## Iowa's Behavioral Health Service System Statewide Plan 2025-2027

Strategies and Tactics - Fall 2024 DRAFT

The following document is a portion of what will be Iowa's Behavioral Health Service System Statewide Plan and consists of a draft of the plan's strategies and tactics. Revisions to the strategies and tactics may occur pending feedback.



## System Operations and Infrastructure

#### STRATEGY 1:

UTILIZE TIMELY AND SUFFICIENT, FOUNDATIONAL DATA TO GUIDE BEHAVIORAL HEALTH PLANNING AND DECISION MAKING AT THE STATE AND LOCAL LEVEL.

Tactics	Responsible Entity
<b>Tactic 1.1</b> : Collect, access, analyze, interpret, and use data from a variety of sources that fully describe behavioral health needs statewide, of districts, and of communities and the factors that influence behavioral health.	HHS BH-ASOs
<b>Tactic 1.2</b> : Assess and analyze disparities and inequities in the distribution of disease and social determinants of health, that contribute to higher health risks and poorer behavioral health outcomes.	HHS BH-ASOs
<ul> <li>Tactic 1.3: Identify behavioral health priorities.</li> <li>Conduct and participate in the assessment of state, district, and local community needs.</li> <li>Participate in the State Health Assessment (Healthy lowans) process.</li> <li>Conduct district level assessments.</li> <li>Participate in local assessment activities.</li> </ul>	HHS BH-ASOs Local Providers
<b>Tactic 1.4</b> : Participate in or support surveillance systems to rapidly detect emerging behavioral health issues and threats.	HHS BH-ASOs
<b>Tactic 1.5</b> : Work with state, district and community partners to collect, report, and use behavioral health data that is relevant to districts and communities experiencing health inequities.	HHS BH-ASOs Local Providers

#### STRATEGY 2: CREATE, SUPPORT, AND IMPLEMENT PLANS TO DIRECT BEHAVIORAL HEALTH EFFORTS.

Tactics	Responsible Entity
Tactic 2.1: Develop plans that guide behavioral health activities.	HHS
<ul> <li>Use assessment data and findings to inform plan development.</li> </ul>	BH-ASOs
<ul> <li>Develop behavioral health service system plans that detail:</li> </ul>	
<ul> <li>System strategies and tactics.</li> </ul>	
<ul> <li>HHS tactics and activities to achieve system level strategies and tactics.</li> </ul>	
<ul> <li>District level tactics and activities to achieve system</li> </ul>	
level strategies and tactics.	
<ul> <li>Develop district plans that identify district</li> </ul>	
level activities to meet the unique needs of	
the district.	



<ul> <li>Participate in the State Health Improvement Plan (Healthy lowans) process.</li> <li>Participate in the development of local plans         <ul> <li>Work across partners and with the community to develop local health improvement plans.</li> </ul> </li> </ul>	
<b>Tactic 2.2</b> : Collaborate with partners, including multi-sector partners, to systematically implement behavioral health plans and activities.	HHS BH-ASOs Local Providers

## STRATEGY 3: CREATE AND IMPLEMENT POLICIES AND PROTOCOLS THAT IMPACT BEHAVIORAL HEALTH.

Tactics	Responsible Entity
Tactic 3.1: Develop policies and protocols that guide the practice of behavioral health.  • Use data to inform policy development. • Develop administrative rules, policies, protocols, and/or procedures for behavioral health activities and services to detail:	HHS BH-ASOs
<b>Tactic 3.2</b> : Implement federal regulations and state laws, administrative rules, polices, protocols, and procedures.	HHS BH-ASOs Local Providers



STRATEGY 4: USE DATA, COMMUNITY VOICES, AND EVIDENCE-BASED STRATEGIES TO CREATE MEANINGFUL SOLUTIONS FOR BEHAVIORAL HEALTH INEQUITIES.

Tactics	Responsible Entity
Tactic 4.1: Strategically address the social and structural	HHS
determinants of health, that impact behavioral health, through	BH-ASOs
policy, programs, and services.	Local Providers
Tactic 4.2: Work collaboratively with partners to build support	HHS
for and foster a shared understanding of the critical importance	BH-ASOs
of equity to achieve behavioral health outcomes.	Local Providers
Tactic 4.3: Develop and support staff to address equity.	HHS
	BH-ASOs
Tactic 4.4: Create a shared understanding of what creates	HHS
health including structural and systemic factors that produce and	BH-ASOs
reproduce inequities.	Local Providers
Tactic 4.5: Create accountability structures and internal and	HHS
external equity-related metrics to measure the equity impact of	BH-ASOs
BHSS efforts and performance.	

