

Tooele County

FORM A - MENTAL HEALTH BUDGET NARRATIVE

3 Year Plan (FY 2024-2026)

Local Authority: Tooele County

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!**

1) Inpatient Services

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Inpatient mental health services for adults are provided through contractual agreements with Huntsman Mental Health Institute (HMHI), University of Utah Inpatient Medical Psychiatry, St. Mark's Hospital, [Salt Lake Behavioral](#) in Salt Lake City, and Jordan Valley West in West Valley City. Additionally, we can engage in Single Case Agreements with non-participating facilities [throughout the state](#).

Each hospitalization request is reviewed by the Optum Tooele County Care Advocacy team for prior authorization to determine medical necessity, both initially and throughout the hospitalization.

Optum Tooele County continues to pursue opportunities for expanding inpatient services within the network. Discussions are currently underway.

Describe your efforts to support the transition from this level of care back to the community.

Optum Tooele County works with the hospitals and Utah State Hospital (USH) to transition clients from an inpatient stay to a least restrictive environment. All cases are clinically staffed with the current provider during hospitalization to coordinate transition into services as well as follow the clients after hospitalization to provide additional wrap-around support. Optum coordinates with the hospital and the provider to support the use of wrap-around services to ensure that the individuals are served in the least restrictive environment. Optum utilizes the American Association of Community Psychiatrists Level of Care Utilization System (LOCUS) to determine appropriate level of care. More intense levels of care are not recommended until we have ensured that lower levels of care are unsuccessful or not feasible or applicable.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum Tooele County contracts with HMHI for inpatient services for children/youth and Salt Lake Behavioral Health for adolescents. We will engage in Single Case Agreements as appropriate with non-participating facilities throughout the state.

Each hospitalization request is reviewed by the Optum Tooele County Care Advocacy team for prior authorization to determine medical necessity, both initially and throughout the hospitalization.

Optum Tooele County continues to pursue opportunities for expanding inpatient services within the network.

Describe your efforts to support the transition from this level of care back to the community.

Optum Tooele County works with the hospitals and USH to transition clients from an inpatient stay to a least restrictive environment. All cases are clinically staffed with the current provider during hospitalization to coordinate transition into services as well as follow the clients after hospitalization to provide additional wrap-around support. Optum coordinates with the hospital and the provider to support the use of wrap-around services to ensure that the individuals are served in the least restrictive environment. Optum utilizes the American Academy of Child and Adolescent Psychiatry Child and Adolescent Service Intensity Instrument (CASII)/ the American Association of Community Psychiatrists Child and Adolescent Level of Care Utilization System (CALOCUS) to determine appropriate level of care. More intense levels of care are not recommended until we have ensured that lower levels of care are unsuccessful or not feasible or applicable.

2) Residential Care

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Adult residential services include the Valley Behavioral Health Co-Occurring Residential and Empowerment (CORE) program, the Odyssey House Mental Health Women's program as well as Odyssey House Mental Health Men's program. As with inpatient care, Optum will engage in Single Case Agreements as appropriate.

How is access to this level of care determined? How is the effectiveness and accessibility of residential care evaluated?

Optum Tooele County utilizes the LOCUS to determine clinical appropriateness for residential level of care.

Effectiveness is evaluated during concurrent clinical reviews (i.e., utilization management or UM) and audits to ensure members are making progress in treatment, discharge planning is ongoing, and whether there are quality of care issues. During the UM process, the most recent treatment plan review along with at least the required encounter note tied to the treatment plan review are scrutinized to ensure that if there are concerns, these are addressed immediately. During the audit process, all areas of the randomly chosen files to be audited are reviewed. Additionally, each client's file to be audited is reviewed to ensure the inputted outcomes meet what is reflected in the file. As part of the audit, if the provider is not meeting the standard for any given outcome measured in the Substance Abuse and Mental Health Information System (SAMHIS), this is included as a finding.

Odyssey House added a 16-bed residential facility for mentally ill adult male clients who also have substance use disorder (SUD) treatment needs and are involved in criminal justice services. Treatment

focuses on behavioral health issues and criminogenic risk factors.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. Please identify your current residential contracts. Please identify any significant service gaps related to residential services for youth you may be experiencing.

Residential services for children and youth are provided via Single Case Agreements with residential facilities available throughout the state.

For FY23 Optum has the Aspire residential program for adolescent females with Wasatch Behavioral Health and has added [New Beginnings Behavioral Health](#). Optum is continuously seeking opportunities to add providers of these services to the network. [With an overall reduction in MH Residential Treatment for youth, it is difficult to acquire these services across the board. We have worked with COPA Health \(see below\) to address this gap. We continue to see a gap in services for youth with an eating disorder. We have been successful in doing one Single Case Agreement with Center for Change and hope to continue to develop a partnering relationship with them in the future.](#)

[Optum is working with COPA Health to finalize the addition of an adolescent residential treatment facility in Magna for both male and females \(16 beds total\).](#)

How is access to this level of care determined? Please describe your efforts to support the transition from this level of care back to the community.

Optum Tooele County utilizes the CASII to determine clinical appropriateness for this level of care. Through concurrent reviews for ongoing care, Optum Care Advocates evaluate agency discharge planning to ensure the youth's natural supports are included and access to follow-up care is coordinated. The goal is to help children and youth transition back home and into their community. Access to needed clinical services (i.e., day treatment, intensive outpatient, medication management services, respite care, Family Peer Support Services (FPSS) referral, school-based supports) is also coordinated. Each discharge plan is expected to be individualized. The Optum Clinical Team is available to staff cases with providers and offer assistance throughout the discharging planning process, while the plan is based on needs identified by the treatment providers. The Recovery & Resiliency Team can offer support to parents dealing with challenges of caring for a child with behavioral health needs and can link parents to community supports like the Utah Parent Association and National Alliance on Mental Illness (NAMI).

3) Outpatient Care

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Define the process for referring an individual to a subcontractor for services. Include any planned changes in programming or funding.

Optum Tooele County contracts with various providers throughout Tooele County, and nearby Salt Lake County for outpatient services. This gives Tooele County PMHP members increased options in selecting providers, depending upon treatment needs and location.

Services for individuals who are Spanish speaking are provided by the Multicultural Counseling Center (MCC) and [Latino Behavioral Health \(LBH\)](#). MCC and LBH provide focused and culturally appropriate treatment to serve the Spanish speaking population located in the county.

Medication management services are offered by multiple providers throughout the county including in outpatient clinics, and via telehealth. Additionally, Optum has supported providers in incorporating an intensive case management model as members step down from higher levels of care.

All Optum contracted providers currently have the capability to provide Telehealth services to our members. Even beyond the pandemic emergency period, Tooele County providers will continue offering this service as needed.

Optum continues to work with local providers to come into the network. Optum is working on applications for PATH. They will bring both outpatient and IOP services along with medication management. In FY 23, Optum [added Tooele Valley Counseling, Precipice, Rubicon Counseling, Whole Kids and Dynamic Psychiatry](#).

Describe the approach to serving individuals with complex behavioral health presentations or who need multiple supports to remain in the community, including the programmatic approach to serving individuals in the least restrictive level of care. Identify your proposed fidelity monitoring and outcome measures.

Valley Behavioral Health (VBH) serves the majority of high acuity members. These members are tracked and staffed by the Intensive Clinical Oversight Committee (ICOC) [and in the biweekly clinical subcommittee with Optum](#). Wrap around services are provided to high acuity clients. If the clients need a higher level of care, appropriate referrals are made. Optum Tooele County providers utilize the OQ[®] and LOCUS.

VBH also has the Assertive Outreach Treatment program (AOT) which is aimed at helping individuals with high complex needs stay engaged in treatment.

[For members who have physical health issues that potentially complicate their behavioral health, Optum has well established relationships with the medical ACOs. The Optum liaison and care advocates facilitate coordination with the ACOs regarding treatment resources, medical case management, and consultation.](#)

Describe the programmatic approach for serving individuals in the least restrictive level of care who are civilly committed or court-ordered to Assisted Outpatient Treatment. Include the process to track the individuals, including progress in treatment.

There will be discussions with the Tooele County Department of Human Services and the Third District Court to evaluate the feasibility of engaging a court ordered AOP and/or a Mental Health Court in Tooele County. Those who are civilly committed, on Medicaid or not, are tracked at Optum to support their treatment needs while on civil commitment and/or AOP. [When required the providers give updates to the court.](#)

Children's Services

Leah Colburn

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. Define the process for referring an individual to a subcontractor for services. Include any planned changes in programming or funding. *Please highlight approaches to engage family systems.*

Optum Tooele County contracts with various providers throughout Tooele County, and nearby Salt Lake County for outpatient services. This gives Tooele County PMHP members increased options in selecting providers, depending upon treatment needs and location. To engage family systems, in-home providers are available in the network, as well as wrap-around family engagement for diverse populations and school-based services.

