

Summit County

FORM B - SUBSTANCE USE DISORDER TREATMENT BUDGET NARRATIVE

3 Year Plan (2024-2026)

Local Authority: Summit 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) Early Intervention

Program Manager

Holly Watson

Describe local authority efforts you propose to undertake over the three year period to provide for individuals convicted of driving under the influence, a screening; an assessment; an educational series; and substance abuse treatment as required in Utah Code § 17-43-201(5)(m).

Individuals requiring care related to driving under the influence charges must complete the Substance Abuse Subtle Screening Inventories (SASSI) tool and a biopsychosocial substance use/mental health assessment before receiving treatment. Anyone scoring a high probability of having a Substance Use Disorder (SUD) will be referred for a complete Substance Use Assessment, along with those court-ordered to complete a substance use evaluation. Individuals meeting the criteria for treatment after an assessment will be referred to a clinician at the Huntsman Mental Health Institute – Park City.

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

The Huntsman Mental Health Institute – Park City uses biopsychosocial substance use/mental health assessment, including the Substance Abuse Subtle Screening Inventories (SASSI), University of Rhode Island Change Assessment (URICA), American Society of Addiction Medicine (ASAM), [Substance Use Recovery Evaluator \(SURE\)](#), Outcome Questionnaire/Youth Outcomes Questionnaire (OQ/YOQ), all of which are evidence-based tools used to determine necessary interventions for youth and adults. For individuals who request services and are assessed as appropriate for early intervention such as Alcohol & Drug Intervention (ADI), they are directed to a limited course of outpatient substance use treatment that focuses on psychoeducation. Evidence-based psychoeducation is primarily provided through the Change Company Interactive Journaling Series for the limited outpatient services.

Describe work with community partners to implement brief motivational interventions and/or supportive monitoring in healthcare, schools and other settings.

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

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

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

Courts:

Clients court-mandated to have a behavioral health assessment are referred within the Healthy U. Behavioral Network for assessment. Treatment recommendations are determined and sent to the court. Treatment for the majority of court ordered treatment are provided at the Huntsman Mental Health Institute – Park City and are tracked through the courts and case management services.

Education:

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

Local Education Authorities:

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

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

Summit County residents are provided three options to help navigate behavioral healthcare in Summit County.

Summit County Network:

The term Summit County Network refers to the overall umbrella of services coordinated by the Behavioral Health Division, which includes the services contracted to the University of Utah Health Plans, their behavioral health department known as

Healthy U. Behavioral (HUB), local non-profits which provide low to no cost care to residents, Intermountain Healthcare (IHC), the Mental Wellness Alliance, Wasatch Behavioral Health (WBH), and private clinicians within Summit County. Where appropriate, private clinicians and non-profits refer to the Healthy U. Behavioral Network for enrollment.

Healthy U. Behavioral Network:

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

CONNECT:

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

New in FY24, CONNECT has developed a community scholarship program, funded by donations, to cover the cost of behavioral health services in Summit County.

Describe activities to reduce overdose.

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

The Summit County Health Department provides distribution and training for any agency, school, business, or individual wishing to receive free Naloxone kits.

Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.

The success of efforts in reducing overdoses in Summit County is measured by the evaluation of county incident data from law enforcement, administration of Naloxone by law enforcement/ first responders, the annual provider survey, Huntsman Mental Health Institute – Park City reports, and emergency department reporting from the Park City Hospital.

Additional metrics include tracking the number of Naloxone trainings and kits distributed within the community.

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

Describe the activities you propose to undertake over the three year period to assist individuals prevent/alleviate medical complications related to no longer using, or decreasing the use of, a substance. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.

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

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

When required, Huntsman Mental Health Institute - Salt Lake City provides these services, which is a Healthy U. Behavioral Network provider.

3) Residential Treatment Services: (ASAM III.7, III.5, III.3, III.1) Shanel Long

Describe the activities you propose to undertake over the three year period and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and identify the population served (Men, Women, Youth).

University of Utah Health Plans uses contracted clinicians, Odyssey House, First Step House, Wasatch Crest, House of Hope and others, for residential services. Consideration is given to funding sources and services available for placement. (February of 2023 saw the opening of Summit County's first sixteen bed residential treatment facilities, with Wasatch Crest expanding services from Wasatch County.) While in residential treatment, case managers and care managers coordinate and arrange aftercare through network clinicians. Services consist of evaluation and treatment planning, individual and group therapy, skills development, case management, recovery support services, social detoxification, smoking cessation, and, when indicated, medication management and Medication Assisted Treatment (MAT). Clients receive assistance in transitioning to lower levels of care as indicated by the

American Society of Addiction Medicine (ASAM) placement tool.

