five days a week at Huntsman Mental Health Institute – Park City from 8-10 am or 5-7 pm depending on the day. Groups are located at 1820 Sidewinder Drive Ste.100, PC, UT 84040. Services are provided to men, women and adolescents who are voluntarily seeking treatment and to those referred for treatment from the judicial system. American Society of Addiction Medicine (ASAM) placement criteria are utilized to determine
appropriate treatment levels. Other groups available include process groups, psychoeducation, Moral Reconation Therapy (MRT), family interventions, gender specific treatment and skills-based groups. University of Utah Health Plans is partnered with the National Jewish Health online programs to offer smoking cessation groups. Services are determined through assessment and screening with individualized treatment recommendations/plans.

Recovery WORKS is an intensive outpatient program designed to offer structure and support for adults who are dealing with issues related to substance use disorders. Patients work in a group therapy setting four nights a week for eight weeks. To ensure success after completion of treatment, continued weekly lifetime aftercare support is available for participants. The treatment team includes a board-certified addiction psychiatrist, licensed clinical social workers, licensed substance abuse counselors, and expressive clinicians. Elements of the program include:

- Comprehensive Substance Use Disorder Treatment addressing individual, family, relationship and environmental challenges.
- Utilization of Cognitive Behavioral Therapy (CBT), Motivational Enhancement (formerly MI), Acceptance and Commitment Therapy (ACT), and other empirical techniques within the most up-to-date recovery treatment framework.
- Collaboration with our addiction psychiatry and addiction medicine doctors and senior residents/fellows and clinicians in our Recovery Clinic who incorporate the latest in recovery medications and recovery aides.
- Therapeutic and educational support for program participants, and their friends and family members.
- Cognitive Behavior Therapy (CBT), and
- Experiential therapy, which includes art and music therapy and ropes challenge course activities, are integrated into the program weekly.

The Recovery Clinic is for adults seeking treatment for substance use disorders and dual diagnosis treatment. Staffing includes board-certified psychiatrists, Licensed Clinical Social Workers and Mental Health Counselors who specialize in individual addiction treatment. As a teaching academy, the University Recovery Clinic is also staffed with senior residents and addiction trained fellows. Services include:

- Medication Addiction Treatment Group (MAT Group),
- Medically Assisted Treatment (MAT) is to be used with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of substance use disorders,
- Education and practical skills for achieving recovery,
· Process group to discuss recent struggles and/or upcoming challenges,
· Consultation and evaluation,
· Group and individual therapy,
· Medication management,
· Suboxone Maintenance Therapy (SMT),
· Outpatient detoxification, if medically appropriate.

The American Society of Addiction Medicine (ASAM) 2.5 level of care is serviced through the HUB Network in Salt Lake City and day treatment clinicians (Odyssey House, Steps Recovery).

**Youth Outpatient Services:**

Outpatient youth services are offered through school-based services and through the contracted network clinicians University of Utah Health Plans school-based clinicians work with the Hub Network to ensure warm hand-offs when youth transition into higher levels of care. In Kamas and Coalville, youth services are supported by Huntsman Mental Health Institute – Park City in Kamas and Coalville, along with Expansive Horizons Counseling in North and South Summit School Districts. American Society of Addiction Medicine (ASAM) level of care 2.5, Day treatment is provided for adolescents through Odyssey House and TeenScope (a treatment program for teens ages 12–18 that helps teens and their parents) programs in SLC.

Please refer to the Healthy U Behavioral Health Network Clinician link for a full list of network clinicians available at https://healthyubehavioral.com/

**Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).**

N/A

**Describe any significant programmatic changes from the previous year.**

N/A

<table>
<thead>
<tr>
<th>8) Recovery Support Services</th>
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<tr>
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<td><strong>Form B - Actual FY21 Expenditures Reported by</strong></td>
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</table>
Locals

Reported by Locals

Describe the activities you propose and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. For a list of RSS services, please refer to the following link: https://dsamh.utah.gov/pdf/ATR/FY21 RSS Manual.pdf

Recovery support services target current patients, non-treatment seeking individuals and post treatment patients through assistance in creating and implementing recovery lifestyle plans/after care. Recovery support services are available to patients along with community referrals; University of Utah Health Plans doesn’t require that an individual be in treatment to access recovery support services. Examples of services offered to patients include:

- Fit To Recover (four pillars: Nutrition, Community Service, Creative Arts, and Fitness through group cooking classes, artistic endeavors, service outreach, and sports & exercise),
- Peer Support Specialists (PSS) through Huntsman Mental Health Institute – Park City,
- Alcoholics Anonymous,
- Narcotics Anonymous,
- Trauma informed yoga instruction through Tall Mountain Wellness PC,
- Case Management (Many clients face challenges with housing, employment, access to health care along with a variety of other needs. Where possible, University of Utah Health Plans provides emergency/temporary housing assistance and funding for medical services and medications) through Huntsman Mental Health Institute – Park City,
- Psychoeducation and life skills groups offered by Huntsman Mental Health Institute – Park City (both men and women specific groups-Prime for Life, Building Resilience and Seeking Safety) as well as other contracted clinicians in the network. Clients can be linked with educational opportunities and can obtain their GED or Adult High School Diploma.

Our Drug Court program emphasizes leadership roles in the higher phases of the program. Individuals are mentors to others in the program. Further programming is being developed to enhance alumni support through regular check-ins with a Peer Support Specialist (PSS), up to 90 days post active treatment. Additionally, community resources are invaluable. Clinicians initiated a collaboration with Utah Recovery Support Services (USARA) to enhance peer mentoring in the county. Peer Support Specialists (PSS) and case managers currently contact patients who have completed treatment post-discharge to offer peer support services if needed. Case management offers transition out support services used to assess unmet basic needs to overcome barriers that interfere with long term recovery like funding, housing and job placement services.
Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).

The Summit County Recovery Foundation, a local 501c3, provides recovery support to individuals in recovery, especially those in Drug Court. Office of Substance Use and Mental Health funds are used to offset the cost of living in Summit County. The reduction in numbers is a reflection of a more accurate understanding of service utilization.

Describe any significant programmatic changes from the previous year.

N/A

9) Peer Support Services-Substance Use Disorder

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<td>Form B - Actual FY21 Clients Serviced as Reported by Locals</td>
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Describe the activities you propose to undertake and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider.