MCC will have a full year of integrating treatment within Tooele School District. Optum Tooele County continues to look at additional day treatment options for youth in Salt Lake and will consider if volume supports a possible program within Tooele County. *In FY23, Optum added Tooele Valley Counseling, Precipice, Rubicon Counseling, Whole Kids and Dynamic Psychiatry.*

Describe the approach to serving individuals with complex behavioral health presentations or who need multiple supports to remain in the community, including the programmatic approach to serving individuals in the least restrictive level of care. Identify your proposed fidelity monitoring and outcome measures.

Transportation is available for Tooele County youth to access day treatment programs in Salt Lake County.

Optum Tooele County has several providers who offer in-home services with the goal of keeping the youth with their family.

Optum also coordinates with carved out Medicaid services that are more intensive to meet the needs of high-acuity youth and their families.

Optum participates in the High-Fidelity Wraparound staffings with multiple systems to identify community-based treatment to support their complex needs.

See Section #16 for information regarding fidelity monitoring and outcome measures.

4) 24-Hour Crisis Care

Adult Services

Nichole Cunha

Please outline plans for the next three years for access to crisis services during daytime work hours, afterhours, weekends and holidays. Describe how crisis services are utilized as a diversion from higher levels of care (inpatient, residential, etc.) and the criminal justice system. Identify what crisis services are currently provided in your area, where services are provided, and what gaps need to still be addressed to offer a full continuum of care *to include access to a crisis line, mobile crisis outreach teams, and facility-based stabilization/receiving centers.* Identify plans for meeting any statutory or administrative rule governing crisis services. For each service, identify whether you will provide services directly or through a contracted provider. Describe how you coordinate with state and local partners for services to include the Utah Crisis Line, JJS and other DHHS systems of care, law enforcement and first responders, for the provision of *crisis* services. Include any planned changes in programming or funding.

Optum contracts with Valley Behavioral Health to provide to fidelity Mobile Crisis Outreach Team (MCOT) crisis services in Tooele County. VBH provides crisis response services in Tooele County seven days a week, 24 hours per day, and 365 days a year. Crisis services are accessed through 988, the state crisis line and secondarily to residents through the Tooele County Dispatch. Crisis workers are available to respond as needed by phone and in person to local Law enforcement and Medical requests to any Tooele County resident and in person to the Tooele County Detention facility. To support the crisis response efforts the VBH Crisis Subcommittee has been in operation for over 5 years with all areas of crisis being covered. It consists of a strong collaboration with many community representatives, including but not limited to, the Police Department, Dispatch, Tooele County School District, Tooele County Sheriff, Tooele City, Mountain West Medical ER. Additionally, VBH, Optum and Tooele County participate in the Rural MCOT check-in, the quarterly Crisis Collaborative and the Monthly MCOT check-in with the state crisis line to support and coordinate the local crisis efforts. All MCOT team members are trained through CIT Utah, are certified as Mental Health Officers and Crisis Workers for Tooele County.

Optum supports and encourages member use of 988, the state Crisis Line, Warm Line, and the SAFE-UT app. These resources are available on the Optum Tooele County website.

MCOT responds to youth crises in the community. When a JJS involved youth is in crisis MCOT can respond and then use resources at the Tooele Youth Services for ongoing needs including High Fidelity Wraparound staffing to identify services.

Currently there is not a facility-based stabilization/receiving center in Tooele County. [There is a funded county council initiative to review the needs and feasibility of a receiving center for possible future implementation.](#)

Describe your current and planned evaluation procedures for crisis intervention services that objectively measure access and measurable outcomes for persons with both mental health and substance use disorders using data. Technical assistance with data specifications and key performance indicators are available if needed, please describe any areas for help that are required.

Valley Behavioral Health is contracted with Optum to provide crisis response and services.

VBH provides crisis response to Tooele County seven days a week, 24 hours per day, and 365 days a year to the fidelity MCOT model. Crisis services are accessed through the state crisis line and Tooele County Dispatch. Crisis workers are available to respond by phone and in person to any Tooele County resident and in person to the Tooele County Detention facility. The Crisis Subcommittee has been in operation for over 5 years now and consists of a strong collaboration with many community representatives, including but not limited to, the Police Department, Dispatch, Tooele County School District, Tooele County Sheriff, Tooele City, Mountain West Medical ER. This Committee is responsible for tracking data and outcomes related to the crisis response system in Tooele.

In an effort to be readily available and have ease of communication, there is also a Dispatch radio on site at the Tooele Main unit, as well as with each MCOT team. This tool is used for crises as a means to get better service to our community partners. Each call is evaluated for risk assessment using the CSSRS (Columbia Suicide Severity Rating Scale) for both mental health and substance abuse. Each client is assessed for safety and needed resources. This is in the effort to help stabilize in the community or determine if they are transported to the hospital for emergent care and referral. A follow-up is completed within 24 hrs. of crisis service. Clients are again given community resource information to reach out for help.

Monthly meetings are held with the local crisis committee (Optum, VBH, Department of Human Services, EMS, law enforcement) as well as Statewide Crisis Committee with HMHI MCOT staff and OSUMH program staff. Review of monthly data dashboard, local data collection and review of services are discussed. Both data clarification issues and performance improvement are reviewed that inform staffing needs, operational needs and expansion needs to meet the MCOT/crisis response for Tooele county.

Children's Services

Nichole Cunha

Please outline plans for the next three years for access to crisis services during daytime work hours, afterhours, weekends and holidays. Describe how crisis services are utilized as a diversion from higher levels of care (inpatient, residential, etc.) and the criminal justice system. Identify what crisis services are provided, where services are currently provided in your area, where services are provided, and what gaps need to still be addressed to offer a full continuum of care (including access to a Crisis Line, Mobile Crisis Outreach Teams, facility-based stabilization/receiving centers and In-Home Stabilization Services). Including if you provide SMR/Youth MCOT and Stabilization services, if you are not an SMR/Youth MCOT and Stabilization provider, how do you plan to coordinate with SMR providers in your region? For each service, identify whether you will provide services directly or through a contracted provider. Describe how you coordinate with state and local partners for services to include the Utah Crisis Line, JJYS and other DHHS systems of care, law enforcement and first responders, schools, and hospitals for the provision of crisis services to at-risk youth, children, and their families. Include any planned changes in programming or funding.

VBH provides to fidelity MCOT 24-hour crisis response for the families and youth residents of Tooele County seven days a week and 365 days a year. MCOT services are accessed through 988, the state crisis line and secondarily to residents through the Tooele County Dispatch. When the state crisis line is accessed, the crisis can be resolved on the phone without needing to deploy MCOT diverting from higher levels of care. When MCOT is deployed locally, efforts are focused on diverting from higher levels of care and utilizing local treatment resources for follow-up.

There is a Juvenile Receiving Center at the Tooele Youth Services that can accept crisis youth with criminal justice involvement. Youth services can also work with high-risk youth and be a resource of support for those involved in multiple systems. MCOT does respond to children/youth homes and the main effort will be to stabilize in the moment. If a higher level of care is not needed the youth's family will be given local treatment resources for follow-up which includes providers who offer in-home services.

Currently Stabilization and Mobile Response (SMR) is not provided in the Tooele County crisis services. MCOT responds to youth crises in all areas of the county including schools. The Tooele County Department of Human Services will evaluate the needs for SMR and coordinate with SMR providers in the region as needed.

Crisis services are available at VBH Tooele for spontaneous, unscheduled mental health services. These requests may range from phone calls for support or information, walk-in visits for evaluation, outreach assessments or emergency hospitalization.

Describe your current and planned evaluation procedures for children and youth crisis intervention services that objectively measure access and measurable outcomes for persons with both mental health and substance use disorders using data. Technical assistance with data specifications and key performance indicators are available if needed, please describe any areas for help that are required.

With the data on the MCOT dashboard; Optum, VBH and Tooele County Department of Human Services will collaborate on a plan to monitor this data and respond accordingly. Technical assistance will be pursued for the key performance indicators to guide the monitoring and response plans.

5) Psychotropic Medication Management

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. *Please list any specific procedures related to continuity of medication management during transitions between from or between providers/agencies/level of care settings.*

Psychotropic medication and medication management are direct services provided by Optum Tooele County provider network providers to accomplish the assessment, prescription, monitoring, adjustment, delivery, coordination, administration, and supervision of psychopharmacologic treatment. These services are provided by medication management professionals (APRN) in consultation and coordination with each client's personal treatment team.

When adults discharge from inpatient services, a follow-up medication management appointment is to be scheduled as part of the discharge plan. The discharge plan with the medication orders is sent to the receiving provider. When they shift from an outpatient prescriber to another, they are asked to sign a release of information so the current/historical medication information may be shared with the receiving prescriber. If a member needs assistance identifying prescribers in the network, Optum Care Advocates can assist with this process.