# STRATEGY 5: MANAGE FINANCIAL, HUMAN, AND TECHNOLOGY RESOURCES NECESSARY TO PROVIDE BEHAVIORAL HEALTH ACTIVITIES AND SERVICES STATEWIDE.

Tactics	Responsible Entity
<b>Tactic 5.1</b> : Secure sustainable funding to support the full continuum of behavioral health activities and services.	HHS BH-ASOs Local Providers
<ul> <li>Tactic 5.2: Administer state and federal funds to deliver behavioral health activities and services.</li> <li>Develop comprehensive funding opportunities that include both targeted and flexible funds.</li> <li>Establish and implement budgeting, auditing, and billing procedures in compliance with federal and state standards</li> </ul>	HHS BH-ASOs
and policies.  Tactic 5.3: Ensure that appropriate, needed resources are allocated equitably across the Behavioral Health Service System.	HHS BH-ASOs
Tactic 5.4: Utilize robust information technology services that are current and meet privacy and security standards.  Closed-loop referral Central data repository	HHS BH-ASOs Local Providers



<b>Tactic 5.5</b> : Deploy evidence-based workforce development practices to build, enhance, and maintain a skilled and	HHS BH-ASOs
compassionate behavioral health workforce statewide.	

STRATEGY 6: MONITOR AND EVALUATE THE EFFECTIVENESS OF THE BEHAVIORAL HEALTH SERVICE SYSTEM.

Tactics	Responsible Entity
<b>Tactic 6.1</b> : Ensure HHS, BH-ASO, and provider compliance with federal regulations and state code, rules, policies, and procedures.	HHS BH-ASOs
<ul> <li>Conduct monitoring activities         <ul> <li>Ensure proficient use of evidence-based practices and strategies.</li> <li>Use specific fidelity monitoring processes and tools.</li> <li>Assure the full continuum of Behavioral Health services are provided statewide.</li> <li>Hold providers accountable for quality services</li> </ul> </li> <li>Report monitoring findings.</li> <li>Use findings to make improvements to policies and procedures, streamline processes, and reduce administrative burden.</li> </ul>	
<ul> <li>Tactic 6.2: Conduct performance management and continuous quality improvement activities.</li> <li>Identify and monitor measures to ensure the performance of behavioral health services</li> <li>Provide multiple pathways for feedback from individuals accessing the behavioral health system         <ul> <li>Utilize feedback via routine quality improvement activities.</li> <li>Offer client satisfaction surveys.</li> <li>Develop a standardized process for the collection of feedback directly from those that utilize services.</li> </ul> </li> <li>Identify and implement improvement activities.</li> </ul>	HHS BH-ASOs Local Providers
<ul> <li>Tactic 6.3: Conduct system-level evaluation activities.</li> <li>Identify performance measures to monitor the performance of the BHSS.</li> <li>Monitor performance measures.</li> <li>Report and share monitoring findings.</li> <li>Use findings to make improvements to the BHSS.</li> </ul>	HHS BH-ASOs



### Behavioral Health Continuum

### Prevention and Education

#### STRATEGY 1:

ADVANCE AND SUPPORT AN INTEGRATED SYSTEM-WIDE APPROACH TO BEHAVIORAL HEALTH PROMOTION AND PREVENTION.

Tactics	Responsible Entity
Tactic 1.1: Identify areas of emphasis to prevent behavioral health problems and promote positive mental health and emotional wellbeing across the lifespan including the identifications of opportunities in universal, selective and indicated prevention.	HHS BH-ASOs
indicated prevention.  Tactic 1.2: Develop and implement strategic initiatives and proactive activities and interventions to prevent behavioral health problems and promote behavioral health and wellness.  Information dissemination (to increase knowledge and change attitudes).  Group-level education (to teach participants about skills that promote behavioral health and wellness)  Develop guidance for the use of evidence-based and evidence informed practices and interventions and emerging practices that address risk factors and protective factors.  Community-based engagement  Develop guidance for the use of evidence-based and evidence informed practices and interventions and emerging practices for community engagement including peer lead and youth lead engagement opportunities.  Environmental policies  Develop guidance for the use of evidence-based and evidence informed practices and interventions and emerging practices that address risk factors and protective factors.  Develop and disseminate example environmental policies to reduce risk factors and increase protective factors.  Broad social drivers of behavioral health problems  Develop and disseminate example social policies to reduce risk factors and increase protective factors.	HHS BH-ASOs Local Providers
<ul> <li>interventions statewide.</li> <li>Provide technical assistance to ASOs and promotion and prevention providers.</li> </ul>	