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

4) Treatment for Opioid Use Disorder (OTP-Methadone)

VaRonica Little

Describe the activities you propose to undertake over the three year period and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and summarize the services they will provide for the local authority. If you plan to use SOR funding please identify how you will implement GPRA initial, 6-month and discharge requirements.

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

As services continue to grow in Summit County, it is planned for the Huntsman Mental Health Institute – Park City will be able to provide these services within the next three years.

Due to the reporting requirements and the low award amount, Summit County is not planning on using any SOR funding at this time..

Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.

Currently Methadone treatment is not provided in Summit County. Huntsman Mental Health Institute – Park City does provide Medication Assisted Treatment using Suboxone in the HMHI PC clinic. Methadone treatment is referred to Salt lake City providers.

5) Medications for Opioid Use Disorder-(Vivitrol, Naltrexone, Buprenorphine) VaRonica Little

Describe activities you propose to undertake over the three year period to ensure community members have access to MOUD treatment, specific types of treatment and administration, and support services for each? If you plan to use SOR funding please identify how you will implement GPRA initial, 6-month and discharge requirements for these services.

The Huntsman Mental Health Institute – Park City is the primary prescriber and provides Buprenorphine, Vivitrol and Naltrexone on-site. Services include medication evaluation and management for Medication Assisted Treatment (MAT) with supplemental treatment services and recovery supports to include group therapy, individual therapy, case management, Peer Support Specialist (PSS), and urine-drug screening. Services are determined by assessment and screening for development of individualized treatment plans. Medication Assisted Treatment (MAT) services are offered by network clinician for inpatient and outpatient care through Odyssey House and First Step House who contract with Project Reality for overdose treatment.

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

The Huntsman Mental Health Institute – Park City clinic has a prescriber and provides Medication Opioid Use Disorder and Medication Assisted Treatment. We prescribe Suboxone, Vivitrol, Naltrexone, and Antabuse most commonly.

Due to the reporting requirements and the low award amount, Summit County is not planning on using any SOR funding at this time.

Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.

Access to Medication Assisted Treatment services through Huntsman Mental Health Institute – Park City is a measure of success. Clients are administered the Outcome Questionnaire at 30-day intervals, are staffed individually on a case-by-case basis and are tracked through episodes of treatment.

6) Outpatient (Non-methadone – ASAM I)

Shanel Long

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

Standard Outpatient services are provided via the American Society of Addiction Medicine (ASAM) 1.0 through the Huntsman Mental Health Institute – Park City, which is the primary provider of Substance Use Disorder (SUD) treatment in Summit County. Standard Outpatient group therapy is offered weekly from 4pm-5pm at Huntsman Mental Health Institute – Park City, with additional groups provided through CONNECT Summit County. Services include individual therapy, case management, peer support specialists, recovery support services, urine drug screening, and medication management when applicable. Services are determined through assessment and screening with individualized treatment recommendations/plans. Services are provided to men, women, and adolescents who seek treatment and those referred for treatment by the judicial system. American Society of Addiction Medicine (ASAM) placement criteria is utilized to determine the appropriate treatment level for the individual. Other groups available include process groups, psychoeducation, Moral Reconciliation Therapy (MRT), family interventions, gender-specific treatment, and skills-based groups. University of

Utah Health Plans is partnered with the National Jewish Health online programs to offer smoking cessation groups.

A portion of outpatient services is offered through Healthy U. Behavioral clinicians outside of Summit County when appropriate. These outpatient services are provided to increase treatment access and timeliness, ensuring effective integration into the community from more intensive treatment to less intensive outpatient services.

Youth Outpatient Services:

Outpatient youth services are offered with school-based programs and through the Healthy U. Behavioral Network. School-based clinicians work with Healthy U. Behavioral to ensure warm hand-offs when youth transition into new services.