Medication Management Providers in the network include:

- Valley Behavioral Health
- Clinical Consultants
- Bonneville Family Practice
- Summit Community Counseling (via telehealth)
- Odyssey House
- Lotus Center
- [Dynamic Psychiatry](#)

The plan [through FY 26](#) is to add additional providers in the network who can provide medication management.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. *Please list any specific procedures related to continuity of medication management during transitions between providers/agencies/level of care settings.*

Psychotropic medication and pharmacological management are direct services provided by Optum Tooele County provider network providers to accomplish the assessment, prescription, monitoring, adjustment, delivery, coordination, administration, and supervision of psychopharmacologic treatment.

These services are provided by a medication management professional (APRN) in consultation and coordination with each client's personal treatment team.

When youth are discharged from inpatient services, a follow-up medication management appointment is to be scheduled as part of the discharge plan. The discharge plan with the medication orders is sent to the receiving provider. When a youth shifts from an outpatient prescriber to another, the guardian is asked to sign a release of information so the current/historical medication information may be shared with the receiving prescriber. If a member needs assistance identifying prescribers in the network, Optum Care Advocates can assist with this process.

Medication Management Providers for Children/Youth include:

- Valley Behavioral Health
- Clinical Consultants
- Bonneville Family Practice
- Summit Community Counseling (via telehealth)
- Odyssey House
- Lotus Center
- The Children's Center
- [Dynamic Psychiatry](#)

The plan [through FY26](#) is to add additional providers in the network who can provide medication management.

6) Psychoeducation Services & Psychosocial Rehabilitation

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

The adult psychosocial rehabilitation and psychoeducation (PES) services for Tooele County will continue as currently developed.

VBH New Reflection House (NRH) offers evidence-based PES services and is accredited by Clubhouse International. New Reflection House's objective is to help severely mentally ill individuals gain or recapture the ability to function in the community through meaningful work, relationships, and community employment. The Clubhouse Model incorporates several different work units, which are important in the maintenance of the clubhouse. These include clerical, career development and culinary units. Participation in these units give members an opportunity to develop skills that foster their recovery and ultimately reintegration into the community at large. The major focus of the program is a work ordered day, where members of the program develop both social and work-related skills. Another focus of NRH is their employment program. This includes transitional employment placements, supported employment and independent employment placement. These community located jobs help members gain the skills they will need to obtain permanent employment. The education unit has helped members obtain GEDs, high school diplomas, college education skills, and upgrading of life skills. New Reflection House continues to develop strong community ties and development employment opportunities for our members in Tooele County. New Reflection House has maintained a three-year accreditation from Clubhouse International for the past 17 years, the highest accreditation possible by the governing body of Clubhouse Model programs around the world.

The goals for the most recent strategic plan are:

1. Increase ADA (Average Daily attendance) by 10% by 12-31-23
 - a. Presentations to Community Partners- What is Clubhouse?
 - b. Re- engage members who have stopped coming (who, what, why)
 - c. Engage young adult population (through visibility and our young adult population input)
 - d. Engage the Veteran Population (this is being done with the support of the Advisory board and their connections)
2. Increase Clubhouse Visibility
 - a. Community fundraising events (6 this year)
 - b. Participate in Community Activities where the Valley and Clubhouse brands are visible.
3. Implement COS programing (Clubhouse Operating Systems)
 - a. Purchase COS program (done)
 - b. Ongoing training with staff and members to learn programming.
 - c. Increase member knowledge in Technology for tracking of all Clubhouse data and statistics.
 - d. Increase TE Opportunities in Technical Field by 1-2 (12-31-23)

Describe how clients are identified for Psychoeducation and Psychosocial Rehabilitation services. How is the effectiveness of the services measured?

VBH continues to use the Daily Living Activities (DLA) Functional Assessment. The DLA 20 is a functional assessment, proven to be reliable and valid, designed to assess what daily living areas are impacted by mental illness or disability. The assessment tool quickly identifies where outcomes are needed so clinicians can address those functional deficits on individualized service plans.

Effectiveness is measured through treatment goal progress and OQ[®] Measures. Effectiveness of services is measured by a regular review of the objectives developed for each client receiving the service and their progress on these objectives. Members must meet the criteria for 1915(b)(3) services, which includes SMI classification, to qualify for Psychoeducational services.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Psychosocial rehabilitation for children and youth will continue as a direct service to be provided through Optum network providers. The staff will employ group formats for skills training and development that will address basic living, communication, and interpersonal competencies as related to the predominant family, school, and social environments of children and youth.

When clinically appropriate, children are able to access higher levels of specialized care within Valley Behavioral Health's continuum of services. VBH provides transportation for children/youth with Medicaid to day treatment programs such as Kids Intensive Day Services (KIDS), DBT Day Treatment, AIM.

The Children's Center is an in-network option for children 6 and under.

Describe how clients are identified for Psychoeducation and Psychosocial Rehabilitation services. How is the effectiveness of the services measured?

Clients are identified for these services through a biopsychosocial assessment and services are prescribed by an independently licensed clinician. In addition, those receiving PES must also qualify based upon the SED/SMI criteria which is evaluated upon admission and annually.

Effectiveness of services is measured by a regular review of the objectives developed for each client receiving the service and their progress on these objectives. Members must meet the criteria for 1915(b)(3) services, which includes SED classification, to qualify for Psychoeducational services.

7) Case Management

Adult Services

Pete Caldwell

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Please include how you ensure each case management provider is certified to provide these services. Include any planned changes in programming or funding.

Case management services will continue with the primary goal of assisting clients and families to access community services and resources in an effort to help manage the functional complications of mental illness. All case management services are directly delivered through Optum network providers.

Primary case management activities will include assessment and documentation of the client's need for resources and services, development of a written case management service plan, linking clients with needed services and resources, coordinating the actual delivery of services, monitoring quality, appropriateness, and timeliness of the services delivered. In addition, case managers will monitor individual progress, and review and modify service plans and objectives as necessary.

The Representative Payee program at VBH and Guardian and Conservator Services (GCS) serves the most seriously mentally ill adult clients. The goal of the program is to teach clients the skills necessary to eventually manage their own funds. However, the degree to which clients can do this is very individualized. VBH strives to ensure that client funds are directed to safe, affordable housing, nutritious meals, and then to coordinate other needs as identified by the client and their supports.

[Optum has added providers with Certified Case Managers in Tooele County, including Multicultural Counseling, Bonneville Family Practice and Precipice.](#)

Please describe how eligibility is determined for case management services. How is the effectiveness of the services measured?

Each member receiving case management services would complete a Case Management Needs Assessment (CMNA) with their provider to identify areas of need.

Effectiveness is measured through specific case management goals and objectives, and improved scores on the CMNA.

Children's Services

Pete Caldwell

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Please include how you ensure each case management provider is certified to provide these services. Include any planned changes in programming or funding.

Family and individual supports such as skills development and behavior management services will continue to be provided to Severely Emotionally Disturbed (SED) children directly by Case Managers in the network. Case Managers provide follow-up, coordinate, assess, link and monitor the individual client progress. [Case managers are available through Valley Behavioral Health, Bonneville Family Practice, Precipice, and Multicultural Counseling.](#)

Please describe how eligibility is determined for case management services. How is the effectiveness of the service measured?

Each member receiving case management services would complete a CMNA with their provider to identify areas of need.

Effectiveness is measured through specific case management goals and objectives, and improved scores on the CMNA.

8) Community Supports (housing services)

Adult Services

Pete Caldwell

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

No adult respite is provided directly, or through contract providers, in Tooele County. In addition, there are limited housing options available in Tooele County. [Lighthouse Adult Care is available for outpatient, family support and they are located with Our House Assisted Living Center.](#) Also, it should be noted that the [Harris Village will have 66 units of supportive housing ready for occupancy by September, 2023](#)

VBH and Tooele Community Resource Center (TCRC) offer supported housing in a combination of scattered- and clustered-site services through membership in the Tooele Local Homeless Coordinating Committee (LHCC) and community partnerships in Tooele, as well as connection to resources in Salt Lake. Our partner, the Tooele County Housing Authority has secured funding to administer Shelter Plus Care vouchers for scattered site housing for homeless individuals who have severe and persistent mental health conditions and substance use disorders. Optum works with the Tooele County Housing Authority and network providers to assess individuals for eligibility for the Shelter Plus Care vouchers, coordinate services for eligible County residents and provide ongoing case management services.

Eligibility determination utilizes the Service Prioritization Decision Assistance Tool (SPDAT) to assess housing related needs and priority is determined through the LHCC's Coordinated Entry Committee to ensure that individuals with the highest needs are prioritized for housing resources. VBH has allocated one full time Case Manager in the Resource Center who is responsible for the oversight of the Shelter Plus Care voucher program, including regular site visits, as well as provision of street outreach in the community.