<ul> <li>Tactic 1.3: Identify, expand, and strengthen collaborative opportunities with behavioral health partners.</li> <li>Strengthen and build partnerships with associations, schools, community organizations, faith-based groups, and other stakeholders to enhance behavioral health prevention and promotion efforts and support results-based solutions.         <ul> <li>Lead or participate in coalitions and workgroups to strengthen and promote prevention and promotion activities.</li> <li>Develop and nurture public/private partnerships to identify innovative solutions and expand access to behavioral health prevention interventions.</li> <li>Organize and/or actively participate in community engagement opportunities that increase positive</li> </ul> </li> </ul>	HHS BH-ASOs Local Providers

#### STRATEGY 2:

community.

DEVELOP AND IMPLEMENT A SYSTEM-WIDE COMMUNICATION PLAN TO MAKE BEHAVIORAL HEALTH VISIBLE, PREVENT BEHAVIORAL HEALTH CONDITIONS, PROMOTE BEHAVIORAL HEALTH SERVICES, AND REDUCE STIGMA.

Tactics	Responsible Entity
<b>Tactic 2.1</b> : Promote public awareness of behavioral health through the development and deployment of communication strategies, education campaigns, and publicly available resources that are:	HHS BH-ASOs Local Providers
Based on science/evidence-based health communication	
<ul><li>strategies.</li><li>Tailored to a variety of audiences' specific needs.</li></ul>	
<ul> <li>Include resources designed for all stages of the</li> </ul>	
behavioral health continuum.	
<ul> <li>Include targeted outreach for At-Risk Individuals, At-</li> </ul>	
Risk Populations, and early identifiers (e.g. education	
system, juvenile justice, child welfare).	
<ul> <li>Based on national promotion and education campaigns, as available.</li> </ul>	
Contain input from or are created by people with lived	
experience.	
<ul> <li>Incorporate Culturally and Linguistically Appropriate</li> </ul>	
Services (CLAS) standards.	
Widely available and accessible.	
Prevention focused, to include at a minimum:	
Messages about preventing behavioral health	
conditions.  o Messages that promote positive mental health,	
<ul> <li>Messages that promote positive mental health, norms, and emotional wellbeing.</li> </ul>	



- Messages about the signs and symptoms of behavioral health conditions and disorders.
- Messages to increase awareness of early intervention services supports to mitigate the need for crisis services.
- Messages about where lowans should go to access early intervention resources (Your Life Iowa).
- Messages to reduce stigma around behavioral health disorders.
- Treatment focused, to include at a minimum:
  - o Consistent messages to access for care.
  - Messages that make seeking behavioral health care normal, just like any other health care.
  - Messages that assist people in understanding what behavioral health treatment is.
- Recovery focused, to include at a minimum:
  - Messages that help reduce stigma.
  - Messages that promote recovery as the expectation instead of the exception.
  - Messages about the recovery system including messages for professionals who are not associated with the recovery system.
    - Develop messages about how to share information about the system and how professionals can connect with recovery support service providers.
      - Consider rural, urban, micro recovery connections in message development.
- Crisis focused, to include at a minimum:
  - Messages that encourage help-seeking behaviors.
  - Messages about crisis resources.
  - Messages that raise awareness about crisis services.
  - Messages about pathways for accessing crisis services.

**Tactic 2.2**: Leverage Your Life Iowa (YLI) to communicate behavioral health strategies and resources to Iowans.

- Create a centralized repository of resources with an emphasis on prevention and early intervention strategies.
  - Determine early intervention resource gaps, particularly for youth.
    - Conduct an inventory of current resources.
  - o Develop user ready resources, as needed.
- Build and maintain accuracy in the treatment facility locator.
- Explore capabilities for improving treatment access.

**Tactic 2.3**: Develop and deliver educational presentations to increase knowledge and change attitudes about behavioral health.

