

North Dakota

UNIFORM APPLICATION

FY 2023 Mental Health Block Grant Report

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 03/31/2022 - Expires 03/31/2025
(generated on 12/01/2022 11.40.15 AM)

Center for Mental Health Services
Division of State and Community Systems Development

A. State Information

State Information

State DUNS Number

Number GSKXYGKGX6A4
Expiration Date 2/23/2023 12:00:00 AM

I. State Agency to be the Grantee for the Block Grant

Agency Name North Dakota Department of Health and Human Services
Organizational Unit Behavioral Health Division
Mailing Address 600 E Boulevard Ave
City Bismarck
Zip Code 58505

II. Contact Person for the Grantee of the Block Grant

First Name Pamela
Last Name Sagness
Agency Name ND Dept. of Health and Human Services - Behavioral Health Division
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III. State Expenditure Period (Most recent State expenditure period that is closed out)

From 7/1/2021
To 6/30/2022

IV. Date Submitted

NOTE: This field will be automatically populated when the application is submitted.

Submission Date 12/1/2022 11:39:58 AM
Revision Date 12/1/2022 11:40:04 AM

V. Contact Person Responsible for Report Submission

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Footnotes:

B. Implementation Report

MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1
Priority Area: Prevention and Early Intervention
Priority Type: SAP
Population(s): PP

Goal of the priority area:

Decrease the harms associated with substance use and abuse and suicide in North Dakota.

Objective:

Decrease adult binge drinking, underage drinking and suicide.

Strategies to attain the goal:

Fund North Dakota communities to follow the Strategic Prevention Framework (SPF) model and implement evidence-based strategies; provide support for ND communities to follow the SPF model and implement evidence-based strategies.

Edit Strategies to attain the objective here:
(if needed)

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Increase availability of early intervention services for individuals with a marijuana related offense
Baseline Measurement: Increase the number of instructors for marijuana education
First-year target/outcome measurement: Develop a certification of evidence-based marijuana education providers
Second-year target/outcome measurement: Have at least 1 certified provider in each of the 8 regions
New Second-year target/outcome measurement(if needed):

Data Source:

ND Administrative Code, BHD

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

COVID-19 impacted the capacity to achieve this first-year target.

How first year target was achieved (optional):

Indicator #:

2

Indicator:

Increase the infrastructure of the substance abuse primary prevention workforce in the state

Baseline Measurement:

Number of individuals who complete a substance abuse prevention training and individuals who participate in a substance abuse prevention internship

First-year target/outcome measurement:

Offer quarterly SAP trainings for new and existing prevention specialists

Second-year target/outcome measurement:

Develop a stipend program for public health units to offer substance abuse prevention internships

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, Contract management

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Quarterly training meetings occurred virtually for SAP grantees.

Indicator #:

3

Indicator:

Decreased past month binge drinking rates among adults

Baseline Measurement:

Ages 18-25: 48.54%. Ages 26+: 31.19% (2017-2018 NSDUH)

First-year target/outcome measurement:

Increase statewide media efforts with the Speak Volumes media campaign from 57,828,000 impressions to 65,000,000 impressions.

Second-year target/outcome measurement:

2% decrease for ages 18-25 and 1% decrease for ages 26+

New Second-year target/outcome measurement(if needed):

Data Source:

Media evaluation (reach) will be utilized for the number of impressions.
The National Survey on Drug Use and Health (NSDUH) will be utilized to monitor adult consumption rates.

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

Total volume delivered including event displays for Speak Volume's campaign: 10.5 million impressions

How first year target was achieved (optional):

Indicator #:

4

Indicator:

Decreased past month alcohol use among ND high school students

Baseline Measurement:

27.6% of ND high school students reported alcohol use in the past 30 days (2019 YRBS)

First-year target/outcome measurement:

Increases the number of funded communities who implement evidence-based prevention efforts targeting underage drinking from 14 in 2021 to 20 in 2022.

Second-year target/outcome measurement:

A 2% decrease in past 30 day alcohol use among ND high school students.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division contract management and technical assistance tracking.
North Dakota Youth Risk Behavior Survey (YRBS)

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

As of October 2022, 29 communities are in contract.

Indicator #:

5

Indicator: Increase community-level implementation of suicide prevention

Baseline Measurement: Zero funding opportunities have been provided in the suicide prevention areas of screening/assessment, training for providers, and policy implementation/change.