TCRC also offers clustered-site permanent supportive housing for seriously mentally ill adults in our Tooele County 135 East Vine St. housing facility, providing 5 apartments. Eligibility determination utilizes the SPDAT to assess housing related needs and priority is determined through the LHCC's Coordinated Entry Committee. Additional community housing partnerships that benefit residents of the County include connection to Rapid Rehousing funds through the TCRC Food Bank & Resource Center which utilize prioritization determination through the Coordinated Entry Committee. When there

is not sufficient availability of housing support for an individual in Tooele, Optum may also refer clients with severe and persistent mental health needs to the resources in Salt Lake County offered through VBH. The treatment team working with an individual prepares an application packet for VBH's Housing Committee regarding an individual's types and severity of needs, and the Housing Committee determines what level of supported housing is most likely to meet the individual's needs and works to connect an individual with such housing. VBH's housing in Salt Lake County includes several supportive transitional housing programs designed to help individuals gain the skills necessary to eventually live independently.

Indicate what assessment tools are used to determine criteria, level of care and outcomes for placement in treatment-based and/or supportive housing? [Technical assistance is available through Pete Caldwell: pgcaldwell@utah.gov](mailto:pgcaldwell@utah.gov)

A complete bio-psychosocial assessment is completed by a LMHT and used to determine if a member demonstrates a clinical need for receiving supportive housing. All individuals in these housing units have been identified as SMI and their level of ability to independently function is taken into account. Ongoing assessment is required to warrant ongoing supportive living placement. For USH patients, an Occupational Therapy evaluation is requested to assess activities of daily living skills.

Members receiving supportive living services are offered OQ[®] Questionnaires upon admission every 30 days and at discharge. Information gathered is expected to be incorporated into treatment planning and to make necessary changes including supportive living to promote recovery.

Children's Services (respite services)

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Please identify how this fits within your continuum of care. Include any planned changes in programming or funding.

VBH will continue to provide respite services providing 7-12 hours of out-of-home services per week to help alleviate stress in the family and thereby increase a parent's overall effectiveness. This program currently utilizes [five](#) respite providers. Referrals can be made by Optum Tooele County contracted providers.

Please describe how you determine eligibility for respite services. How is the effectiveness of the service measured?

Services are justified through ongoing strengths-based assessments and person-centered recovery plans with respite having specific objectives on the plan.

9) Peer Support Services

Adult Services

Heather Rydalch

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Peer Support is a face-to-face service provided by a Peer Support Specialist for the primary purpose of assisting in the rehabilitation and recovery of individuals with serious mental illness [and substance use disorders](#). Through coaching, mentoring, role modeling, as appropriate, using the peer support specialist's own recovery story and experience as a recovery tool, the client may be assisted with the

development and actualization of their own individual recovery goals.

Peer support aides in facilitation of educational groups, crisis outreach support, client support. Peers works closely in collaboration with case managers to help connect clients with support and resources.

Peer support referrals mainly come through clinicians who evaluate this level of support during the intake process. The referral goes through the case manager who then assigns the peer support services. Referrals also come from New Reflections who work closely with the clients through the Work Ordered Day. They will often request peer support for those members who are learning to work in a temp position or need additional support to decrease their isolation by having someone to contact. These services are provided by VBH and MCC.

Peer support also occurs in the form of victim peer support groups offered by Valley Victim Services. Additionally, Peer Support services are provided by Bonneville Family Practice, Latino Behavioral Health, Precipice Counseling, and Multicultural Counseling.

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

Referrals are made to the Optum Peer Support Specialists via providers, community stakeholders and internal Optum staff and committees. Optum educates our providers and expects them to identify when PSS services could be beneficial. If providers do not offer this service in-house, they refer the case to Optum. Peer services are expected to be prescribed in a Treatment Plan. Documentation should include a corresponding treatment goal, the services rendered, and clinical review of the member's progress toward that goal.

The effectiveness of services is measured through reporting by the CPSS offering services to members.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Describe how Family Peer Support Specialists will partner with other Department of Health & Human Services child serving agencies, including DCFS, DJJYS, DSPD, and HFW. Include any planned changes in programming or funding.

It is the goal of Optum Tooele County to continue to look for and develop providers who are able to support FPSS and to partner with whomever the state chooses to provide these services.

Optum is conducting a performance improvement project (PIP) addressing Family Peer Support in Tooele County. We are currently working to increase the number of youths, 17 years and younger, receiving family peer support services. Included in the interventions to meet this goal is the addition of two FPSS to Optum Tooele County Medicaid Network. These certified family peer support specialists will be added to the provider network and will be embedded into existing agencies serving youth and will receive supervision as required by the Utah Department of Health and Human Services.

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

Referrals are made to the Optum Family Support Specialist via providers, community stakeholders and internal Optum meetings. The effectiveness of services is measured through reports presented by the FPSS on the outcomes of the meetings with members.

10) Consultation & Education Services

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum has a Recovery and Resiliency (R&R) team that consists of family support specialists and peer support specialists (adult services). This team provides education and consultation to members, member run organizations, their contracted providers, community partners and stakeholders, and centers of learning. They also file grievances and complaints from members and submit them for resolution. Optum R&R actively meets with members where they receive services, promoting the recovery model and whole health. R&R works with the Optum Clinical Operations Team on all case staffings and utilization reviews. They also work with the Optum network of providers to encourage the hiring and utilization of peer counselors to work on multi-disciplinary teams to provide treatment.

Optum will continue to interact with Tooele County, applicable stakeholders and providers to identify consultation and education opportunities. This will either be provided by Optum directly or network providers.

The Tooele Human Services Advisory Council holds meetings monthly with Community partners to discuss concerns, needs, and problem solve issues related to provision of services to the Community.

Optum also meets with Stakeholders within the community to address specific issues such as homeless services through the LHCC.

The Criminal Justice Coordinating Council (CJCC) will begin meeting in FY24 and will include membership from Optum, local providers, stakeholders, criminal justice officials, peer support and others to support service/resource needs of the criminal justice involved population.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum will identify and seek opportunities for consultation, education, and training with community partners such as Tooele Children's Justice Center, Tooele County School District, the Tooele Chamber of Commerce, Tooele County Housing Authority, Kiwanis, Law Enforcement, Tooele Communities that Care, the Division of Child and Family Services (DCFS), the Division of Workforce Services, and Optum network providers.

Additionally, the Optum R & R team also works with the Optum network of providers to encourage the hiring and utilization of peer counselors to work on multi-disciplinary teams to provide treatment.

Optum has frequent opportunities to educate the public through all forms of media, community fairs, conferences, and other venues.

Optum has distributed and will continue to distribute social media and printed materials with local providers and youth associated facilities as part of the Medicaid PIP to educate about the available services for youth/adolescents to increase engagement. VBH through Jared Sanford, CEO, would like to explore with Tooele County and Optum the possibility of expanding Autism services. This will be discussed during this fiscal year.

In FY24 and beyond, Optum will conduct Certified Peer Support Specialist Refresher Trainings.

11) Services to Incarcerated Persons

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify where services are 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. Include any planned changes in programming or funding.

Optum contracts with providers to assess each member's social determinants of health, substance abuse and criminogenic risk factors.

VBH Tooele works with the clients that are in the jail. They do this by a computer system that the inmates have access to and request information and help, as well as crisis problems. Most are set up with a case manager to assist them with the paperwork for Medicaid or TAM upon release. Some of the paperwork is done while at the jail pending release into the different programs, as well as being set up for MAT treatment if needed. VBH Tooele has a case manager meeting in the jail every day of the week and on weekends if requested. EBP classes are held two times each week by a Certified Peer Support Specialist.

Describe how clients are identified for services while incarcerated. How is the effectiveness of the services measured?

Valley Behavioral Health is a contracted provider with Optum.

VBH assesses the individual's clinical social needs, substance abuse and public safety risks factors while addressing a plan for the treatment and services required to address the individual's needs, both in custody and upon reentry into the community. VBH is working in partnership with Sheriff's office, Jail Command Staff, Courts, and County Attorney's in a pretrial release services program (PTRS), to coordinate collaborative responses between the behavioral health team and criminal justice system that match the individual's levels of risk and behavioral health needs with the appropriate levels of supervision and treatment that can be tracked and monitored. These services include group therapy, drug testing, and individual therapy while being safely returned to the community while awaiting trial. It may be possible to also add Pre-Trial case management as a component to this effort. The Justice Courts are very interested in this option as well.

VBH's goal is to coordinate the transition plan to ensure; the implementation and avoid gaps in care with community-based services, to develop mechanisms to share information across different points in the criminal justice system to advance the individual's goals, to support adherence to treatment plans and supervision conditions through coordinated agencies i.e., Law Enforcement, Corrections, Adult Probation and Parole, and court services.