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

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

Shanel Long

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

Intensive Outpatient services are provided via the American Society of Addiction Medicine (ASAM) 2.1 standards through the Huntsman Mental Health Institute – Park City in Summit County. Intensive Outpatient (IOP) group therapy is offered five days a week from 8-10 am or 5-7 pm, depending on the day. Groups are at 1820 Sidewinder Drive Ste.100, PC, UT 84040. Services are provided to men, women, and adolescents who seek treatment and those referred for treatment by the judicial system. **In FY24, Wasatch Crest will be an additional Intensive Outpatient (IOP) provider in Summit County. Services are currently being negotiated and developed for implementation over the next three years.**

American Society of Addiction Medicine (ASAM) placement criteria are utilized to determine appropriate treatment levels. Other groups available include process groups, psychoeducation, Moral Reconciliation Therapy (MRT), family interventions, gender-specific treatment, and skills-based groups. Healthy U. Behavioral is partnered with the National Jewish Health online programs to offer smoking cessation groups, Services are determined through assessment and screening with individualized treatment recommendations/plans.

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

- Comprehensive Substance Use Disorder Treatment addressing

individual, family, relationship, and environmental challenges.

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

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

Services include:

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

American Society of Addiction Medicine (ASAM) 2.5 level of care, which requires partial hospitalization, is serviced through the Healthy U. Behavioral Network in Salt Lake City and day treatment clinicians (Odyssey House, Steps Recovery).

Youth Outpatient Services:

Outpatient youth services are offered through school-based programs and contracted Healthy U. Behavioral Network clinicians. Huntsman Mental Health Institute – Park City school-based clinicians work with the Healthy U. Behavioral Network to ensure warm hand-offs when youth transition into higher levels of care. American Society of Addiction Medicine (ASAM) level of care 2.5, Day treatment is provided for adolescents through Odyssey House and TeenScope (a treatment program for teens ages 12–18 that helps teens and their parents) programs in SLC.

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

8) Recovery Support Services

Thom Dunford

Describe the activities you propose to undertake over the three year period and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. For a list of RSS services, please refer to the following link: <https://sumh.utah.gov/services/recovery-supports/recovery-resources>

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

Examples of services offered to Clients include;

Fit To Recover (four pillars: Nutrition, Community Service, Creative Arts, and Fitness through group cooking classes, artistic endeavors, service outreach, and sports & exercise),

- Peer Support Specialists (PSS) through Huntsman Mental Health Institute – Park City,
- Alcoholics Anonymous,
- Narcotics Anonymous,
- Trauma-informed yoga instruction through Tall Mountain Wellness PC,
- Case Management (Many clients face challenges with housing, employment, access to healthcare along with a variety of other needs. Where possible, University of Utah Health Plans provides emergency/temporary housing

assistance and funding for medical services and medications) through Huntsman Mental Health Institute – Park City,

- Psychoeducation and life skills groups offered by Huntsman Mental Health Institute – Park City (both men and women-specific groups-Prime for Life, Building Resilience and Seeking Safety) as well as other contracted clinicians in the network. Clients can be linked with educational opportunities and have the opportunity to obtain their GED or Adult High School Diploma.

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

Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.

Currently, the recovery support offered in Summit County exists primarily outside of the Office of Substance Use and Mental Health framework because of the difficulty in reporting out the required data. Over the next three years, the way to evaluate Summit County's effectiveness in this area will be if we are able to pull down the available funding from the office because that will indicate that the data reporting has become more complete and effective. This will allow the Summit County Recovery Foundation to extend its scope of services provided because much of what they are currently doing can be funded through office funding.

9) Peer Support Services-Substance Use Disorder

Thom Dunford

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

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

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

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

Clients may also be referred to a Peer Support Specialist (PSS) through University of Utah Health Plans if a client is not being seen through the HMHIPC clinic. In the past, clients could also be referred to peer support services through school-based services.

10) Quality & Access Improvements

Shanel Long

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

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

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

University of Utah Health Plans utilizes State and County funding, making services affordable to Summit County residents. University of Utah Health Plans offers interpreter services through the Healthy U. Behavioral Network, primarily through Huntsman Mental Health Institute – Park City, for Spanish-speaking Clients and other language needs. With the addition of Latino Behavioral Health, Spanish language services have increased with both clinical sessions and Peer Support Services. Currently, there are 18 Spanish Speaking clinicians in Summit County. University of Utah Health Plans contracts with the Summit County jail and Huntsman Mental Health Institute – Park City is the contracted treatment clinician. This partnership allows for increased services in the jail, including medication evaluation and management, crisis support, assessment and group psychoeducation, and Moral Reconciliation Therapy (MRT). Additionally, follow-up care is coordinated with Huntsman Mental Health Institute – Park City. Doctors, clinicians, case managers, and peer specialists work to make transitions seamless for individuals.