First-year target/outcome measurement: 4 or more organizations have implemented, revised, or initiated suicide specific components of prevention in the following areas: screening/assessment, policy, and training for providers.

Second-year target/outcome measurement: The funded organizations serve as pilot projects and a follow-up evaluation will be done to serve as a foundation for further funding.

New Second-year target/outcome measurement(if needed):

Data Source:

Organizations awarded funding during the Suicide Prevention Grant program, self-reported.

New Data Source(if needed):

Description of Data:

Self-reported by organizations: qualitative and quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Self-reported data, not the same strategy will be implemented so they are hard to compare, evaluation and review will be post-implementation of proposed strategy.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

BHD entered into 6 contracts with entities to implement suicide prevention initiatives

Indicator #: 6

Indicator: Increase access to early serious mental illness services

Baseline Measurement: State will implement two FEP programs located in regional Human Service Centers.

First-year target/outcome measurement: State will provide FEP services to 10 individuals

Second-year target/outcome measurement: State will increase FEP services by 50%.

New Second-year target/outcome measurement(if needed):

Data Source:

Data will include individuals who are eligible and accepted to receive services through the ND FEP programs.

New Data Source(if needed):

Description of Data:

Data will include # of individuals who have been screened for FEP services, # of adolescents served through the programs and # of adults served through the programs

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

Undetermined at this time.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

State provided services.

Priority #: 2
Priority Area: Community-Based Services
Priority Type: SAT, MHS
Population(s): SMI, SED, PWWDC, TB

Goal of the priority area:

Comprehensive and accessible community services available statewide to individuals with a behavioral health diagnosis.

Objective:

Support the development of community-based services across the state.

Strategies to attain the goal:

Increase services through peer support, permanent supportive housing, and education and behavioral health collaborations. Also develop and implement a mental health registry.

**Edit Strategies to attain the objective here:
(if needed)**

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Expand peer support services
Baseline Measurement: There is no specific training available in North Dakota for family peer support and culturally relevant peer support services
First-year target/outcome measurement: Determine specific training modules for family peer support and culturally relevant peer support
Second-year target/outcome measurement: Deliver peer support training tracks specific to culturally relevant peer support services and family peer support services.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division , Contract Management

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

State is re-issuing a RFP for family peer support.

How first year target was achieved (optional):

Indicator #: 2

Indicator: Increase implementation of best practices in permanent supportive housing.

Baseline Measurement: Limited permanent supportive housing providers implementing behavioral health best practices.

First-year target/outcome measurement: Develop a methodology to distribute funding to qualified entities which supports behavioral health best practices and utilizes 3rd party payers.

Second-year target/outcome measurement: Distribution of funding used by permanent supportive housing providers to implement behavioral health best practices.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division , Contract Management

New Data Source(if needed):

Description of Data:

Quantitative and Qualitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The State developed a methodology to distribute funding to qualified entities and is currently in contract with four providers.

Indicator #: 3

Indicator: Increase communication of mental health services.

Baseline Measurement: No mental health registry exists in the state.

First-year target/outcome measurement: Secure procurement for vendor.

Second-year target/outcome measurement: Launch of mental health registry.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, contract management

New Data Source(if needed):

Description of Data:

qualitative and quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues.

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Mental Health Registry was launched October 2022.

Indicator #:

4

Indicator:

Increase education and behavioral health collaboration.

Baseline Measurement:

Contract awarded to Behavioral Health in Education: Resources and Opportunities (B-HERO) Technical Assistance Center.

First-year target/outcome measurement:

Provide monthly behavioral health/suicide prevention resources and technical assistance to Behavioral Health Resource Coordinators in each ND school.

Second-year target/outcome measurement:

Implementation of a virtual simulation and learning platform for schools to support student mental health and well-being.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, Contract Management

New Data Source(if needed):

Description of Data:

Quantitative and Qualitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Monthly resources are provided to all behavioral health resource coordinators in the state.

Priority #: 3
Priority Area: Person-Centered Practice
Priority Type: SAT, MHS
Population(s): SMI, SED, PWWDC, ESMI, PWID, TB

Goal of the priority area:

Ensure behavioral health services provided across the state are person-centered and culturally appropriate.

Objective:

Increase implementation of person-centered strategies and efforts.