Clients have access through the HUB Network to Peer Support Specialists (PSS) provided through Huntsman Mental Health Institute – Park City and CONNECT. Additionally, Huntsman Mental Health Institute – Park City provides peer support service groups and individual sessions within the Summit County Jail. PSS also runs groups in the Huntsman Mental Health Institute – Park City for all Substance Use Disorder (SUD) programming, including Drug Court. Case managers are trained in Community Reinforcement and Family Training (CRAFT) and extend group offerings throughout the year as well as connect with the Utah Recovery Support Services (USARA) to include offerings through their agency. Please see the above section on “Recovery Support Services” for full details of peer support offered.

Describe how clients are identified for Peer Support Specialist services. How is the effectiveness of the services measured?

Clients are identified for peer support services after initial biopsychosocial screening and assessment as part of their treatment plan at the Huntsman Mental Health Institute – Park City clinic.

Clients may also be referred to a Peer Support Specialist (PSS) through University of Utah Health Plans if a client is not being seen through the HMHIPC clinic.

Please attach policies and procedures for peer support including peer support supervision and involvement at the agency level.
Huntsman Mental Health Institute – Park City utilizes the guidelines from the Office of Substance Use and Mental Health regarding the use of peer support services.

Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served and number of services provided (15% or greater change).

Peer support services are expected to see another increase in Summit County. Latino Behavioral Health has established a presence in Summit County and Huntsman Mental Health Institute – Park City is also trying to increase utilization of peer support services as part of their service offering. Huntsman Mental Health Institute – Park City is doing this in order to better meet client needs but also as a way to deal with clinician shortages, hoping to provide more services through peers.

Describe any significant programmatic changes from the previous year.

N/A

10) Quality & Access Improvements

Describe how you will increase access to treatment services. Is there a waiting list for certain levels of care? What services are available to individuals who may be on a wait list?

The change from a staff model, with limited clinicians available, to a network model has greatly expanded access to Summit County residents. Huntsman Mental Health Institute – Park City is the backbone network clinician and remains a resource for both Medicaid members and those receiving services from the Office of Substance Use and Mental Health funding. The network has expanded both the geographical and specialty options for residents.

Quality efforts have focused on expanding access and allowing residents a greater choice in how they receive services. University of Utah Health Plans also works with an External Quality Review Organization (EQRO), Health Services Advisory Group (HSAG), to conduct on-site and desk reviews to ensure the integrity of the Performance Measure Validation (PMV), alignment of policies and procedures with the state contract and federal regulations, and the Performance Improvement Project (PIP).

University of Utah Health Plans utilize state and County funding, making services affordable to Summit County residents. University of Utah Health Plans offers interpreter services through the HUB Network, primarily through Huntsman Mental Health Institute – Park City, for Spanish speaking patients and other language needs. With the addition of Latino Behavioral Health, Spanish language services have increased. Currently there are 12 Spanish Speaking network clinicians in Summit County. University of Utah Health Plans contracts with the Summit County jail and Huntsman Mental Health Institute – Park City is the contracted treatment clinic. This partnership allows for increased services in the jail including medication evaluation and management, crisis support, assessment and group psychoeducation and Moral Reconation Therapy (MRT) courses. Additionally, follow-up care is coordinated with Huntsman Mental Health Institute – Park City. Doctors, clinicians, case managers and the peer specialist work to make transitions seamless for individuals.

University of Utah Health Plans care managers are new in Summit County, providing care management...
nurses to help people with their health care and community service needs. Care management is conscious of cultural and linguistic preferences of members and their supports. The care management program offers individual attention to help meet health care goals. Services include education, advocacy, and coordination of needed services. This program is no-cost for University of Utah Health Plans members and unfunded residents who want care management nursing services.

We do not have a waiting list for services as the University of Utah Health Plans' network model provides increased access to treatment in the county for behavioral health services and therefore directs treatment to clinicians by specialty and location, rather than funneling all patients through the same channels.

Describe efforts to respond to community feedback or needs. Describe your participation with key community partners (e.g.: Multi-Agency Coordinating Committees, Regional Advisory Councils, High Fidelity Wraparound teams, Local Interagency Councils, Local Recovery Community, Local Homeless Coordinating Committees, Peer Advocacy Groups, County Attorney, Law Enforcement, Local Education Agencies, Courts, Regional Healthcare Coalitions, and other partnership groups relevant in individual communities) shall occur consistently.

University of Utah Health Plans works closely with community agencies including that Summit County Health Department, CONNECT Summit County (local MH non-profit), Vail Resorts wellness management, Summit County Recovery Foundation, Peace House, Children’s Justice Center, Summit County Justice Department, probation and local law enforcement, North Summit School District, South Summit School District, and the Summit County School District. These relationships provide an important way to promote services. In addition, the University of Utah Health Plans website refers patients to the network clinicians and has additional information about services available. University of Utah Health Plans outreach workers and those employees working in the community offer education to outside agencies. Recovery Support Specialists (RSS) network with other recovery supports to broaden the array of opportunities for clients.

HUB meets monthly with the Summit County Behavioral Health Executive Committee, which serves as the Local Authority as appointed by the Summit County Council, on issues related to behavioral health. Membership includes local elected leadership, Intermountain Healthcare, Latinx community, non-profits, network clinicians, Summit County Sheriff’s Office, Summit County Attorney’s Office, and the Summit County Health Department. This Committee reviews metrics established within the contract to identify areas to be improved upon and provide support. HUB also serves on several Summit County Mental Wellness Alliance committees such as:

- Latino Behavioral Affairs Committee
- Behavioral Health Fundraising Committee
- Community Behavioral Health Assessment Committee
- Superintendents Committee for Behavioral Health (School Districts)
- Aging and Advocacy Coalition
- First Responder Committee (Expanded JRI Committee)
- Hope Elevated (Suicide Prevention Committee)

Participation with these committees provides for direct feedback from community partners related to behavioral health.
Twice a year, the Division of Behavioral Health, along with CONNECT, conducts a Network Clinician meeting to ensure terms of the contract are being met and that clinicians are receiving the support and resources needed to provide the highest level of care for residents. Issues brought up are discussed with solutions being developed and improvement plans implemented with Healthy U. Behavioral. Clients are also able to give feedback through the Mental Health Statistical Improvement survey.