The Justice Reinvestment Initiative (JRI) funding is being used to provide additional services to incarcerated individuals who suffer with both MH and SUD. VBH has been contracted to use JRI funding and equally uses it within the mental health and substance use disorder budgets to provide a minimum of three EBP group sessions per week in the jail. The VBH JRI coordinator has been responsible for implementing the use of the Brief Mental Health for all inmates booked into the Tooele County Jail. This screening is administered by the booking nurse and provided for review to the VBH JRI team.

In addition, VBH will assign a case manager to meet with court ordered individuals classified as high risk high need to conduct discharge planning.

Lastly, clients will be engaged in outpatient services and the [Risk Assessment Needs Triage \(RANT\)](#) will be used at intake to determine level of care, criminogenic risk.

Describe the process used to engage clients who are transitioning out of incarceration.

Valley Behavioral Health is a contracted provider with Optum.

VBH is providing at least 2 hours of direct services not including crisis services 7 days per week. Case management services have been added to jail services as well as peer support, and individuals are being screened and tracked (RANT) to identify high risk high needs offenders to provide services and links to support.

Additionally, 4 groups per week are being provided to both SUD and MH court compelled inmates specifically related to readiness to change, discharge planning and community reintegration. Providing case management services to incarcerated individuals in areas of release planning, employment search, transportation, and life skills can assist them to re-entry to the community. By working with the courts and the client VBH is able to get members into services and give a fresh start upon release.

12) Outplacement

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period with outplacement funding, and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum provides one Clinical Care Advocate and a Housing Support Specialist who are assigned full-time as State Hospital Liaisons to work directly with the USH teams to proactively facilitate and coordinate plans for members coming out of the USH. They are assisted by the Optum State Hospital Committee and the Optum Clinical Team as needed.

Adult outplacement funds are available upon request and approval through the Tooele Department of Human Services. These funds are used to support and supplement treatment and other recovery needs that cannot be reimbursed under Medicaid. The services provided using outplacement are allocated to the identified provider or resource that meets the indicated need. There are no planned changes to this process at this point.

Children's Services

Leah Colburn

Describe the activities you propose to undertake over the three year period with outplacement funding, and identify where services are provided. For each service, identify whether you will

provide services directly or through a contracted provider. Include any planned changes in programming or funding.

The Children's Outplacement Program (COP) and funding are managed by OSUMH/Optum Tooele County in a cooperative manner. OSUMH/Optum staff sit on the Children's Continuity of Care committee. OSUMH/Optum recommends children for consideration of State COPs assistance and recommends an appropriate array of services. Approved treatment services will be provided through the OSUMH/Optum provider network.

The Optum representative meets with the Children's Outplacement Committee monthly at the Children's Continuity of Care meeting at the Utah State Hospital to present the requests for funding to get approval from the committee. Also, the Optum representative can ask for emergency outplacement funding approval from OSUMH for cases that cannot wait for the monthly committee approval..

The Tooele County Department of Human Services receives the approved Child Outplacement Fund (COF) requests to distribute the funds.

13) Unfunded Clients

Adult Services

Pam Bennett

Describe the activities you propose to undertake over the three year period and identify specific populations where services are and are not provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum Tooele County and the Tooele Department of Human Services will continue to assess distribution of unfunded dollars within the network depending upon member need. The Optum provider network will provide direct services to Tooele County members. This includes a full continuum of services, such as outpatient, IOP, day treatment, and residential levels of care as designated in the non-Medicaid allotment.

In FY23 Valley Behavioral Health, Clinical Consultants, [Bonneville Family Practice](#), [Bears Ears](#) and Multicultural Counseling Center were contracted to use specific non-Medicaid allocations to provide direct services for unfunded adults.

Case management and peer support services will be utilized to help members connect with community resources. Resources may include The Resource Center, Tooele Food Bank, the Domestic Violence Shelter, Division of Workforce Services, Tooele Housing Authority, and the Division of Child and Family Services.

Describe [agency](#) efforts to help unfunded adults become funded and address barriers to maintaining funding coverage.

Providers using non-Medicaid dollars are required to check Medicaid eligibility monthly to determine funding status. Providers are expected to assist members in applying for Medicaid prior to accessing non-Medicaid dollars. Additionally, they are expected to support the member as they go through the eligibility process.

Optum is working with community resources, such as Take Care Utah [and DWS](#) to support members to determine eligibility and apply for the appropriate benefits.

Describe the activities you propose to undertake over the three year period and identify specific populations where services are and are not provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Optum Tooele County and the Tooele Department of Human Services will continue to assess distribution of unfunded dollars within the network depending upon member need. The Optum provider network will provide direct services to Tooele County members. This includes a full continuum of services, such as outpatient, IOP, day treatment, and residential levels of care as designated in the non-Medicaid allotment.

In FY23 Valley Behavioral Health, Clinical Consultants, Bears Ears, and Multicultural Counseling Center were contracted to use specific non-Medicaid allocations to provide direct services for unfunded children/youth.

Describe agency efforts to help unfunded youth and families become funded and address barriers to maintaining funding coverage.

When a youth or family requires services, if they are unfunded, a case manager is assigned to work with them in acquiring funding. Providers using non-Medicaid dollars are required to check Medicaid eligibility monthly to determine funding status. Providers are expected to assist members in applying for Medicaid prior to accessing non-Medicaid dollars. Additionally, they are expected to support the member as they go through the eligibility process.

Optum is working with providers to identify unfunded individuals and help them obtain coverage as needed.

14) First Episode Psychosis (FEP) Services

Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.

Currently, there are no specific programs in the Optum Tooele County Medicaid network for these services, but Optum engages in Single Case Agreements as medical necessity indicates.

Describe how clients are identified for FEP services. How is the effectiveness of the services measured?

Clients are identified by treatment providers who have conducted assessments that indicate symptoms of psychosis not previously identified and could be chronic in nature.

Describe plans to ensure sustainability of FEP services. This includes: financial sustainability plans(e.g. billing and making changes to CMS to support billing) and sustainable practices to ensure fidelity to the CSC PREP treatment model. Describe process for tracking treatment outcomes. Technical assistance is available through Jessica Makin at jmakin@utah.gov

NA

15) Client Employment

Sharon Cook

Increasing evidence exists to support the claim that competitive, integrated and meaningful employment is an essential part of the recovery process and is a key factor in supporting mental wellness. In the following spaces, please describe your efforts to increase client employment in accordance with Employment First 62A-15-105.2. Include any planned changes in programming or funding.

Competitive, integrated and meaningful employment in the community (including both adults and transition-aged youth).

The Department of Workforce Services in Tooele County offers employment support services and education for adults and transition aged youth. All contracted providers can make referrals to DWS to support members in achieving employment goals. Also, the Tooele County Resource Center will receive SSBG funds to assist in the transition of clients needing work, employment assistance.

Additionally, New Reflections Club House with Valley Behavioral Health has employment support services for their members. New Reflections works with local employers for member employment opportunities while providing employment education to be hired and once employed supports the member to be successful and maintain employment. VBH case managers outside of New Reflections do support members in applying for jobs and getting access to supportive employment services at DWS.

Optum Tooele County will continue to work with the contracted providers and collaborate with county departments to support ongoing enhancement with employment services for the members' whole recovery.

The referral process for employment services and how clients who are referred to receive employment services are identified.

Providers will work with Workforce Services when support needs are identified.

Collaborative employment efforts involving other community partners.

VBH-Tooele provides peer support and case management that focuses on collaborative partnerships with local government agencies and businesses to gain as much access as possible for individuals requiring employment assistance. New Reflection house offers its own supported and Independent Employment programs to assist members to secure, sustain and subsequently, to better their employment. As a defining characteristic of Clubhouse Supported Employment; New Reflections maintains a relationship with the working member and the employer. Members and staff in partnership determine the type, frequency, and location of desired supports.

[The Tooele County Department of Human Services hosts a weekly re-entry fair for adults exiting incarceration to reintegrate back into the community including employment supports.](#)

Employment of people with lived experience as staff through the Local Authority or subcontractors.

Optum Tooele County employs three individuals who have lived experience. Referred to as the Recovery and Resiliency team, these staff members work directly with Medicaid members to support

their recovery process. Additionally, this team works collaboratively with community stakeholders to ensure the member's voice is present.

Evidence-Based Supported Employment.

NRH offers Supported and Independent Employment programs to assist members to secure, sustain and subsequently, to better their employment. As a defining characteristic of Clubhouse Supported

Employment, the Clubhouse maintains a relationship with the working member and the employer. Members and staff in partnership determine the type, frequency, and location of desired supports. New Reflection House has networking connections from previous temporary employment positions in the community to assist members to move on to supported and/or independent employment positions when they are ready. Clubhouse provides non-specific job training in Administrative, Culinary, Clerical and Custodial instruction through side-by-side Clubhouse work-ordered day experience. All of the members of NRH who are working independently continue to have available all Clubhouse support and opportunities including advocacy for entitlements, and assistance with housing, clinical, legal, financial and personal issues, as well as participation in evening and weekend programs. NRH continues to work with OSUMH for technical assistance related to the IPS project enhancing our programming. In addition, New Reflection staff and members have received on-site IPS training from OSUMH's IPS Statewide Trainer and Alliance House's IPS Trainer for Clubhouses.