HHS BH-ASOs Local Partners

HHS BH-ASOs Local Providers



<ul> <li>Tactic 2.4: Develop resources to assist BH-ASOs and local providers with prevention and education activities. Resources include, but are not limited to:</li> <li>Media toolkits.</li> </ul>	HHS BH-ASOs Local Providers
<ul> <li>Communication planning and messaging guides.</li> </ul>	

#### STRATEGY 3:

ESTABLISH THE FOUNDATION FOR AN INTEGRATED, STATEWIDE BEHAVIORAL HEALTH PROMOTION AND COMPREHENSIVE SYSTEM OF PREVENTION FOR MENTAL HEALTH, SUICIDE, AND ADDICTIVE DISORDERS.

Tactics	Responsible Entity
Tactic 3.1: Develop definitions and expectations for the	HHS
behavioral health promotion and prevention system.	
<ul> <li>Tactic 3.2: Create consistency in promotion and prevention planning and the implementation of prevention system activities.</li> <li>Develop and implement a comprehensive behavioral health strategic prevention framework.</li> </ul>	HHS BH-ASOs
<ul> <li>Inventory and assess current prevention approaches.</li> <li>Identify the prevention models that are currently being used.</li> <li>Identify strategies and evidence-based/best practices that are currently being used.</li> <li>Identify current alignment with the State</li> </ul>	
Health Improvement Plan (Healthy Iowans).  o Identify research and evidence-based and evidence informed practices to:  Inform statewide and district planning.	
<ul> <li>Drive decision making.</li> <li>Develop strategic initiatives and proactive activities and interventions.</li> <li>Adopt a health promotion model for the Behavioral</li> </ul>	
Health Service System.  Support implementation of the strategic prevention framework.	
<ul> <li>Develop guidance for BH-ASOs and local providers.</li> </ul>	
<ul> <li>Train BH-ASOs and local providers.</li> <li>Support BH-ASOs and local providers through direct technical assistance.</li> </ul>	
<ul> <li>Evaluate the strategic prevention framework's effectiveness.</li> <li>Collect regular feedback from HHS staff, BH-ASOs,</li> </ul>	
local providers and other stakeholders.	
<ul> <li>Tactic 3.3: Ensure HHS, BH-ASOs, and local providers work collectively to:</li> <li>Develop and follow consistent implementation guidance.</li> </ul>	HHS BH-ASOs
Provide technical assistance as needed.	Local Providers



- Assess promotion and prevention efforts.

  Identify emerging promotion and prevention people.
- Identify emerging promotion and prevention needs to develop and implement results-based solutions.

## STRATEGY 4: SUPPORT AND ENHANCE PROFESSIONAL DEVELOPMENT FOR THE BEHAVIORAL HEALTH PREVENTION WORKFORCE.

Tactics	Responsible Entity
<ul> <li>Tactic 4.1: Ensure HHS, BH-ASOs, and prevention providers have the necessary knowledge and skills to administer and deliver effective behavioral health prevention and education activities and interventions.</li> <li>Identify training needs.</li> <li>Assess workforce knowledge and skills related to behavioral health promotion and prevention.</li> <li>Conduct a Prevention Workforce Survey.</li> <li>Develop a workforce development plan to increase behavioral health knowledge and skills.</li> <li>Identify and address technical assistance needs for BH-ASOs and prevention providers.</li> <li>Promote behavioral health profession apprenticeship programs.</li> </ul>	HHS BH-ASOs
<ul> <li>Tactic 4.2: Support professionalization of the prevention field.</li> <li>Research credentialing for prevention professionals; develop recommendations.</li> <li>Develop and implement a plan for credentialing prevention professionals.</li> </ul>	HHS BH-ASOs
<b>Tactic 4.3</b> : Work with the HHS Prevention and Early Intervention Team to develop HHS employee-focused, prevention science-based training.	HHS

### Early Intervention

#### STRATEGY 1:

ADVANCE AND SUPPORT AN INTEGRATED, STATEWIDE BEHAVIORAL HEALTH EARLY INTERVENTION SYSTEM TO ASSIST INDIVIDUALS, FAMILIES AND COMMUNITIES IN ACCESSING BEHAVIORAL HEALTH INTERVENTIONS AND SERVICES.