This past fall, the Behavioral Health Division conducted a community assessment. The goal of this assessment is to gauge what improvements to behavioral health services and understanding have taken place over the past four years within the community and to identify new gaps and areas of improvement. Conducted as both a targeted sample conducted by PRC, a medical research company, via telephone interviews, a community online assessment, and multiple community focus groups, the results of the assessment was compiled into the annual report and are being used to guide the development and update to the Summit County Behavioral Health Strategic Plan (Formerly the Summit County Mental Wellness Strategic Plan) and approved by the Summit County Council.

What evidence-based practices do you provide? Describe the process you use to ensure fidelity?

University of Utah Health Plans offers and supports professional training to ensure competency and fidelity. Many clinicians in the network have certifications in EBPs. The following is a list of some of the EBPs provided in the network:

- Motivational Interviewing
- Cognitive Behavioral Therapy (CBT) for Substance Abuse and Co-Occurring Disorders (Hazelden Curriculum)
- Moral Reconation Therapy (MRT) and Domestic Violence Moral Reconation Therapy (MRT)
- Dialectical Behavioral Therapy (DBT)
- Post-traumatic Stress Disorder (PTSD) Treatments: Seeking Safety & Beyond Trauma & Building Resilience
- Matrix Model for Intensive Outpatient Treatment (IOP)
- Substance Abuse and Criminal Behavior
- The Change Companies Curriculum
- Thinking Errors
- Anger Management
- Behavioral Therapy
- Family Therapy/ Multi-Family Group Therapy/CRAFT
- Criminal Risk Assessment and Treatment
- Eye Movement Desensitization and Reprocessing (EMDR)
- Trauma Recovery Empowerment Model (TREM)
- Men’s Trauma Recovery and Empowerment Model (M-TREM)

Staff meetings occur weekly between University of Utah Health Plans and the Huntsman Mental Health Institute – Park City Clinic to incorporate opportunities to discuss cases, in addition to one-on-one clinical supervision. Case consultation meetings are held monthly through Huntsman Mental Health Institute – Park City. Clinical staff participate in consultation groups that meet to review case progress with senior clinicians through Huntsman Mental Health Institute – Salt Lake, providing opportunities for learning and growth, burn out reduction and increased clinical support. Huntsman Mental Health Institute – Park City staff training and staff meetings enhance coordination of care within the network.
and greater utilization of community resources.

### Describe your plan and priorities to improve the quality of care.

University of Utah Health Plans meets monthly with the Summit County Behavioral Health Executive Committee, which serves as the Local Authority as appointed by the Summit County Council, on issues related to behavioral health. Membership includes local elected leadership, Intermountain Healthcare, Latinx community, non-profits, network clinicians, Summit County Sheriff's Office, Summit County Attorney’s Office, and the Summit County Health Department. This Committee reviews metrics established within the contract to identify areas to be improved upon and provide support.

HUB also serves on several Summit County Mental Wellness Alliance committees such as:

- Latinx Behavioral Affairs Committee
- Behavioral Health Fundraising Committee
- Community Behavioral Health Assessment Committee
- Superintendents Committee for Behavioral Health (School Districts)
- Aging and Advocacy Coalition
- First Responder Committee (Expanded JRI Committee)
- Hope Elevated (Suicide Prevention Committee)

Participation with these committees provides for direct feedback from community partners related to behavioral health.

Twice a year, the Division of Behavioral Health, along with CONNECT, conducts a Network Clinician meeting to ensure terms of the contract are being met and that clinicians are receiving the support and resources needed to provide the highest level of care for residents. Issues brought up are discussed with solutions being developed and improvement plans implemented with Healthy U. Behavioral.

Clients are also able to give feedback through the Mental Health Statistical Improvement survey.

This past fall, the Behavioral Health Division conducted a community assessment. The goal of this assessment is to gauge what improvements to behavioral health services and understanding have taken place over the past four years within the community and to identify new gaps and areas of improvement. Conducted as both a targeted sample conducted by PRC, a medical research company, via telephone interviews, a community online assessment, and multiple community focus groups, the results of the assessment was compiled into the annual report and are being used to guide the development and update to the Summit County Behavioral Health Strategic Plan (Formerly the Summit County Mental Wellness Strategic Plan) and approved by the Summit County Council.

### Identify the metrics used by your agency to evaluate substance use disorder client outcomes and quality.

HUB Network Clinicians, uses the following metrics to evaluate outcomes and quality:

- Outcome Questionnaire/Youth Outcomes Questionnaire (OQ/YOQ) measures at intake and at 30-day intervals
- Medication Assisted Treatment (MAT)
- Abstinence (via Urine Analysis)
- Patient retention
- Improved housing and employment
- Rapid Accessing treatment after treatment completion or relapse
- Outpatient / Intensive Outpatient: Client outcomes at the time of completion of services in a discharge summary:
  - Goal / Objective attainment.
  - Patient progress and continuing care plan
  - PSS follow up measures and check in reports
  - Discharge Referrals to Recovery Support activities, identified and reviewed
  - Annual questionnaires and surveys
  - The Daily Living Activities-20 (DLA-20) is used as an outcome measure. Given at admission, every 90 days, and at discharge.
- Youth Substance Use Disorder Services: Treatment completion/client retention
  - Abstinence/decreased rates of substance use
  - Engagement in school and other prosocial supports and activities
  - Legal involvement/Recidivism

Additionally, the youth/adolescent program, through Huntsman Mental Health Institute – Park City, is working with the University of Utah’s Social Research Institute to identify how to increase support in the county. Case managers use the Daily Living Activities-20 (DLA-20) to identify client needs, assess areas where improved functioning is needed, and identify areas of strength that can be used to build recovery capital and develop a recovery plan. Progress is evaluated through ratings on objectives, as well as overall change scores.

Describe your agency plan in utilizing telehealth services. How will you measure the quality of services provided by telehealth?

University of Utah Health Plans intends to continue to provide telehealth options where appropriate and where preferred as a way to access services for all clients. This is true even as in-person services have resumed. The choice to use telehealth will be made based on client preference and the availability of services.

11) Services to Persons Incarcerated in a County Jail or Correctional Facility

Describe the activities you propose and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider, and how you will coordinate with the jail to ensure service delivery is adequate.