Strategies to attain the goal:

Implement services for specific populations and develop policies and procedures across the Department of Human Services to support person-centered practices.

Edit Strategies to attain the objective here:
(if needed)

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Increase person-centered implementation in the Department of Human Services program delivery.
Baseline Measurement: Currently, there is not a mechanism to measure service user's experiences.
First-year target/outcome measurement: Participate in TA focused on measuring person-centered thinking, planning and practices at person-level
Second-year target/outcome measurement: Compile current measures that reflect person-centered practices; convene service users and family groups to identify a definition for person-centered thinking planning, and practice; convene service users and family groups to understand outcomes and importance and how to measure PCP experiences

New Second-year target/outcome measurement (if needed):

Data Source:

Behavioral Health Division, contract management; creation of TA plan and documentation of implementation

New Data Source (if needed):

Description of Data:

qualitative and quantitative

New Description of Data: (if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved *(if not achieved, explain why)*

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Training was provided.

Priority #: 4

Priority Area: Increase Access to Targeted Services

Priority Type: SAT

Population(s): PWWDC, TB

Goal of the priority area:

Enhance access to targeted behavioral health services throughout the state.

Objective:

Increase access to specific services such as medication assisted treatment, services for pregnant and parenting women, rural services and withdrawal management.

Strategies to attain the goal:

Implement efforts to increase evidence-based practices for women and women with dependent children, expand residential SUD services in rural areas, expand withdrawal management and medication assisted treatment.

Edit Strategies to attain the objective here:
(if needed)

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Increase the access to medication assisted treatment for individuals across the state.

Baseline Measurement: Establish additional programs for MAT services in the State were individuals do not have access or sufficient access to service

First-year target/outcome measurement: Establish at least one medication unit or new OTP in the state.

Second-year target/outcome measurement: Establish a client base of at least 50 enrolled patients at the medication unit or OTP

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, Central Registry

New Data Source(if needed):

Description of Data:

Quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Grand Forks OTP opened summer 2022.

Indicator #: 2

Indicator: Increased implementation of evidence-based practices among behavioral health and healthcare providers serving pregnant women and women with dependent children.

Baseline Measurement: No current residential treatment program specific for pregnant women and women with dependent children.

First-year target/outcome measurement: Conduct market research to potential vendors to identify barriers regarding providing residential addiction treatment programming for pregnant women and women with dependent children. Re-issue a request for proposals and implement a residential program for pregnant women and women with dependent children.

Second-year target/outcome measurement: Serve at least 25 pregnant women and women with dependent children in a residential program.

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, contract management

New Data Source(if needed):

Description of Data:

quantitative and qualitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issue

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Market research was completed.

Indicator #: 3

Indicator: Increase implementation of withdrawal management best practices

Baseline Measurement: Limited withdrawal management service systems in communities in the state.

First-year target/outcome measurement: Identify communities needing assistance with development of withdrawal management strategic plans and withdrawal management services.

Second-year target/outcome measurement: Provide communities with training & technical assistance in developing withdrawal

New Second-year target/outcome measurement(if needed):

Data Source:

Behavioral Health Division, contract management, training & technical assistance documentation

New Data Source(if needed):

Description of Data:

quantitative

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

No issues

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: Achieved Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

The State is working with the Barnes County community on withdrawal management.

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 3 - Set-aside for Children's Mental Health Services

Reporting Period Start Date: 7/1/2021 Reporting Period End Date: 6/30/2022

Statewide Expenditures for Children's Mental Health Services			
Actual SFY 1994	Actual SFY 2021	Estimated/Actual SFY 2022	Expense Type
\$561,619	\$2,344,261	\$992,777	<input checked="" type="radio"/> Actual <input type="radio"/> Estimated

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

States and jurisdictions are required not to spend less than the amount expended in FY 1994.

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Footnotes:

C. State Agency Expenditure Reports

MHBG Table 6 - Maintenance of Effort for State Expenditures on Mental Health Services

Period (A)	Expenditures (B)	B1 (2020) + B2 (2021) 2 (C)
SFY 2020 (1)	\$40,620,341	
SFY 2021 (2)	\$51,409,979	\$46,015,160
SFY 2022 (3)	\$59,255,711	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2020	Yes	<u> X </u>	No	_____
SFY 2021	Yes	<u> X </u>	No	_____
SFY 2022	Yes	<u> X </u>	No	_____

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

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