Tactics	Responsible Entity
<b>Tactic 1.1</b> : Establish a network of early intervention partners to identify, provide, and coordinate early intervention activities at	ннѕ
the community level.	BH-ASOs
Identify current early intervention partners.	
<ul> <li>Identify current early intervention partners.</li> <li>Identify gaps in districts.</li> </ul>	
Recruit new early intervention partners.	
Establish a network of system navigators.	
Tactic 1.2: Assess, identify, and consistently define early	
intervention, identification, and screening.	HHS
Identify system partners to collaborate in the development	BH-ASOs
of strategies to promote community-based outreach and	Local Partners
education.	
Develop strategies to promote universal screening for	
behavioral health problems.	
Provide training and technical assistance.	
<ul> <li>Actively participate in community engagement opportunities</li> </ul>	
that promote early identification and screening.	
<b>Tactics 1.3</b> : Identify, provide, and coordinate early intervention	HHS
activities.	BH-ASOs
<ul> <li>Coordinate services across sectors to improve service</li> </ul>	Local Partners
delivery.	
<ul> <li>Identify and collectively address emerging behavioral</li> </ul>	
health early intervention needs.	
Conduct syndromic surveillance  Traited 4.4 Line 1997  Traited	
<b>Tactic 1.4</b> : Identify and address health and social outcomes related to behavioral health.	HHS
Identify indicators (ACEs, etc.).	BH-ASOs
	Local Partners
<ul> <li>Develop actionable steps to address social determinants of health and improve behavioral health equity.</li> </ul>	
Disseminate training and provide technical assistance to	
system partners and providers regarding actionable steps	
to effect outcomes.	
Tactic 1.5: Identify, expand, and strengthen collaborative	11110
opportunities with behavioral health partners.	HHS
Build partnerships with associations, schools, community	BH-ASOs Local Partners
organizations, faith-based groups, and other stakeholders	LUCAI FAILIIUIS
to enhance behavioral health early intervention efforts and	
support results-based solutions.	



<ul> <li>Lead or participate in coalitions and workgroups to strengthen and promote early intervention activities.</li> <li>Develop and nurture public/private partnerships to identify innovative solutions and expand access to behavioral health early intervention services.</li> </ul>	
<ul> <li>Tactic 1.6: Build community readiness.</li> <li>Identify community readiness levels for early intervention activities in each district.</li> <li>Support communities at all levels of readiness.         <ul> <li>Develop resources and technical assistance tools.</li> <li>Share resources.</li> <li>Provide technical assistance.</li> </ul> </li> </ul>	HHS BH-ASOs Local Partners

## STRATEGY 2: EXPAND THE BEHAVIORAL HEALTH EARLY INTERVENTION REFERRAL SYSTEM.

Tactics	Responsible Entity
<ul> <li>Tactic 2.1: Develop referral situations and pathways.</li> <li>Identify problems and referrals to services         <ul> <li>Determine when the needs of clients require additional education or intensive services and strategies.</li> <li>Determine client eligibility for referrals to individualized services.</li> </ul> </li> </ul>	HHS BH-ASOs
<ul> <li>Tactic 2.2: Work collaboratively with the Thrive Iowa initiative to ensure Iowans receive the assistance they need.</li> <li>Identify connections between Thrive and early intervention services.</li> <li>Provide Thrive/Science of Hope training.</li> <li>Connect Thrive with behavioral health system navigators, and crisis and early intervention providers to ensure follow up and efficacy of next steps beyond just a referral.</li> </ul>	HHS BH-ASOs Local Partners
<ul> <li>Tactic 2.3: Leverage existing statewide partners to identify and assist individuals, children, and families at risk including:</li> <li>lowa Department of Education</li> <li>HHS Child Protective Services</li> <li>lowa Judicial Districts</li> <li>Aging and Disability Resource Centers</li> <li>lowa Finance Authority (Coordinated Entry)</li> <li>Law Enforcement</li> </ul>	HHS BH-ASOs
Tactic 2.4: Develop and deploy closed-loop referral systems.  ■ Assure coordinated referrals from non-traditional pathways including:  □ Healthcare ■ Hospitals ■ Emergency Departments	HHS BH-ASOs Local Partners



Urgent Care  Driver of Care Providers	
<ul><li>Primary Care Providers</li></ul>	
<ul> <li>Law Enforcement</li> </ul>	
<ul> <li>Schools</li> </ul>	
<ul> <li>Crisis Providers</li> </ul>	
<ul> <li>○ Workplaces</li> </ul>	
o Jails	
<ul> <li>Assure common pathways to diagnosis and referral.</li> </ul>	

# STRATEGY 3: ESTABLISH THE FOUNDATION FOR AN INTEGRATED, STATEWIDE APPROACH TO BEHAVIORAL HEALTH EARLY INTERVENTION ACTIVITIES.