University of Utah Health Plans care managers provide care management nurses to help with healthcare and community service needs. Care management is conscious of the cultural and linguistic preferences of members and their support. The care management program offers individual attention to meet healthcare goals. Services include education, advocacy, and coordination of needed services. This program is no-cost for University of Utah Health Plans members and unfunded residents who want nursing services.

We do not have a waiting list for services as the Healthy U. Behavioral Network for mental health services, however, due to the reduction in clinicians willing to see individuals with a substance use diagnosis, Huntsman Mental Health Institute –HMHI is typically triage patients and get people in for Case Management and Certified Peer Support and/or MAT (Medication Assisted Treatment) evaluations as well as assessments with the therapist within a week. We are sensitive to helping people right away and certainly when it is assessed as a crisis. We will get people into detox if that is necessary and then track them with CM (Case Management) so we can transition them to inpatient or into IOP (Intensive Outpatient).

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).

Serving as the guiding document for behavioral health services in Summit County, including the Healthy U. Behavioral Network, non-profits, Local Education Authorities, and private clinicians, the Summit County Mental Wellness Strategic Plan established Goal V as ensuring “*equity of mental health & substance use programs and services for Latino and underserved community members.*” As means to achieve this Goal, the following objectives have been assigned to this goal:

1. Address barriers facing Latino community members in accessing and receiving linguistically competent mental health & substance use programs and services.
2. Enhance online means and resources to connect Latinos and other underserved residents with services and programs within the community.
3. Working with key stakeholders, address barriers to licensure within the state of Utah for non-native English speakers.
4. Establish a high school to licensure program for native Spanish-speaking residents in Summit County to cover the costs of education (including bachelors) and licensure, along with providing internships and job placement within Summit County.
5. Increase opportunities for Latino youth to engage in programs focused on mental, physical, and emotional health
6. Provide Latino Families who may be or have a member in their household identifying as LGBTQ+ have access to information or supportive resources

specific to the Latino LGBTQ+ communities.

7. Establish a Healthy Minds program through Latino Behavioral Health in Summit County.
8. Establish a Spanish-language Telehealth service network with clinicians outside of Utah to expand service access to increase the number of sessions in Spanish from clinicians in other states with reciprocity.
9. Ensure the Latino community's voice is represented on all committees and programs outlined within this Strategic Plan.

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.

The future impacts of the Medicaid unwinding remain unknown. Currently, both the Summit County Network and the Healthy U. Network have the capacity to absorb additional unfunded clients through the Huntsman Mental Health Institute – Park City. We anticipate that the majority of clients removed from Medicaid will have found employment and possibly have insurance. Healthy U. Behavioral will work with individuals if they appear to have been improperly dropped from the Medicaid rolls. Should the number of people removed from Medicaid-funded behavioral healthcare into either the Summit County Network or the Healthy U. Network exceed capacity or funding, a policy for triage will need to be established and implemented.

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

University of Utah Health Plans works closely with community agencies including the Summit County Behavioral Health Division, CONNECT Summit County, Vail Resorts Wellness Management, Summit County Recovery Foundation, Peace House, Summit County Mental Wellness Alliance, Jewish Family Services, Holy Cross Ministries, Children's Justice Center, Summit County Courts, probation and local law enforcement, North Summit School District, South Summit School District, and the Summit County School District. These relationships provide important means to both promote and evaluate services. In addition, the University of Utah Health Plans website refers potential clients to the network clinicians and has additional information about services available. University of Utah Health Plans outreach workers and those employees working in the community offer education to outside agencies. Recovery Support Specialists (RSS) network with other recovery supports to broaden the array of opportunities for clients.

Healthy U. Behavioral meets monthly with the Summit County Behavioral Health Advisory Committee, which serves as the Local Authority advisory group to the Summit County Council on issues related to behavioral health. Membership includes local elected leadership, Intermountain Healthcare, the Latinx

community, non-profits, network clinicians, the Park City Mayor, members of the Summit County Council, Summit County Sheriff's Office, Summit County Attorney's Office, and the Summit County Health Department. This Committee reviews metrics established within the contract to identify areas to be improved upon and provide support. Healthy U. Behavioral also serves on several Summit County Mental Wellness Alliance committees such as:

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

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

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

What evidence-based practices do you provide (you may attach a list if needed)? Describe the process you use to ensure fidelity?