16) Quality & Access Improvements

Identify process improvement activities over the next three years. Include any planned changes in programming or funding.

Please describe policies for improving cultural responsiveness across agency staff and in services, including "Eliminating Health Disparity Strategic Plan" goals with progress. Include efforts to document cultural background and linguistic preferences, incorporate cultural practice into treatment plans and service delivery, and the provision of services in preferred language (bilingual therapist or interpreter).

Please see Attachment 1 titled Valley TCo - Health Disparities Action Plan and update.

Service Capacity: Systemic approaches to increase access in programs for clients, workforce recruitment and retention, Medicaid and Non-Medicaid funded individuals, client flow through programming. Please describe how the end of the Public Health Emergency and subsequent unwinding is expected to impact the agency's services and funding.

Optum and Tooele County continue to collaborate on network expansion to meet the needs of the community. A variety of locations, provider types, levels of care, specific interventions and treatment for mental health and substance use disorders have grown based on data and information gathered from the following sources:

- Geo mapping
- Utilization management data review
- Timely access monitoring
- Secret shopper calls completed by Optum Network Department
- Tooele County Needs Assessment
- Optum Tooele County QAPI Committee

- Tooele Human Services Advisory Council
- Tooele Opioid Response Network
- Follow-up after hospitalization data review
- [Medicaid required PIP to increase youth engagement in treatment during 6-month measurement period](#)

In addition, providers are screened by the Optum Internal Network Advisory Group to ensure they are a match for Tooele County before credentialing begins. Expectations are outlined and Utah Medicaid registration is verified as well. Ongoing administrative and clinical training is offered throughout the year to support retention of current providers. Providers and community stakeholders participate in the Optum Tooele County QAPI Committee to provide input on community needs and efforts to increase and improve quality services.

[The service availability will not be impacted by the unwinding, other than providers will no longer be allowed to conduct therapy over the phone. Our Medicaid funding is expected to drop, since the dollars are paid per member. However, it is too early in the unwinding process to know the impact.](#)

Describe how mental health needs and specialized services for people in Nursing Facilities are being met in your area.

Educational programs are provided between various service providers and the Division of Aging Services. Referrals for nursing homes and assisted living services/training comes to various providers for response. If requested, Optum Tooele County will work with their facility administrators to develop MOU's and continue to provide behavioral health services on site and in the community.

Telehealth: How do you measure the quality of services provided by telehealth? Describe what programming telehealth is used in.

Optum providers offer mental health and substance use disorder treatment through telehealth and will continue to do so after the [unwinding](#). The services on the authorization for telehealth, mirror the in-person (in-clinic) services as pertinent. [Providers are expected to provide these services in compliance with HIPAA.](#) Optum has notified providers telephone only (Telephonic services) [were discontinued as of April 1, 2023.](#)

Telehealth services are included in treatment record reviews during [compliance and quality](#) monitoring visits of our providers. Optum MH providers are required to use the OQ[®] Measures tools which can be used to monitor the quality of care are a component of provider audits.

Describe how you are addressing maternal mental health in your community. Describe how you are addressing early childhood (0-5 years) mental health needs within your community. Describe how you are coordinating between maternal and early childhood mental health services. [Technical assistance is available through Codie Thurgood: \[cthurgood@utah.gov\]\(mailto:cthurgood@utah.gov\)](#)

Bears Ears Child and Family Therapy, Aspen Ridge Counseling and VBH provide maternal mental health services. Bears Ears has completed Perinatal Mood Disorders OSUMH training. Aspen Ridge provides specific play therapy for early childhood. VBH has an identified early childhood/maternal mental health therapist. [The Children's Center treats children as young as age two and will work with families to support achievement of developmental milestones at birth and beyond. They have a service titled Teleconsultation where other behavioral health providers can request consultation or attend webinars on Infant and Early Childhood topics at no cost to the providers.](#)

Describe how you are addressing services for transition-age youth (TAY) (age 16-25) in your

community. Describe how you are coordinating between child and adult serving programs to ensure continuity of care for TAY. Describe how you are incorporating meaningful feedback from TAY to improve services. **Technical assistance is available through Jessica Makin, jmakin@utah.gov, and Theo Schwartz, aschwartz@utah.gov**

When considering providers for our network, we prioritize those who work with TAY. The Department of Workforce Services has an employment program that assists TAY in finding jobs. Optum is in the process of adding Kevin Brown, who works specifically with this population, to the Tooele County Provider Network. The current expectations for the provider network is to make the appropriate referrals between youth and adult providers to best serve the TAY population with the ability to access services at multiple agencies if that best meets the treatment needs. We regularly meet with network providers to get feedback on needed service additions or to vet them to provide specific services to better incorporate needed services including those for TAY. Over the next three years Optum will continue to focus on identifying providers who work with this population.

Other Quality and Access Improvement [Projects](#) (not included above)

As outlined in the QAPIP submitted to DHHS Medicaid on February 1st, the following projects are underway.

1. PIP: Increase youth engagement in treatment services. Study indicator 1: Increase the percentage of eligible members 17 years or younger, who received at least one behavioral health service during the measurement period. Study indicator 2: Increase the percentage of eligible members 17 years or younger, who received at least one family peer support service during the measurement.
2. Performance Validation Measure Submission: 7- and 30-day measures for follow-up after hospitalization. Each spring, the rates will be analyzed, barriers to follow-up will be identified and strategies to address barriers will be identified and implemented.
3. Improve community tenure and reduce future inpatient lengths of stay for identified members.
4. Implement annual provider monitoring plan recommended by Optum and approved by Tooele County.
5. Increase provider practice of incorporating OQ[®] Measures into treatment planning and to increase the percentage of providers tracking timely access to care.

Ensure accuracy of online provider directory through quarterly review of 25% of the providers.

17) Integrated Care

Pete Caldwell

Describe your partnerships with local Health Departments, accountable care organizations (ACOs), federally qualified health centers (FQHCs) and other physical health providers.

Optum Tooele County partners with the Tooele County Health Department and Mountain West Medical Center when appropriate to help meet the physical needs of Tooele County residents. Members of these departments sit as members of the Tooele Advisory Council and assist with the discussion of physical and behavioral health needs. Optum Tooele County has added Bonneville Family Practice who provides integrated care for members including physical health, mental health, SUD, and MAT services. They will also be opening a methadone clinic in [FY24](#).

Describe your efforts to integrate care and ensure that children, youth and adults have **both**

their physical and behavioral health needs met, including training, screening and treatment and recovery support (see Office Directives Section E.viii). Identify what you see as 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).

Physical concerns of children, youth and adults are noted at initial intake assessment. Person centered recovery plans will be reviewed on an ongoing basis. Adjustments are made as client needs in all areas are dynamic which must be recognized throughout the treatment episode. Releases of information to primary care doctors, as well as any other behavioral health providers are encouraged to ensure that all treatment team members can coordinate the total care of all individuals.

Part of care coordination efforts of Optum include contact with the member's ACO to identify integrated care needs to support their treatment plan.

Optum Tooele County monitors network providers to ensure screening, treatment, and recovery support are provided.

All contracted vendors are required to have relationships with primary care systems. Primary care providers who are excellent partners are Booneville Family Practice and Odyssey House's Martindale Clinic.

The Optum treatment network is committed to addressing co-occurring disorders. For this reason, all SUD providers within the network meet the definition of dual diagnosis capable by ASAM standards. In addition, we contract with SUD providers (VBH and Odyssey House) to provide ASAM dual diagnosis enhanced services. VBH provides our largest service delivery for dual diagnosed individuals. They have multiple locations, serving individuals with co-occurring psychiatric and substance use related disorders. VBH provides treatment to these individuals at all levels of care, including having a residential facility for dual diagnosed adult males (CORE) and females (CORE 2). Odyssey House has a residential program for women who have co-occurring disorders and are justice involved and recently opened a men's dual diagnosis program.

The barriers to implementing integrated care with the network model is the limited number of integrated practices in the county to credential with, limited ability to credential with other integrated practices that are part of the ACO network and being able to provide resources for practices to become integrated. Bonneville Family Practice is an integrated practice in Tooele County that is already available to Tooele County Medicaid members and we also credential with integrated practices in surrounding counties to give more access options to work through the barriers. .

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.

Treatment plans are to include the multiple methods, clinical and non-clinical, which are used to help members achieve SMART objectives and member driven goals.