Tactics	Responsible Entity
Tactic 3.1: Explore and develop system connections to	HHS
strengthen the behavioral health service system.	
Develop definitions and expectations for the behavioral	
health early intervention system.	
Develop clear guidance for BH-ASOs, local	
providers, and system partners for early intervention	
services and supports.  o Develop consistent expectations for system	
navigators.	
Tactic 3.2: Review and establish consistent service access	11110
standards that:	HHS
Set expectations for travel times	
<ul> <li>Establishes consistent guidance on access and service</li> </ul>	
delivery	
<ul> <li>Improves understanding of appropriate placement criteria</li> </ul>	
Helps decrease wait times	
Assures priority population requirements are met (federal	
regs)	
Tactic 3.2: Create consistency in early intervention planning and	HHS
service delivery.	BH-ASOs
Utilize early intervention research as well as evidence-	
based and evidence informed practices and policies to drive decision making and planning.	
Develop a comprehensive behavioral health strategic early	
intervention framework for behavioral health.	
Inventory and assess current early intervention	
activities and practices.	
<ul> <li>Identify strategies and evidence-based/best</li> </ul>	
practices that are currently being used.	
<ul> <li>Identify alignment with the State Health</li> </ul>	
Improvement Plan (Healthy Iowans).	
<ul> <li>Support implementation of the early intervention framework.</li> </ul>	
<ul> <li>Develop guidance for system partners.</li> </ul>	
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<ul> <li>Provide technical assistance and support to</li> </ul>	
BH-ASOs and local providers.	
<ul> <li>Develop training to support statewide early</li> </ul>	
intervention partners.	
<ul> <li>Conduct targeted training for BH-ASOs and local</li> </ul>	
providers.	
<ul> <li>Evaluate the early intervention framework's effectiveness.</li> </ul>	
<ul> <li>Collect regular feedback from HHS staff, BH-ASOs,</li> </ul>	
local providers, and other stakeholders.	
Tactic 3.3: Identify, expand, and strengthen pathways for early	HHS
intervention services and supports.	BH-ASOs
<ul> <li>Inventory/map current services and supports.</li> </ul>	
Connect pathways to utilization and outcome data.	Local Partners
<ul> <li>Track and inventory what data are available to help</li> </ul>	
improve decision making.	
Establish access pathways that expand accessibility.	
<ul> <li>Engage with hospitals, ED, Urgent Care, Law</li> </ul>	
Enforcement, Schools (DE), Primary Care Providers,	
Crisis Providers, Workplaces, Jails, and Juvenile	
Justice	
<ul> <li>Promote and offer Mental Health First Aid training,</li> </ul>	
teen Mental Health First Aid and other community-	
focused education.	
<ul> <li>Create and build sustainability for SBIRT (Brief</li> </ul>	
Treatment)	
o Identify and incentivize co-location of ASOs/local providers with other local service organizations (bi-	
directional)	
<ul> <li>Develop resources to increase early intervention partner</li> </ul>	
connections.	
<ul> <li>Explore mechanisms to incentivize and/or pay for early</li> </ul>	
intervention services.	
Tactic 3.4: Ensure HHS, BH-ASOs, and local partners work	
collectively to:	HHS
<ul> <li>Develop and follow consistent implementation guidance.</li> </ul>	BH-ASOs
Provide technical assistance as needed.	Local Partners
Assess early intervention efforts.  Identify emerging early intervention trends to develop and	
Identify emerging early intervention trends to develop and  implement results based adultions.	
implement results-based solutions.	