University of Utah Health Plans, through Huntsman Mental Health Institute – Park City, contracts with the Summit County Jail to provide behavioral health treatment directly in the jail. With the Justice Reinvestment Initiative (JRI) and other funding, Huntsman Mental Health Institute – Park City provides crisis services, case management, peer support services, medication evaluation, individual and group services weekly. There are seven gender specific groups offered per week including Moral Reconation Therapy (MRT), trauma informed yoga, and life skills. The clinical manager of Huntsman Mental Health Institute – Park City along with a team of clinicians was assembled to focus on the needs of the jail and meets on a monthly basis. These meetings address service delivery and workflow and complete any necessary patient staffing. A Huntsman Mental Health Institute – Park City clinical program manager is available by mobile phone to the jail staff and is contacted when needed. Huntsman Mental Health Institute – Park City provides three hours of Psychiatry, six hours of clinical care and four hours of case
management per week at minimum for this population.

**Justify any expected increase or decrease in funding and/or any expected increase or decrease in the number of individuals served (15% or greater change).**

Summit County has decided to provide more ongoing individual therapy with inmates as a way to lower the amount of crisis work that is required at the jail but also as a way to increase the potential willingness for inmates to participate in behavioral health services post incarceration and lower recidivism. The County has increased its funding support for judiciary-involved individuals.

**Describe any significant programmatic changes from the previous year.**

Summit County, through Huntsman Mental Health Institute – Park City, is increasing the amount of regular therapy services available to inmates as a way to provide better stabilization and decrease the amount of acute crisis services.

**Describe current and planned activities to assist individuals who may be experiencing withdrawal (including distribution of Naloxone) while incarcerated or any efforts to use Medication-assisted treatment within a county jail or Prison. Identify all FDA approved medications currently provided within the jail(s).**

University of Utah Health Plans offers, through the HUB Network, Moral Reconciliation Therapy (MRT), Anger Management, life skills, wellness classes and crisis therapy to individuals who are incarcerated. Attendees may include individuals who are experiencing withdrawal and can be supported through these interventions. The Summit County jail currently does not provide Medically Assisted Treatment (MAT) for any inmates at this time due to space limitations and medical staffing vacancies. However, the Huntsman Mental Health Institute – Park City prescriber (Dr. Jason Hunziker, Medical Director, University of Utah Health Plans) is available to consult with the jail staff when necessary. Medically Assisted Treatment (MAT) services through the Huntsman Mental Health Institute – Park City are available upon release and the team coordinates care for clients after their release to ensure ongoing treatment, follow-up care.

Medically Assisted Treatment (MAT) is continuing to be discussed as a future program in the jail, with our current jail commander in support of the program, but is unable to move forward at this time due to not having the medical staff or physical space available in the current jail.

**The SAPT block grant regulations limit SAPT expenditures for the purpose of providing treatment services in penal or correctional institutions of the State. Please identify whether your County plans to expand SAPT block grant dollars in penal or correctional institutions of the State.**

No

**12) Integrated Care**

Describe your partnerships with local Health Departments, accountable care organizations (ACOs), federally qualified health centers (FQHCs) and other physical health providers. Please include a list of community agencies you partner with to provide integrated services.

University of Utah Health Plans is an Accountable Care Organization (ACO) so many Medicaid
members have a de facto integrated physical health Medicaid plan with University of Utah Health Plans as their physical Medicaid ACO. University of Utah Health Plans also has a good relationship with the other three ACOs. University of Utah Health Plans has an integrated pilot program along the Wasatch Front, and is taking those lessons learned to improve in Summit County. Also, we are taking our relationships with the surrounding counties to collaborate further and work on ways to improve access and services.

University of Utah Health Plans and the Summit County Behavioral Health Division, which is a part of the Summit County Health Department, have a strong working relationship. Through weekly meetings with the Director of Behavioral Health and participation in Mental Wellness Alliance committees, University of Utah Health Plans is a well-regarded partner for our community. We are truly grateful to have them here.

The full HUB Network clinician directory can be found here: https://uhealthplan.utah.edu/pdf/directories/healthyu-behavioral/english-clinician-directory.pdf

Describe your efforts to integrate care and ensure that children, youth and adults have both their physical and behavioral health needs met, including screening and treatment and recovery support. Identify what you see are the primary barriers to implementing integrated care at your agency and your efforts to overcome those barriers. Please also describe how you will provide education and referrals to individuals regarding physical health concerns (i.e., HIV, TB, Hep-C, Diabetes, Pregnancy).

Network clinicians ask health and wellness questions as part of the initial evaluation. Referrals are made to the University of Utah Health Plans and the Summit County Health Department for services as needed. University of Utah Health Plans’ Network Clinicians coordinate with medical staff and local primary care physicians and care managers to access and follow up with medical care. Referrals occur to and from the University Health Redstone Clinic in Kimball Junction.

For clients with co-occurring behavioral health conditions who receive psychiatric care, coordination with primary care physicians is conducted by documentation of visits with psychiatric medication clinicians to the primary care physician as needed. Regular monitoring of Body Mass index (BMI), and vital signs are conducted for all consumers receiving medication management. Metabolic lab work monitoring (lipid panel, glucose) is conducted for those on antipsychotics, and when abnormalities are discovered, the patient is notified, as well as the consumer’s primary care physician. If needed, care managers and case managers may assist clients in following through with visits with their primary care physician to address medical concerns. For those at risk of blood borne illnesses (hepatitis C, HIV), education is given about the risk, as well as they are recommended to be seen at their PCP or health department for screening and treatment if needed. For patients not seeing a prescriber in the network, clinicians address healthcare issues as part of our regular assessment process. Clients are routinely assessed for their HIV, TB, Hepatitis, Medically Assisted Treatment (MAT) status and willingness to engage in seeking treatments. Health care issues are referred either to the client’s primary care physician or People’s Health Clinic or the Health Department. Clinicians follow the status of their client’s health care behaviors during treatment, and at evaluation / treatment plan updates.

University of Utah Health Plans contracts with National Jewish Health for online nicotine cessation at all levels of care. Smoking Cessation posters are in group rooms and around facilities. Quit-line, brochures and information booklets are provided to clients. University of Utah Health Plans will continue to work
with clients to engage them in nicotine prevention and elimination efforts. University of Utah Health Plans will continue to address tobacco use by identifying this element in the initial assessment. University of Utah Health Plans will continue to enhance resources and referrals for those who want to stop / decrease their use. Those interested in using prescription medications and nicotine replacement treatment to aid them are offered as part of their treatment.