University of Utah Health Plans offers and supports professional training to ensure competency and fidelity. Clinicians in the network have certifications in evidence-based programs (EBP). The following is a list of some of the evidence-based programs provided in the network:

- Motivational Interviewing
- Cognitive Behavioral Therapy (CBT) for Substance Abuse and Co-Occurring Disorders (Hazelden Curriculum)
- Moral Reconciliation Therapy (MRT) and Domestic Violence Moral Reconciliation Therapy (MRT)
- Dialectical behavioral Therapy (DBT)
- Post-traumatic Stress Disorder (PTSD) Treatments: Seeking Safety & Beyond Trauma & Building Resilience
- Matrix Model for Intensive Outpatient Treatment (IOP)
- Substance Abuse and Criminal Behavior

- The Change Companies Curriculum
- Thinking Errors
- Anger Management
- Behavioral Therapy
- Family Therapy/Multi-Family Group Therapy/CRAFT
- Criminal Risk Assessments and Treatment (RANT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Trauma Recovery Empowered Model (TERM)
- Men's Trauma Recovery Empowered Model (M-TERM)

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

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

The Summit County Mental Health Strategic Plan serves as the overall guide for improving not only the quality of care for residents of Summit County, but also access and breadth of services provided by the Healthy U. Behavioral Network, non-profits, Local Education Authorities, and private clinicians. A copy of the Strategic Plan has been included in the Area Plan folder.

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

University of Utah Health Plans providers utilize a hybrid model for care. Clients are offered telehealth and in person services and clinical staff will see clients in their preferred method. Huntsman has specific policies for telehealth platforms, confidentiality, and oversight for quality that providers adhere to. Policies have been added to the Area Plan folder.

What outcome measures does your agency use to address substance use services? How often does your agency review data and outcome measures? How do you identify if services are effective, efficient and improving lives? I.e., How much did we do? (Quality), How well did we do? (Quality) and Is anyone better off? (Impact).

Network Clinicians use the following metrics to evaluate outcomes and quality;

- Outcome Questionnaire/Youth Outcomes Questionnaire (OQ/YOQ) measures at intake and at 30-day intervals,

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

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

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

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

University of Utah Health Plans, through Huntsman Mental Health Institute – Park City, provide behavioral health treatment directly in the Summit County Jail. With the Justice Reinvestment Initiative

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

Describe any significant programmatic changes from the previous year.

Medically Assisted Treatment is now provided in the Summit County Jail.

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

Huntsman Mental Health Institute – Park City offers Moral Reconciliation Therapy (MRT), Anger Management, life skills, wellness classes, and crisis therapy to individuals who are incarcerated. Attendees include individuals who are experiencing withdrawal and can be supported through these forms of intervention. Huntsman Mental Health Institute – Park City prescriber, Dr. Jason Hunziker, Medical Director, University of Utah Health Plans provides consultation with the jail staff when necessary. Medication Assisted Treatment (MAT) services through the Huntsman Mental Health Institute – Park City are available upon release and the team coordinates care for clients after their release to ensure ongoing treatment and follow-up care.

Beginning in FY23, the Summit County Council has authorized the funding of Subutex upon entry into the Summit County Jail and Vivitrol upon release to be funded by the County's Opioid Settlement Funds.

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

No

12) Integrated Care

Shanel Long

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

University of Utah Health Plans is an Accountable Care Organization (ACO) providing both behavioral health and physical health Medicaid clients with an integrated Medicaid plan. University of Utah Health Plans also has a good relationship with the other three Accountable Care Organizations (ACO) providing physical health Medicaid. We are working on the integrated pilot program along the Wasatch Front, and taking those lessons learned to improve in Summit County.

University of Utah Health Plans and the Summit County Division of Behavioral Health, which is a part of the Summit County Health Department, have a strong working relationship. Through weekly meetings with the Director of Behavioral Health and participation in the Summit County Mental Wellness Alliance committees, Healthy U. Behavioral is a well regarded partner for the Summit County community.

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

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

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

The Huntsman Mental Health Institute – Park City clinic offers engagement in programs like Fit to Recover (recovery-based wellness), trauma-informed yoga through PC Yoga Collective and Tall Mountain Wellness, care management services through the University of Utah Health network, and case management and Psycho-Social Support services used to consistently assess client needs over the course of their engagement in treatment.

Describe your plan to reduce tobacco and nicotine use in SFY 2024, and how you will maintain a *nicotine free environment* at direct service agencies and subcontracting agencies. For ongoing engagement, it is recommended to use an evidence-based nicotine dependence tool such as the Fagerstrom scale. SUD Target= reduce nicotine use to 4.8 in 2021 in TEDs.