## STRATEGY 4: SUPPORT AND ENHANCE PROFESSIONAL DEVELOPMENT FOR EARLY INTERVENTION PARTNERS.

Tactics	Responsible Entity
Tactic 4.1: Ensure HHS, BH-ASOs, and early intervention	HHS
partners have the necessary knowledge and skills to deliver	BH-ASOs
effective behavioral health early intervention activities and	
services.	
<ul> <li>Assess current state of knowledge and skillsets related to</li> </ul>	
behavioral health early intervention.	
<ul> <li>Conduct an Early Intervention Partner Survey.</li> </ul>	
<ul> <li>Identify the knowledge and skill needs of early intervention</li> </ul>	
partners.	
Develop a workforce development plan to increase	
behavioral health knowledge and skills.	
<ul><li>Develop trainings for:</li></ul>	
<ul> <li>Onboarding new partners</li> </ul>	
<ul> <li>Topic specific early intervention priorities</li> </ul>	
<ul> <li>Educate partners about when and how to identify</li> </ul>	
early signs and develop and share concrete tools	
and supports to discuss behavioral health wellness	
and behavioral health concerns.	
<ul> <li>Develop and disseminate evidence-based</li> </ul>	
and evidence-informed tools to identify and	
assist persons at risk.	
<ul> <li>Educate partners about referral pathways.</li> </ul>	
<ul> <li>Train providers on how to connect patients to the</li> </ul>	
ASO system by changing knowledge, attitudes, and	
behaviors.	
Develop consistent training for system navigators.	
<ul> <li>Provide technical assistance to early intervention partners.</li> </ul>	

#### Treatment

#### STRATEGY 1: ADVANCE AND SUPPORT A COMPREHENSIVE, STATEWIDE BEHAVIORAL HEALTH TREATMENT SYSTEM.

Tactics	Responsible Entity
<ul> <li>Tactic 1.1: Use current and clinically accepted evidence-based and evidence informed practices and approaches to meet the identified needs of the community.</li> <li>Identify and operationalize relevant practices to meet client needs.</li> <li>Implement support services based on community needs assessment data.</li> <li>Identify linkages to services in addition to treatment (before during and after) through use of system navigation, care coordination, and connection to recovery services and supports.</li> </ul>	HHS BH-ASOs Local Providers
<b>Tactic 1.2</b> : Employ human centered design for services through lowa HHS.	HHS BH-ASOs Local Providers
<ul> <li>Tactic 1.3: Develop and implement recommendations and strategies for youth treatment.</li> <li>Identify treatment gaps for youth and transition-aged youth.</li> <li>Identify and develop awareness for youth and transition-aged youth specific treatment.</li> <li>Develop policy recommendations to address identified youth care continuum gaps.</li> <li>Engage families and partners in validation of recommendations and strategies.</li> </ul>	HHS BH-ASOs Local Providers
Tactic 1.4: Identify and address gaps in the behavioral health care continuum.  Identify treatment gaps for specific populations.  Step down  Day treatment  IOP  AH to inpatient versus residential  Intensive in-home services for children and youth  Identify and develop awareness for population specific treatment  Define and reinforce the need to serve special populations (outreach and health education)  Inventory and assess and subspeciality care lanes  Develop policy recommendations to address identified care continuum gaps.	HHS BH-ASOs Local Providers
<b>Tactic 1.5</b> : Identify, expand, and strengthen collaborative opportunities with behavioral health partners.	HHS BH-ASOs Local Providers



<ul> <li>Build partnerships with associations, schools, community organizations, faith-based groups, and other stakeholders to enhance behavioral health treatment efforts, increase access to care, and support results-based solutions.</li> <li>Lead or participate in coalitions and workgroups to enhance service delivery.</li> <li>Develop and nurture public/private partnerships to identify innovative solutions and expand access to behavioral health treatment services.</li> </ul>	
Tactic 1.6: Promote behavioral health parity	HHS BH-ASOs