Describe your efforts to incorporate wellness and wellness education into treatment plans for children, youth and adults. Please consider social determinants of health in your response.

The HUB Network provides service to both mental health and substance use patients and provides access to the entire University care system. Resources are available through the network to assist clients with the skills, knowledge and strategies for a healthy lifestyle in recovery and whole person-centered care. Clinicians assess emotional, physical, behavioral health and other needs and plan services with clients to obtain interventions and assistance with community partners, network clinicians, university resources or other outside agencies. Clinicians work with families and supports to link and connect with needed resources. Partnerships with University of Utah Health Plans add the support of care management services which assist treatment clinicians by supporting elements of physical wellness through nurses who evaluate patients and link them to resources in the network both in Summit County and in Salt Lake City.

University of Utah Health Plans oversees both Mental Health and Substance Use Disorder treatments within the Network. It also includes Care Managers who work with individuals on coordinating physical and behavioral health services to best integrate care and prevent redundancy or holes in care. University of Utah Health Plans has the advantage of being an Accountable Care Organization (ACO), so we have a large nursing care management team that excels in behavioral and physical care management.

Describe your plan to reduce tobacco and nicotine use in SFY 2023, and how you will maintain a nicotine free environment at direct service agencies and subcontracting agencies. For ongoing engagement, it is recommended to use an evidence-based nicotine dependence tool such as the Fagerstrom scale. SUD Target= reduce nicotine use to 4.8 in 2021 in TEDs.

Huntsman Mental Health Institute – Park City refers clients to the National Jewish Health Quitline which offers targeted counseling as well as nicotine replacement therapy (NRT). The clinic is also a smoke free environment and a client who uses nicotine will have that added to their treatment plan.

Quality Improvement: What education does your staff receive regarding health and wellness for client care including children, youth and adults?

University of Utah Health Plans provides both behavioral and physical healthcare.

<table>
<thead>
<tr>
<th>13) Women's Treatment Services</th>
<th>Rebecca King</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form B - FY23 Amount Budgeted:</td>
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<td>Form B - FY23 Projected clients Served:</td>
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<td>Form B - Amount Budgeted in FY22 Area</td>
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</tr>
<tr>
<td>Plan</td>
<td>Form B - Actual FY21 Expenditures Reported by Locals</td>
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</table>

### Describe the evidence-based services provided for women including gender-specific substance use disorder treatment and other therapeutic interventions that address issues of trauma, relationships, sexual and physical abuse, vocational skills, networking, and parenting.

Services for women are provided by the HUB Network and on-site at Huntsman Mental Health Institute – Park City and the Peace House. These services include individual treatment, group therapy and case management services. Women are also screened for other factors including pregnancy and are provided immediate access to services and connected with appropriate community resources. University of Utah Health Plans is contracted with the House of Hope for residential services. A gender-specific Seeking Safety Trauma and a Dialectical Behavior Therapy (DBT) group is established for women and is run one evening per week. Case management services are also provided and assist with housing needs, access to medical care, obtaining appropriate benefits among other activities.

### Describe the therapeutic interventions for children of clients in treatment that addresses their developmental needs, their potential for substance use disorders, and their issues of sexual and physical abuse and neglect. Describe collaborative efforts with DCFS for women with children at risk of, or in state custody.

As part of the assessment process children are evaluated and treated. Services can be provided on-site with specific Network Clinicians and/or clinicians who see children/youth and adolescents in school-based settings. These clinicians work closely with Utah Division of Child and Family Services (DCFS), the Juvenile Court and community partners like Peace House to support children at risk and their mothers. Clinicians in the network, like Huntsman Mental Health Institute – Park City, collaborate with the Children’s Justice Center (CJC), to support youth and families. Clinicians participate in a System of Care model which identifies and provides services to dysfunctional family systems and seeks to meet needs by connecting and coordinating family involvement with several community and network supports with the goal of rehabilitation.

HUB Network clinicians who focus on youth and women prioritize care for families. Families involved with the Utah Division of Child and Family Services (DCFS) may have children in state custody or are at risk of losing custody. For women in residential treatment and with other extenuating circumstances, contracted clinicians work with DCFS caseworkers to support and facilitate visitation schedules. At Huntsman Mental Health Institute – Park City, clinical management stays connected to the Utah Division of Child and Family Services (DCFS) to develop relationships and communication about families in services and in addition works closely with treatment courts to facilitate case information and services for women and children in this process.

### Describe the case management, child care and transportation services available for women to ensure they have access to the services you provide.

University of Utah Health Plans provides these services through the contracted network clinician model. Case management services are provided to both children and parents in homes, schools and in the Huntsman Mental Health Institute – Park City. Additionally, a Family Resource Facilitator (FRF) is available to work with families in the network. The Family Resource Facilitator (FRF) coordinates care
by attending staff meetings at Huntsman Mental Health Institute – Park City weekly. Transportation is limited to some patients in the Summit County area. The case manager and Family Resource Facilitator (FRF) are available to travel to patients’ homes to provide services.

Patients in services have access to recovery support services through case management and peer support. Coordination of child care through community resources and natural supports, connecting patients to community and vocational resources and working with the Peace House, in domestic violence situations, in specific circumstances to coordinate services. To assist clients with transportation issues, Recovery support services assess need and offer training in public transportation use, providing temporary bus passes, utilizing natural and community supports, and occasionally providing transportation to treatment appointments.