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

The Optum Tooele County team received training on Social Determinants of Health (SDOH) as part of our Cultural Responsiveness Plan. Additional training has been made available on the Culture of Poverty. Health and wellness are key components of SDOH and Culture of Poverty training.

Optum Care Advocates collaborate with the respective ACOs on a case-by-case basis when it is noted

that the consumer's medical needs, such as HIV, AIDS, Diabetes and Pregnancy, are a component of their mental illness and/or a part of their recovery. Each ACO has an identified person that is our contact point. The ACO then staffs the case and Optum will be contacted in return with their recommendation and/or plan to help address the medical status. Optum then coordinates with the treating mental health provider what the medical plan is and who to coordinate with for their collaborative care. In some cases, Optum has been able to proactively access health care services for consumers coming out of USH, so that medical support is available upon immediate return to the community. This process is fluid and responsive on an as needed basis in order to meet consumer needs.

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

Optum continues to educate providers on the mandate to diagnose and provide treatment for nicotine addiction as a healthcare issue. Screening for use and abuse with referrals to smoking cessation supports continues to be addressed at provider meetings and trainings for MH and SUD treatment providers. Clinicians are reminded of the health implications of smoking for our clients, the need to ask clients if they are interested in cessation services, and the need for proper documentation of these efforts. For members who do want to quit tobacco, CBT is used, and MI for those who have not committed yet to quitting. Due to the popularity of previously non-traditional ways to use nicotine, the providers are also being educated to ensure that any type of nicotine delivery system is addressed with the client. Optum Tooele County has also incorporated a review of nicotine-free environment initiatives during audits providing a forum for another conversation about the importance of offering cessation services to clients. The Optum Recovery & Resiliency Team has incorporated education about tobacco cessation in their CPSS trainings. Optum has offered Train the Trainer sessions for the Smoking Cessation module of the Dimensions system. This training will be offered again in [FY24 and beyond](#), as providers have already expressed interest in training more staff.

Describe your efforts to provide [mental health services](#) for individuals with co-occurring mental health and intellectual/developmental disabilities. [Please identify an agency liaison for OSUMH to contact for IDD/MH program work.](#)

Optum has identified providers who work with co-occurring diagnoses and will work with the ACOs when associated medical conditions are identified where physical therapy or occupational therapy may be needed. Optum keeps its ACO contact list updated.

Optum also works closely with the Pingree School for Autism. The Pingree school is part of the continuum of services for individuals that have Autism that need higher levels of care or support.

[Mark Schull LCSW with Optum is the IDD/MH liaison and is the contact for OSUMH.](#)

18) Mental Health Early Intervention (EIM) Funds

Please complete each section as it pertains to MHEI funding utilization.

School Based Behavioral Health: Describe the School-Based Behavioral Health activities or other OSUMH approved activity your agency proposes to undertake with MHEI funding over the three year period. [Please describe](#) how you intend to support family involvement in treatment. For each service, identify whether you will provide services directly or through a contracted provider. Please include: any partnerships related to [2019 HB373](#) funding and any telehealth

related services provided in school settings. Include any planned changes in programming or funding.

Please email Leah Colburn lacolburn@utah.gov a list of your FY24 school locations.

Optum continues to work with our provider network to diversify and increase onsite school-based services. The Optum provider network is family and community based and offers family therapy services and community-based wrap-around supports as part of treatment. In FY 22 MCC was partnered with the local school districts to offer school-based services for the Spanish speaking population.

Additionally, Bears Ears Child and Family Therapy, MCC and Aspen Ridge Counseling provide maternal mental health services. Bears Ears has completed Perinatal Mood Disorders OSUMH training. Aspen Ridge provides specific play therapy for early childhood. VBH has an identified early childhood/maternal mental health therapist.

Tooele County School District

The Tooele County School District has a mental health-based grant for students in need. Students are referred for [sessions with community providers using these grant funds](#) The district partners with various agencies. All are required to coordinate and work with Optum for Medicaid students. The district also has a provider assigned to each school for private therapy services to be provided within the school for those that have difficulty with transportation and/or time.

Additionally, mental health screening has been provided to all students in grades 1-12 in Tooele County School District. Screenings were offered at six different locations and virtually.

The SafeUT app is promoted in all schools, and HOPE squads are in all the secondary schools within the district.

The district partners with Valley Behavioral Health for crisis response, and with Juvenile Justice Services for students who require extended mental health supports.

Optum does not have agencies aligned with specific schools, rather Tooele School District has linked our in-network providers to specific and all schools in the district. The providers indicated for school-based services included for FY 23 are as follows ([Please see TCo_Form A_Attachment 2_Mental Health Providers listing 2022](#)):

- Aspen Ridge Counseling, LLC
- Bear's Ears Child and Family Therapy LLC
- Clinical Consultants, LLC
- Grantsville Child & Family Counseling Services
- MultiCultural Counseling Center
- Rubicon Counseling Services
- Sunset Counseling Services, LLC
- Tooele Valley Counseling
- Valley Behavioral Health
- Willow Springs Counseling, LLC

[As of the writing of this plan, the FY24 list of schools has not been completed by the Tooele County school district. The plan will be updated when available.](#)

Please describe how your agency plans to collect data including MHEI required data points and YOQ outcomes in your school programs. Identify who the MHEI Quarterly Reporting should be sent to, including their email.

The MHEI data points are gathered in partnership with the Tooele County School District. The MHEI quarterly reports should be sent to Mark Schull at mark.schull@optum.com. The providers the youth are connected with from school referrals use the YOQ[®] for outcome reporting and can be collected specifically for those in school programs. [Providers utilizing the EIM non-Medicaid fund for school-based services will complete the quarterly report.](#)

Family Peer Support: Describe the Family Peer Support activities your agency proposes to undertake with MHEI funding over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. For those not using MHEI funding for this service, please indicate “N/A” in the box below.

Family Peer Support Specialists (FPSSs) play a key role in developing a formalized, family driven and child-centered public mental health system in the State of Utah. They are trained facilitators who develop working partnerships with the Community Mental Health Center staff to represent the family voice at service delivery, administration, and policy levels.

At no charge to all families, FPSSs provide referrals to local resources and programs, advocacy for culturally appropriate services, links to information and support groups, and family wraparound facilitation. These services provide increased family involvement at all levels and improve outcomes for families and communities where they live.

[Valley Behavioral Health will have MHEI funding to provide FPSS as indicated in FY24.](#)

Mobile Crisis Team: Describe the *Mobile Crisis Team* activities your agency proposes to undertake with MHEI funding over the three year period and identify where services are provided. Include any planned changes in programming or funding. For those not using MHEI funding for this service, please indicate “N/A” in the box below.

N/A

19) Suicide Prevention, Intervention & Postvention

Carol Ruddell

Identify, define and describe all current strategies, programs and activities in place in suicide prevention, intervention and postvention. Strategies and programs should be evidence-based and align with the Utah State Suicide Prevention Plan. For intervention/treatment, 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? Include the evaluation of the activities and their effectiveness on a program and community level. If available, please attach the localized agency suicide prevention plan or link to plan.

Through the Recovery and Resiliency team, Optum provides both Mental Health First Aid (MHFA) and Question Persuade and Refer (QPR) trainings free of charge to any organization or community group interested in receiving the training. Both trainings follow a structured curriculum and include a feedback component available to all participants. The feedback information is used to improve future trainings.

Through the audit process, providers are monitored to ensure they comply with the requirements to assess for suicide risk and provide subsequent needed safety plans and clinical care. Contracted providers out of compliance are placed on a corrective action plan. When quality of care issues are identified which may have contributed to a completed suicide or a serious suicide attempt requiring overnight hospitalization for medical treatment, providers implement a corrective action plan to improve specific areas of treatment, risk assessment, treatment coordination and/or policies and procedures to help prevent future occurrences.

Optum hosted two trainings by the Department of Health and Human Services exploring how providers can help themselves and others heal after a loss, prevent additional suicide attempts and deaths, and keep our vision and energy for the difficult but rewarding work we are engaged in. First, presenters explored the impact and ripple effect a suicide can have, and how it can lead to “complicated grief” in affected persons. Practical suggestions, self-care strategies, suicide prevention information, and discussion were given with the goal of promoting healing for all affected and sustaining hope in this work.

Identify at least one staff member with suicide prevention responsibilities trained in the following OSUMH Suicide Prevention programs. If a staff member has not yet been identified, describe the plan to ensure a staff member is trained in the following:

- 1. Suicide Prevention 101 Training**
- 2. Safe & Effective Messaging for Suicide Prevention**
- 3. Suicide Prevention Gatekeeper training, such as Question-Persuade-Refer (QPR), Mental Health First Aid (MHFA), Talk Saves Lives or Applied Suicide Intervention Skills Training (ASIST)**

VBH has at least one staff member trained in each of the above-mentioned suicide prevention programs including the following: Melissa Swan is trained in each of the above-mentioned and Mark Hartman is trained in Suicide Prevention 101 and Safe & Effective Messaging for Suicide Prevention. The Tooele County Health Dept. through its Prevention Unit has a Suicide Prevention Specialist on staff and numerous staff are trained in QPR, MH First Aid, and participate with an active Interfaith Suicide Prevention Initiative. They also sponsor Communities that Care with suicide prevention activities taking place in Wendover, Grantsville, and Stansbury Park.