University of Utah Health Plans Clinicians do not allow the use of tobacco products within 25 feet of the facilities, and individuals who wish to stop using tobacco products are referred to the National Jewish Health Quitline for one-on-one coaching, support services, and nicotine replacement therapy. We coordinate prevention work with the Summit County Health Department.

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

UUniversity of Utah Health Plans provides both behavioral and physical healthcare as the Accountable Care Organization (ACO) arm of the University of Utah. As an arm of the University of Utah,

opportunities for continued education are offered by the College of Psychiatry and other colleges and departments from Healthy U. in the University of Utah system.

Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve

Integration of care is central to the goals of University of Utah Health Plans and is a core tenant of our treatment philosophy. Huntsman Mental Health Institute – Park City works closely with our care management team when a client is identified as having a comorbid condition that would benefit from physical healthcare in addition to behavioral healthcare. Members who have chosen Healthy U. as their physical healthcare Medicaid plan have an integrated plan with a care management team using the “whole client” philosophy. Unfunded clients are still referred to low-cost and free services when available and encouraged to sign up for Medicaid if they meet the requirements. The effectiveness of the team-oriented approach is measured on a case-by-case basis based on individual client needs and our ability to help them achieve their health goals.

13) Women's Treatment Services

Rebecca King

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

Services for women are provided on-site at the Huntsman Mental Health Institute – Park City and Peace House. Services include individual treatment, group therapy, and case management. Upon admissions, women are screened for other factors, including pregnancy, and provided immediate access to behavioral health services while being connected with appropriate community resources. University of Utah Health Plans is contracted with the House of Hope for residential services specific to this population. A gender-specific Seeking Safety Trauma and a Dialectical Behavior Therapy (DBT) group has been established for women and is run one evening per week. Case management services are provided which assist with housing needs, access to physical healthcare, and guidance in obtaining appropriate benefits.

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

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

needs by connecting and coordinating family involvement with several community and network supports with the goal of rehabilitation.

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

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

University of Utah Health Plans provides these services through the contracted network clinician model. Case management services are provided to children and parents in homes, schools, and Huntsman Mental Health Institute – Park City. A Family Resource Facilitator (FRF) is also available to work with families in the network. The Family Resource Facilitator (FRF) coordinates care by attending staff meetings at Huntsman Mental Health Institute – Park City weekly. [Individuals in need of transportation are able to coordinate with High Valley Transit, which provides free pick-up and drop-off to address in Summit and Wasatch Counties.](#) Additionally, the case manager and Family Resource Facilitator (FRF) are able to travel to clients' homes to provide services.

Clients in treatment have access to recovery support services through case management and peer support. Coordination of childcare is provided through community resources and natural supports by connecting clients to community and vocational resources, often working with the Peace House for domestic violence situations. To assist clients with transportation issues, Recovery support services assess need and offer training in public transportation use, utilizing natural and community supports, and occasionally providing transportation to treatment appointments.

Describe any significant programmatic changes from the previous year.

NA

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

Rebecca King

Identify the need for continued WTX funding in light of Medicaid expansion and Targeted Adult Medicaid.

NA

Please describe the proposed use of the WTX funds
NA
Describe the strategy to ensure that services provided meet a statewide need, including access from other substance abuse authorities
NA
Submit a comprehensive budget that identifies all projected revenue and expense for this program by email to: bkelsey@utah.gov
NA
Please demonstrate out of county utilization of the Women and Children's Residential Programs in your local area. Please provide the total number of women and children that you served from other catchment areas and which county they came from during the last fiscal year.
NA