**Describe any significant programmatic changes from the previous year.**

NA

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**Residential Women & Children’s Treatment (WTX) (Salt Lake, Weber, Utah Co & Southwest Only)**

<table>
<thead>
<tr>
<th>Identify the need for continued WTX funding in light of Medicaid expansion and Targeted Adult Medicaid.</th>
<th>Rebecca King</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Please describe the proposed use of the WTX funds</th>
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</table>

<table>
<thead>
<tr>
<th>Describe the strategy to ensure that services provided meet a statewide need, including access from other substance abuse authorities</th>
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<table>
<thead>
<tr>
<th>Submit a comprehensive budget that identifies all projected revenue and expense for this program by email to: <a href="mailto:bkelsey@utah.gov">bkelsey@utah.gov</a></th>
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</thead>
</table>

<table>
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<tr>
<th>Please demonstrate out of county utilization of the Women and Children’s Residential Programs in your local area. Please provide the total number of women and children that you served from other catchment areas and which county they came from during the last fiscal year.</th>
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**14) Adolescent (Youth) Treatment**

Shanin Rapp
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<td>Form B - Actual FY21 Clients Serviced as Reported by Locals</td>
<td>0</td>
</tr>
</tbody>
</table>

**Describe services provided for adolescents and families. Please identify the ASAM levels of care available for youth.**

University of Utah Health Plans has contracted clinicians in the network to provide outpatient-level services to youth with substance use disorders. In Summit County, Huntsman Mental Health Institute – Park City offers limited standard outpatient services on site. Teen Substance Use Disorder (SUD) groups are scheduled to begin fall of 2022 at Huntsman Mental Health Institute – Park City, which will provide Teen Moral Reconciliation Therapy (MRT) and other Substance Use Disorder (SUD) groups this year as the clinic develops. Teen group therapy is available through contracted clinicians, school-based services. Youth placement for treatment is determined by American Society of Addiction Medicine (ASAM) levels of care and screening and assessment through contracted network clinicians. For court mandated youth Substance Use Disorder (SUD) assessment and urine drug testing, Huntsman Mental Health Institute – Park City supports assessments and provides or refers treatment into the HUB Network. The Substance Abuse Subtle Screening Inventory (SASSI), University of Rhode Island Change Assessment (URICA), Youth Outcomes Questionnaire (for parent and child) and Adverse Childhood Experience (ACE) assessments are used to measure treatment needs. Clinicians use an assessment that evaluates co-occurring mental health and substance use disorders. Treatment is provided based on individual and developmentally appropriate needs. Families are encouraged to participate in treatment. All clinicians are Master level clinicians and receive training in mental health and substance use disorder treatment. In addition, clinicians have opportunities throughout the year for additional training. Staff complete required Continuing Education Units (CEUs) for their licensure. Clinicians have been trained in Seeking Safety, an evidence-based treatment for substance use and Post-traumatic Stress Disorder (PTSD). Staff have also been involved in ongoing training on trauma-informed care. Clinicians have weekly individual supervision and staffing. Co-occurring assessments and treatment are standard. Clinicians are trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and trauma-informed care. Patients may participate in mental health therapy groups and can be referred for med management. Patients are referred and assessed for developmental delays. Recovery support services, through case managers, have been implemented in youth substance abuse, with a significant focus on outreach to both engage clients in treatment and retain them once they are in. Clinicians are trained in motivational interviewing to engage clients. Motivational incentives are used to retain clients. Outreach is used to contact clients who have disengaged. Adolescent clients are involved in developing their treatment plans. Youth are referred for day treatment and residential programs to contracted clinicians like Odyssey House, Huntsman Mental Health Institute, TeenScope and various other programs. Program evaluation is done quarterly using Treatment Episode Data Sets (TEDS) collected at admission vs discharge. Point-in-time evaluations are completed annually via the MHSIP.

Huntsman Mental Health Institute – Park City program is currently working with the University of Utah’s
Social Research Institute for a need’s assessment/program evaluation of youth/adolescent and young adult Substance Use Disorder (SUD) treatment in Summit County. Serious Reported Incidents (SRIs) are assisting with identification of and measurement of outcomes including parent/youth satisfaction and parental attitudes/beliefs. The Serious Reported Incident (SRI) helps in identifying services gaps and to focus on improvement.

Describe efforts to engage, educate, screen, recruit, and refer youth. Identify gaps in the youth treatment referral system within your community and how you plan to address the gaps.

HUB Network clinician search, University Redstone Health Center, youth mental health clinicians, juvenile probation and court, school-based programs, and parents/other family members provide primary referrals for youth Substance Use Disorder (SUD) treatment needs in the county. Youth are referred for assessment to clinicians in the HUB Network and recommendations are made for treatment. Clinicians work with community partners and contracted resources to meet the needs of youth in the county. The Huntsman Mental Health Institute – Park City works with the Children’s Justice Center (CJC) and juvenile probation officers, school-based clinicians and clinicians to identify youth at risk with substances but do not have any related legal charges. When youth are identified, contracted clinicians work together to initiate services and encourage treatment. Case managers and Peer Support specialists (PSSs) provide outreach to families to discuss concerns and offer an evaluation.

Describe collaborative efforts with mental health services and other state child serving agencies (DCFS, DJJS, SOC, DSPD, Juvenile Court) and any significant programmatic changes from the previous year.

As part of the assessment process children are evaluated and treated. Services can be provided on-site with specific HUB Network clinicians who see children/youth and adolescents in school-based settings. These clinicians work closely with the Utah Division of Child and Family Services (DCFS), the Juvenile Court, and community partners like Peace House to support children at risk and their mothers. Clinicians in the network collaborate with the Children’s Justice Center (CJC) to support youth and families. Clinicians participate in the System of Care model which identifies and provides services to dysfunctional family systems and seeks to meet needs by connecting and coordinating family involvement with several community and network supports with the goal of rehabilitation.

HUB Network clinicians who focus on youth and women prioritize care for families. Families involved with the Utah Division of Child and Family Services (DCFS) may have children in state custody or are at risk of losing custody. For women in residential treatment and with other extenuating circumstances, contracted clinicians work with Utah Division of Child and Family Services (DCFS) caseworkers to support and facilitate visitation schedules. At the Huntsman Mental Health Institute – Park City, clinical management stays connected to the Utah Division of Child and Family Services (DCFS) to develop relationships and communication about families in services and in addition works closely with treatment courts to facilitate case information and services for women and children in this process.

Significant coordination occurs between program staff and the juvenile court including weekly staffing meetings (with the appropriate releases of information in place). If clients are involved with the Utah Division of Child and Family Services (DCFS), frequent coordination also occurs between the appropriate parties, which may include the biological family, the foster family, the caseworker, and the guardian ad litem.