Describe all current strategies in place in suicide postvention including any grief supports. Describe your plan to coordinate with Local Health Departments and local school districts to develop a plan that identifies roles and responsibilities for a community postvention plan aligned with the Utah Suicide Coalition for Suicide Prevention Community Postvention Toolkit. Identify existing partners and intended partners for postvention planning. If available, please attach a localized suicide postvention plan for the agency and/or broader local community or link to plan.

Suicide loss survivors may seek support and referrals from the Optum Recovery & Resiliency Team who can help to identify local grief support and suicide survivor groups. This includes referrals to NAMI.

For Local Authorities participating in the Garrett Lee Smith State Youth Suicide Prevention and Early Intervention Grant Program or the Project AWARE grant, 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 either of these grant programs, please indicate “N/A” in the box below.

NA

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.

NAThe Tooele County Health Department has the comprehensive suicide prevention grant. With the grant funding they are targeting to;

- *Increase the number of Guiding Good Choices parenting classes held in Grantsville CTC and North Valley CTC to 12 sessions over the 3-year grant period.
- *Increase collaboration among those providing prevention in the community.
- *Increase the number of participants in suicide prevention gatekeeper trainings in Tooele County. This will include QPR, Mental Health First Aid and Vital Cog.
- *Increase collaboration among those providing interventions in the community.
- *Increase knowledge of local mental health and crisis response resources.
- *Increase likelihood of asking someone if they are feeling suicidal.
- *Increase likelihood of offering to hold on to someone’s firearms if they were experiencing a mental health crisis.
- *Reduce the number of past- year suicide attempts among 6-12th graders.
- *Decrease the percentage of students who felt sad or hopeless and didn’t talk to anyone about it.

- *Decrease depressive symptoms

- *Decrease Family Conflict

- *Decrease Poor Family Management

- *Increase Family Attachment

- *Increase collaboration among those providing postvention in the community.

In collaborating with Optum Tooele County on these goals it was identified to;

- *Coordinate with Optum to share e-flyers Re: family workshops (GGC), Learning to Breathe, etc.
- *Support with establishing streamlined methods for PCP referrals to prevention programs/offerings.
- *Coordinate with Optum to share e-flyers Re: scheduling gatekeeper training (QPR, MHFA, Vital Cog, etc).

*Support with connecting with more community businesses to provide suggestions for pro-MH workplace policies.
*Support in developing a solid postvention plan and participate in the postvention plan development team work group.

20) Justice Treatment Services (Justice Involved)

Thom Dunford

What is the continuum of services you offer for justice-involved clients and how do you address reducing criminal risk factors?

Valley Behavioral Health is a contracted provider with Optum Tooele County. VBH provides Justice treatment services, case management services, crisis services, and peer support services at the jail. This includes one-on-one case management, as well as peer support groups two times per week. VBH has case management in the jail five days per week and on weekends if needed. They also offer help with pre-release planning, assistance with Medicaid, help with IDs as needed, and set up for services in MH or SUD. [VBH also has a PSS Employment Specialist to work with this population.](#) VBH provides tracking of progress to all courts and Adult Probation and Parole monthly, as well as drug testing as indicated. VBH can also have a therapist go to the jail when requested, as well as offer assistance with WorkForce Services. [Valley Behavioral Health was able to hire a PSS to support employment efforts for those who are justice involved as indicated for a quality improvement goal in the FY23 plan.](#) In FY24 VBH will facilitate the PATR program for parolees who qualify.

Describe how clients are identified as justice involved clients

Clients are Identified by the courts and referred to VBH. VBH has a partnership with the Sheriff's office, as well as representation from the following entities on their panel: jail command staff, courts, AP&P, County Attorney's office in a pretrial release services program (PTRS). VBH assesses these clients and the risk factor of each client by using a risk assessment and needs tool, the RANT or a LS-RNR to support treatment planning that meets their needs.

How do you measure effectiveness and outcomes for justice involved clients?

VBH measures effectiveness and outcomes for Justice involved clients through Negative UA's, involvement in treatment such as attending groups, individuals and medication compliance if prescribed. Stabilization in daily life with housing, employment, compliance with probation or parole, courts, and no new criminal charges. These are reported through monthly treatment reports and collaboration with referring agencies such as probation/parole and courts.

Identify training and/or technical assistance needs.

Valley Behavioral Health reported Trauma based training is always needed.

Identify a quality improvement goal to better serve justice-involved clients.

[Valley Behavioral Health was able to hire a PSS to support employment efforts for those who are justice involved as indicated for a quality improvement goal in the FY23 plan](#)
The goal for FY24 builds on FY23 to further create coping and life skills to become self-sufficient and reduce recidivism.

Identify the efforts that are being taken to work as a community stakeholder partner with local jails, AP&P offices, Justice Certified agencies, and others that were identified in your original implementation committee plan.

Valley Behavioral Health is a contracted provider with Optum Tooele County. VBH has a partnership with DJJ, DCFS and JJYS as well as juvenile probation for youth. VBH reports to these entities in the same manner as they do with adult members. VBH has a partnership with the Sheriff's office, as well as representation from the following entities on their panel: jail command staff, courts, AP&P, County Attorney's office in a pretrial release services program (PTRS) for adults. This is to support and prevent recidivism and address need areas.

Identify efforts being taken to work as a community stakeholder for children and youth who are justice involved with local DCFS, JJYS, Juvenile Courts, and other agencies.

Valley Behavioral Health is a contracted provider with Optum Tooele County. VBH has a partnership with DJJ, DCFS and JJYS as well as juvenile probation for youth. VBH reports to these entities in the same manner as they do with adult members.

The HSAC is another forum for this relationship. All agencies identified above attend HSAC and periodic staffings can be arranged to discuss justice involved youth.

21) Specialty Services

Pete Caldwell

If you receive funding for a speciality service outlined in the Division Directives (Operation Rio Grande, SafetyNet, PATH, Behavioral Health Home, Autism Preschools), please list your approach to services, how individuals are identified for the services and how you will measure the effectiveness of the services. Include any planned changes in programming or funding. If not applicable, enter NA.

NA

22) Disaster Preparedness and Response

Nichole Cunha

Outline your plans for the next three years to:

Identify a staff person responsible for disaster preparedness and response coordination. This individual shall coordinate with DHHS staff on disaster preparedness and recovery planning, attending to community disaster preparedness and response coalitions such as Regional Healthcare Coordinating Councils, Local Emergency Preparedness Committees (ESF8), and engage with DHHS in a basic needs assessment of unmet behavioral health disaster needs in their communities.

In addition, please detail plans for community engagement, to include partnership with local councils and preparedness committees as well as plans for the next three years for staff and leadership on disaster preparedness (to include training on both internal disaster planning and external disaster preparedness and response training). Please detail what areas your agency intends to focus on with training efforts and timeline for completing training.

Optum maintains a business continuity plan that is reviewed at least annually to assure disaster preparedness. However, due to the proprietary nature of this document it is unable to release it. Tooele County has a disaster preparedness and response plan that may be found in GoogleDocs under the G&O tab, uploaded as a part of the audit. Gary Dalton will be the primary contact.

23) Required attachments

- List of evidence-based practices provided to fidelity and include the fidelity measures.
- Disaster Preparedness and Recovery Plan to coordinate with state, regional, and local partners in Disaster Preparedness Planning and Supporting Disaster Behavioral Health Response. See availability of Tooele County's EOP noted above.
- A list of metrics used by your agency to evaluate client outcomes and quality of care.
- A list of partnership groups and community efforts (ie. Multi-Agency Coordinating Committees, Regional Advisory Councils, High Fidelity Wraparound teams, Local Interagency Councils, Local Recovery Community, Peer Advocacy Groups, County Attorney, Law Enforcement, Local Education Agencies, Courts including Mental Health Court, Regional Healthcare Coalitions, **Local Homeless Councils, State and Local government agencies**, and other partnership groups relevant in individual communities)

List:

Div. of Aging and Adult Services Multi-disciplinary Committee (meets monthly)
Human Services Advisory Committee (HSAC) meets monthly
Local Homeless Coordinating Council (LHCC) meets monthly
Criminal Justice Advisory Council (CJAC) meets monthly
Emergency Operations Center Council (EOC) meets quarterly
Oasis Support Club (SUD support groups-AA) meets weekly
Tooele County Reentry Resources meets weekly
Law Enforcement Administrators and Directors (LEAD) meets monthly