14) Adolescent (Youth) Treatment

Shanin Rapp

Describe services provided for adolescents and families. Please identify the ASAM levels of care available for youth.
<p>University of Utah Health Plans has contracted clinicians in the network to provide outpatient-level services to youth with diagnosed substance use disorders. In Summit County, Huntsman Mental Health Institute – Park City offers standard youth outpatient services on-site. Teen Substance Use Disorder (SUD) groups are scheduled to begin the fall of 2023 at Huntsman Mental Health Institute – Park City, which will provide Teen Moral Reconciliation Therapy (MRT) and other Substance Use Disorder (SUD) groups. Teen group therapy is available through contracted clinicians and school-based services. Youth placement for treatment is determined by the American Society of Addiction Medicine (ASAM) levels of care and assessment through contracted network clinicians. For court-mandated youth Substance Use Disorder (SUD) assessment and urine drug testing, Huntsman Mental Health Institute – Park City supports assessments and provides or refers treatment within the Healthy U. Behavioral Network. The Substance Abuse Subtle Screening Inventory (SASSI), University of Rhode Island Change Assessment (URICA), Youth Outcomes Questionnaire (for parent and child), and Adverse Childhood Experience (ACE) assessments are used to measure treatment needs. Clinicians evaluate for co-occurring mental health disorders. Treatment is provided based on individual and developmentally appropriate needs. Families are encouraged to participate in treatment. All clinicians are Master level and receive treatment training for mental health and substance use disorders. In addition, clinicians have opportunities throughout the year for additional training. Staff complete required Continuing Education Units (CEUs) for their licensure. Huntsman Mental Health Institute – Park City clinicians have been trained in Seeking Safety, an evidence-based treatment for substance use, and Post-traumatic Stress Disorder (PTSD). Staff have also been involved in ongoing training on trauma-informed care. Clinicians have weekly individual supervision and staffing. Co-occurring assessments and treatment are standard.</p>

Huntsman Mental Health Institute – Park City clinicians are trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and trauma-informed care. Clients may participate in mental health therapy groups and can be referred for medication management. Recovery support services, through case managers, have been implemented in youth substance abuse, with a significant focus on outreach to both engage clients in treatment and retain them once they are in. Clinicians are trained in motivational interviewing to engage clients and motivational incentives are used to retain clients. When needed, direct outreach is used to contact clients who have disengaged, and may include the sending of the Mobile Crisis Outreach Team to perform a welfare check. Adolescent clients are involved in developing their treatment plans. Youth are referred for day treatment and residential programs to contracted clinicians like Odyssey House, Huntsman Mental Health Institute TeenScope and various other programs. Program evaluation is done quarterly using Treatment Episode Data Sets (TEDS) collected at admission vs discharge. Point-in-time evaluations are completed annually via the MHSIP.

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

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

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

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

Healthy U. Behavioral Network clinicians who focus on youth and women prioritize care for families. Families involved with the Utah Division of Child and Family Services (DCFS) may have children in state custody or are at risk of losing custody. For women in residential treatment and other extenuating circumstances, contracted clinicians work with Utah Division of Child and Family Services (DCFS) caseworkers to support and facilitate visitation schedules. At the Huntsman Mental Health Institute – Park City, clinical management stays connected to the Utah Division of Child and Family Services

(DCFS) to develop relationships and communication about families in services and, in addition, works closely with treatment courts to facilitate case information and services for women and children in this process.

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

15) Drug Court

Shanel Long

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

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

Adult Drug Court Eligibility Criteria:

1. Participants must reside in Summit County and must be a legal resident of the United States (unless exempted by Transfer Policy #10). Additionally, with the approval of the Behavioral Health Division, participants who participate in the Summit County Drug Court but have to relocate to Wasatch County due to the cost of housing are allowed to remain within the program.
2. Participants must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-V) diagnosis of current drug dependence as determined by a clinical assessment.
3. Participants must demonstrate high risk/high needs as determined by a standardized Risk and Needs Triage (RANT) Assessment completed prior to admission into the program.
4. Participants must have a felony charge and must plead to a felony or must be on felony probation. The County Attorney's Office will make the determination of whether the defendant receives a "plea in abeyance" or "condition of probation" offer.
5. Participants will be assessed for treatment needs by the Summit County Contracted treatment provided through Huntsman Mental Health Institute – Park City, using a

standardized assessment/test.

6. Participants cannot be currently on parole.
7. Participants must be willing and able to terminate use of lawfully prescribed controlled substances, prescriptions, and over-the-counter medications that affect the integrity and accuracy of drug screening.
8. The County Attorney, after reviewing the findings of the Huntsman Mental Health Institute – Park City treatment team, has final approval for inclusion or acceptance in the Drug Court program.

Effective FY24, so long as an individual is classified as high-risk, high-need, individuals with a Class A misdemeanor will be allowed into the Summit County Drug Court program.

Describe Specialty Court treatment services. Identify the services you will provide directly or through a contracted provider for each type of court (Adult, Family, Juvenile Specialty Courts, DUI). Describe your efforts to have Certified Peer Support specialists working with Drug Courts? How will you engage and assist individuals with Medicaid enrollment throughout their episode of care.

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

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

work with participants for eligibility and enrollment in Medicaid and state funds.