Justify any expected increase or decrease in funding and/or any expected increase or decrease...
15) Drug Court

<table>
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<tr>
<th>Form B - FY23 Amount Budgeted: Felony</th>
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<tr>
<td>Form B - FY23 Amount Budgeted: Juvenile</td>
<td>Form B - FY22 Amount Budgeted: Juvenile</td>
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<tr>
<td>Form B - FY23 Recovery Support Budgeted</td>
<td>Form B - FY22 Recovery Support Budgeted</td>
<td>$60,000</td>
<td></td>
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</table>

Describe the Drug Court eligibility criteria for each type of specialty court (Adult, Family, Juvenile Drug Courts, etc). Please provide an estimate of how many individuals will be served in each certified drug court in your area.

Summit County provides the 3rd District Adult Felony Drug Court that serves about 20-30 people at any given time. Participants are screened for eligibility by court order, using the Risk and Needs Triage (RANT) Assessment. Once the Risk and Needs Triage (RANT) Assessment determines the risk level and qualification for Drug Court, a clinical assessment follows to determine and diagnose a substance use disorder. High Need/High Risk individuals with a substance use diagnosis qualify for Drug Court as long as they are also aligned with the following eligibility requirements. Violent offenders are screened out.

**Adult Drug Court Eligibility Criteria:**

1. Participants must reside in Summit County and must be a legal resident of the United States (unless exempted by the Transfer Policy #10). Additionally, with approval of the Behavioral Health Division and presiding Judge, participants who begin Drug Court in Summit County, but have to relocate to Wasatch County due to the cost of housing, are allowed to remain within the program.

2. Participants must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-V) diagnosis of current drug dependence as determined by a clinical assessment.

3. Participants must demonstrate high risk/high needs as determined by a standardized Risk and Needs Triage (RANT) Assessment completed prior to admission into the program.

4. Participants must have a felony charge and must plead to a felony or must be on felony probation. The County Attorney's Office will make the determination of whether the defendant receives a "plea in abeyance" or "condition of probation" offer.
5. Participants will be assessed for treatment needs by the Summit County Contracted treatment provided through Huntsman Mental Health Institute – Park City, using a standardized assessment/test.

6. Participants cannot be currently on parole.

7. Participants must be willing and able to terminate use of lawfully prescribed controlled substances, prescriptions, and over-the-counter medications that affect the integrity and accuracy of drug screening.

8. The County Attorney, after reviewing the findings of the Huntsman Mental Health Institute – Park City treatment team, has final approval for inclusion or acceptance in the Drug Court program.

Describe Specialty Court treatment services. Identify the services you will provide directly or through a contracted provider for each type of court (Adult, Family, Juvenile Specialty Courts, DUI). How will you engage and assist individuals with Medicaid enrollment throughout their episode of care.

Summit County offers the 3rd District Adult Felony Drug Court. Services are designated to the Huntsman Mental Health Institute – Park City as the contracted treatment provider for the Drug Court. Services provided include;

- Screening and assessment,
- Individual therapy,
- Group Intensive Outpatient Therapy,
- Recovery Support Services through case management and Peer Support Specialists (PSS)
- Urine drug screening is located at Huntsman Mental Health Institute – Park City through the Averhealth forensic lab. Patients call the test line daily and tests are assigned randomly with a unique PIN ID. Results are provided the next day in most cases.
- Residential treatment programs and detoxification services are arranged through contracted clinicians (Volunteers of America, Huntsman Mental Health Institute, Odyssey House, First Step House, House of Hope, etc.) when indicated. Case managers and Huntsman Mental Health Institute – Park City staff work with University of Utah Health Plans to determine funding support and work with participants for eligibility and enrollment in Medicaid and state funds.

Describe the MAT services available to Specialty Court participants. Please describe policies or procedures regarding use of MAT while in specialty court or for the completion of specialty court. Will services be provided directly or by a contracted provider (list contracted providers).

Medically Assisted Treatment (MAT) is available to Drug Court participants along with prescriptions and
treatment through Huntsman Mental Health Institute – Park City, the contracted Drug Court agency. The Huntsman Mental Health Institute – Park City has a medical staff including a psychiatrist and Advanced Practice Registered Nurse (APRN) who prescribe medications directly. Funding is also available to assist in purchasing needed medications. Medications are not distributed at the Huntsman Mental Health Institute – Park City, but medications are monitored and assessed on site. All specialty court clients are able to participate in all forms of FDA approved Medically Assisted Treatment (MAT) medications, except methadone is provided through Project Reality if needed. Urine drug screening occurs onsite through the Averhealth forensic lab and results are returned the next day in most cases. The Medically Assisted Treatment (MAT) protocol requires patients to be in treatment with Medically Assisted Treatment (MAT) medications and are given specific information regarding policies when services begin.

Describe your drug testing services for each type of court including testing on weekends and holidays for each court. Identify whether these services will be provided directly or through a contracted provider. (Adult, Family, Juvenile Specialty Courts, etc).

Urine Drug Screening is done in accordance with Office of Substance Use and Mental Health directives. University of Utah Health Plans uses contracted clinicians at Huntsman Mental Health Institute – Park City’s onsite Averhealth forensic lab for urine drug screening. A random schedule for testing is created weekly through Aver health and monitored closely by staff.

List all drug court fees assessed to the client in addition to treatment sliding scale fees for each type of court (Adult, Family, Juvenile Specialty Courts, etc).

Drug Court patients pay fees based on ability and payment plan eligibility. Drug Court members use DHS funds or Medicaid for all clinical services, including UA tests.

Describe any significant programmatic changes from the previous year (Adult, Family, Juvenile Specialty Courts, etc).

N/A

<table>
<thead>
<tr>
<th>16) Justice Services</th>
<th>Thomas Dunford</th>
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</thead>
<tbody>
<tr>
<td>Form B - FY23 Amount</td>
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Describe screening to identify criminal risk factors.

The Risk and Needs Triage (RANT) Assessment tool is evidence-based and yields an immediate and easily understandable report that classifies offenders into one of four risk/needs quadrants, each with different implications for selecting suitable correctional decisions by judges, probation and parole officers, attorneys, and other decision-makers. The Risk and Needs Triage (RANT) Assessment is administered by Huntsman Mental Health Institute – Park City case managers by order of the court. The 19-item instrument is completed in less than fifteen minutes and reports enable real-time placement. This assessment tool is used most often to identify prospective Summit County Drug Court Participant’s (high risk / high need). According to the Risk and Needs Triage (RANT) Assessment, individuals who score high risk/high need are best suited for intensive supervision and clinical services. Those scoring low risk/high need may be best suited for a lower level of criminal justice supervision, but more intensive clinical services. A high risk/low need score may require more intensive supervision and less intensive clinical services. A low risk/low need score may be best suited to a less intensive supervision, less intensive clinical prevention-based intervention. Risk and Needs Triage (RANT) Assessment risk/need domains measured include: Age of onset of criminal activity and substance use, deviant peer
Identify the continuum of services for individuals involved in the justice system. Identify strategies used with low risk offenders. Identify strategies used with high risk offenders.