The Summit County Drug Court program has had a Certified Peer Support Specialist as part of the treatment team from its founding and will continue to ensure this key role remains with the program

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

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

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

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

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

\$15.00 Per Group or Session
\$20.00 Per Urine Analysis (Presumptive)
\$75.00 Per Urine Analysis Challenge (Definitive), only payable if test returns positive

Drug Court Clients pay fees based on ability and payment plan eligibility. Drug Court members use state funds, county funds, or Medicaid for all clinical services, including Urine Analysis tests. When the costs of participating in Drug Court become a barrier, the Summit County Recovery Foundation, a 501c3, provides support to ensure continued engagement in the program through donor funded support.

Describe screening to identify criminal risk factors.

The Risk and Needs Triage (RANT) Assessment is an evidence-based tool which yields an immediate and easily understandable report that classifies offenders into one of four risk/needs quadrants, each with different implications for selecting suitable correctional decisions by judges, probation and parole officers, attorneys, and other decision-makers. The Risk and Needs Triage (RANT) Assessment is administered by the Huntsman Mental Health Institute – Park City case managers by order of the court. The 19-item instrument is completed in less than fifteen minutes, and reports enable real-time placement. This assessment tool is used most often to identify prospective Summit County Drug Court Participants (high risk /high need). According to the Risk and Needs Triage (RANT) Assessment, individuals who score high risk/high need are best suited for intensive supervision and clinical services. Those scoring low risk/high need may be best suited for a lower level of criminal justice supervision but more intensive clinical services. A high-risk/low-need score may require more intensive supervision and less intensive clinical services. A low risk/low need score may be best suited to less intensive supervision and less intensive clinical prevention-based intervention. Risk and Needs Triage (RANT) Assessment risk/need domains measured include the age of onset of criminal activity and substance use, deviant peer affiliations, prior failure in drug/alcohol rehabilitation and diversion programs, prior felony or serious misdemeanors, unstable living arrangements, unemployment, physical addiction to drugs/alcohol, and chronic medical and mental health conditions.

Identify the continuum of services for individuals involved in the justice system. Identify strategies used with low risk offenders. Identify strategies used with high risk offenders to reduce criminogenic risk factors.

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

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

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

Recovery support services, Peer Support Specialists (PSSs), and case managers aim to reduce criminal risk factors and recidivism by supporting clients in meaningful recovery

engagement. Recovery support services are provided to help clients remove barriers to their recovery by connecting them with individually engaging recovery activities, vocational support, stable housing search, and accessing possible assistance programs. Recovery support services also focuses on keeping clients engaged in recovery through outreach of clients deemed high-risk and follow-up contact with clients who successfully complete treatment

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

The new Criminal Justice Coordinating Committee has begun development of a strategic plan focused on providing improvements to individuals involved in the criminal justice system. Areas of focus include housing, pretrial services, services for Spanish-speaking individuals, youth services for justice involved, aftercare, and indigent defense. A strategic plan outlining these objectives and steps is currently being developed.

Identify coalitions, planning groups or councils (or other efforts) at the county level working to improve coordination and outcomes for adults involved in the justice system.

In addition to the Community Justice Reinvestment Initiative Committee [and the Criminal Justice Coordinating Committee](#), the Summit County Mental Wellness Alliance and Summit County Behavioral Health Division host a community Law Enforcement and Judicial Affairs Coalition comprised of key stakeholders representing the Behavioral Health Division, Public Defenders, County Attorney's Office, Summit County Sheriff's Department, Park City Police Department, Summit County Council, Park City Council, Summit County Recovery Foundation, Huntsman Mental Health Institute – Park City, and University of Utah Health Plans.

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

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

Describe how you measure or determine success of these programs or services? Provide data and outcomes used to evaluate Justice Services. Please identify and define measures and benchmarks you are working to achieve

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

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

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

See Form A

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

See Form A

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

See Form A

Describe your plan for coordination with Local Health Departments and local school districts to identify roles and support implementation of a community postvention plan in alignment with the state Community Postvention Toolkit.

See Form A

For Local Authorities participating in the Garrett Lee Smith State Youth Suicide Prevention and Early Intervention Grant Program summarize your implementation plans for implementing skill based programming, gatekeeper training, community or school based screening activities, and crisis follow up services after inpatient or emergency department visits. (note: this can be done in the box below, or by linking/attaching your most current report).

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

See Form A

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.

See Form A

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

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

See Form A