University of Utah Health Plans contracts with Huntsman Mental Health Institute – Park City and the Summit County District court to administer the Risk and Needs Triage (RANT) Assessment screening instrument to coordinate other information from law enforcement or jail services. The Substance Abuse Subtle Screening Inventories (SASSI) and University of Rhode Island Change Assessment (URICA) are also utilized for substance use disorders screening prior to intake appointments. Services include case management, skills development, individual, family and group therapy, and psychiatric evaluation and medication management. Treatment modalities include:

- Moral Reconation Therapy (MRT)
- Cognitive Behavioral Therapy (CBT)
- Motivational Interviewing
- Seeking Safety
- Medically Assisted Treatment (MAT)

Patients seeking services complete clinical assessment incorporating the assessment requirements from Rule and treatment planning pertaining to Criminal risk factors such as Moral Reconation Therapy (MRT) and other evidenced-based manuals and literature that address criminal risk, substance use and mental illness. Patients are also evaluated using the Columbia Suicide Severity Rating Scale (CSSR-S) and Stanley Brown Safety Plan for suicide risk assessment and safety planning.

Recovery support services, Peer Support Specialists (PSSs) and case managers, aim to reduce criminal risk factors and recidivism through supporting clients in meaningful recovery engagement. Recovery support services are provided to help clients remove barriers to their recovery by connecting them with individually engaging recovery activities, vocational support, stable housing search, and accessing possible assistance programs. Recovery support services also focus on keeping clients engaged in recovery through outreach to clients deemed high risk and follow-up contact with clients who successfully complete treatment.

Identify a quality improvement goal to better serve individuals involved in the criminal justice system. Your goal may be based on the recommendations provided by the University of Utah Criminal Justice Center in SFY 2020.

Currently Huntsman Mental Health Institute – Park City and University of Utah Health Plans is working with the Utah Criminal Justice Center to evaluate Justice Reinvestment Initiative (JRI) services. The evaluation supports quality improvement goals. Goals will be set and the evaluation completed by Summer 2022. Improvements will be focused on direct services, fidelity to evidence-based programs, training, staffing and programming.

Identify coalitions, planning groups or councils (or other efforts) at the county level working to improve coordination and outcomes for adults involved in the justice system.
In addition to the community Justice Reinvestment Initiative Committee, the Summit County Mental Wellness Alliance and Summit County Behavioral Health Division host a community Law Enforcement and Judicial Affairs Coalition comprised of key stakeholders representing the Behavioral Health Division, Public Defenders, County Attorney’s Office, Summit County Sheriff’s Department, Park City Police Department, Summit County Council, Park City Council, Summit County Recovery Foundation, Huntsman Mental Health Institute – Park City, and University of Utah Health Plans.

Identify efforts as a community stakeholder for children and youth involved with the juvenile justice system, local DCFS, DJJS, Juvenile Courts, and other agencies.

Huntsman Mental Health Institute – Park City coordinates with the Summit County Children’s Justice Center multidisciplinary team weekly to provide crisis services, assessments, individual and group therapy. The multidisciplinary team consists of law enforcement, Children’s Justice Center staff, treatment staff from the Huntsman Mental Health Institute – Park City), contracted community clinicians, medical staff, Utah Division of Child and Family Services (DCFS) and The County Attorney’s Office.

Provide data and outcomes used to evaluate Justice Services.

Mental Health Statistical Improvement Program (MHSIP) data, Treatment Episodes Data Sets (TEDs), arrests, successful completion of treatment and Risk and Needs Triage (RANT) Assessment are completed upon admission to determine eligibility for services. Outcome Questionnaire evaluations are used for ongoing assessment of clients.

17) Suicide Prevention, Intervention & Postvention (ONLY COMPLETE IF NOT COMPLETED ON FORM A)

Describe all current activities in place in suicide prevention, including evaluation of the activities and their effectiveness on a program and community level. Please include a link or attach your localized suicide prevention plan for the agency.

See Form A

Describe all currently suicide intervention/treatment services and activities including the use of evidence based tools and strategies. Describe your policies and procedures for suicide screening, risk assessment, and safety planning as well as suicide specific treatment and follow up/care transition services. Describe how clients are identified for suicide specific services. How is the effectiveness of the services measured?

See Form A

Describe all current strategies in place in suicide postvention including any grief supports. Please describe your current postvention response plan, or include a link or attach your localized suicide postvention plan for the agency and/or broader local community.

See Form A

Describe your plan for coordination with Local Health Departments and local school districts to identify roles and support implementation of a community postvention plan in alignment with
For Local Authorities participating in the Garrett Lee Smith State Youth Suicide Prevention and Early Intervention Grant Program summarize your implementation plans for implementing skill based programming, gatekeeper training, community or school based screening activities, and crisis follow up services after inpatient or emergency department visits. (note: this can be done in the box below, or by linking/attaching your most current report).

For those not participating in this grant program, please indicate “N/A” in the box below.

For Local Authorities participating in the Comprehensive Suicide Prevention grants describe your implementation plans for primary prevention programs, suicide intervention supports including gatekeeper training, and community postvention planning. (note: this can be done in the box below, or by linking/attaching your most current report).

If any of the following project deliverables are currently available, please link them here or attach them to your submission.

1. By year 2, funding recipients shall submit a written comprehensive suicide prevention plan that is in alignment with the Utah Suicide Prevention State Plan and by year 2, funding recipients shall submit a written postvention response plan and communication protocol for their organization.

2. By year 3 funding recipients shall submit a written community postvention response plan.

For those not participating in this project, please indicate, “N/A” below.

For Local Authorities receiving mini grant funding for the Live On Utah statewide suicide prevention campaign, summarize your implementation and sustainability plans for the implementation of culturally appropriate suicide prevention messaging in your area.

For those not participating in this project, please indicate, “N/A” below.