## STRATEGY 2: INCREASE ACCESS TO BEHAVIORAL HEALTH TREATMENT SERVICES.

<ul><li>Tactic 2.1: Address costs of treatment and reimbursement.</li><li>Inventory reimbursement mechanisms.</li></ul>	
<ul> <li>Inventory reimbursement mechanisms.</li> <li>Identify reimbursement challenges.</li> <li>Maximize Medicaid and CHIP (financial, last payor, etc.).</li> <li>Establish common coding and consistent allowable cost for treatment.</li> </ul>	
<ul> <li>Tactic 2.2: Expand and support the behavioral health treatment provider network.</li> <li>Simplify licensure/accreditation through regulatory reform.</li> <li>Build a robust peer support workforce.         <ul> <li>Expand the use of peers across the spectrum of treatment services.</li> </ul> </li> <li>Build active connection points across the network of behavioral health safety net providers.</li> <li>Develop technical assistance and continuing education opportunities.</li> <li>Promote the practice of behavioral health services as a valuable and fulfilling career path.</li> <li>Leverage various workforce-related funding streams.</li> </ul>	
<ul> <li>Tactic 2.3: Leverage innovative treatment options to expand access to care (e.g., Telehealth, mobile services, enabling technology).</li> <li>Develop and disseminate informational resources for individuals, families, providers and communities about low barrier, low-cost technology options.</li> <li>Inventory existing options that support improved access to technology in public spaces (e.g., libraries, public buildings) for potential use as a private telehealth access point.</li> <li>Navigate barriers to access at the community level through expanded use of enabling technology and mobile services.</li> </ul>	
HHS	



•	Make seeking behavioral health care normal, just like any other health care.	BH-ASOs Local Providers
•	Assist people in understanding what behavioral health treatment is.	

#### STRATEGY 3:

ESTABLISH THE FOUNDATION FOR AN INTEGRATED, STATEWIDE BEHAVIORAL HEALTH TREATMENT SYSTEM FOR MENTAL HEALTH, AND ADDICTIVE DISORDERS INCLUDING ALCOHOL USE, SUBSTANCE USE, TOBACCO USE, AND PROBLEM GAMBLING.

Tactics	Responsible Entity
<ul> <li>Tactic 3.1: Develop definitions and expectations for the behavioral health treatment system.</li> <li>Define and reinforce the need to serve special populations (outreach and health education).</li> <li>Define system-level roles and responsibilities to enhance collaboration across the treatment system in lowa.</li> <li>Develop roles to coordinate access across sectors and address behavioral health treatment needs.</li> </ul>	HHS
<b>Tactic 3.2</b> : Research tactics such as incentive funding, strengthening of regulatory requirements or tiered reimbursement models to encourage providers to enhance service delivery.	HHS
Tactic 3.3: Ensure HHS, BH-ASOs, and local providers work collectively to:  • Ensure consistency in treatment protocols and procedures across topic areas.  • Develop and follow consistent implementation guidance.  • Ensure fidelity of treatment protocols and procedures.  • Provide technical assistance as needed.  • Build consistent pathways to care.  • Identify emerging treatment trends to develop and implement results-based solutions.	HHS BH-ASOs

#### STRATEGY 4: SUPPORT AND ENHANCE PROFESSIONAL DEVELOPMENT FOR TREATMENT PROVIDERS.

Tactics	Responsible Entity
<ul> <li>Tactic 4.1: Ensure providers have the necessary skills to deliver effective behavioral health treatment services.</li> <li>Provide education on treatment resources to include first contacts for crisis and primary health providers and psychiatrists</li> </ul>	HHS BH-ASOs



<ul> <li>Create a warm hand off guide that both providers</li> </ul>	
referring and those receiving referrals operate by to	
ensure smooth system navigation for people.	
Tactic 4.2: Identify, address and invest in training and technical	HHS
assistance to support enhancing the knowledge and skills of	BH-ASOs
lowa's behavioral health treatment workforce.	



### Recovery

#### STRATEGY 1:

ADVANCE AND SUPPORT A COMPREHENSIVE STATEWIDE SYSTEM OF RECOVERY RELATED TO THE BEHAVIORAL HEALTH NEEDS OF INDIVIDUALS, FAMILIES AND COMMUNITIES.

Tactics	Responsible Entity
Tactic 1.1: Expand and support the behavioral health recovery workforce.  • Develop and deploy workforce recruitment and retention strategies such as training, technical assistance and building professional pathways (e.g., certifications to support peers, community health workers, system navigators and others).  • Develop and nurture career pathways within the recovery workforce.  Tactic 1.2: Improve statewide awareness and visibility of recovery support services.  • Map current recovery support services and funding mechanisms.  • Create a connections map or resource locator that functions as a tool for connecting individuals to all available services/resources.  • Leverage Your Life lowa as a trusted resource to share information about recovery services and supports and connect	HHS BH-ASOs  HHS BH-ASOs
<ul> <li>individuals to recovery supports or to system navigation at the local level.</li> <li>Tactic 1.3: Create equitable access to recovery services and supports.</li> <li>Identify applicable populations and link to additional HHS services and supports, as needed.</li> <li>Ensure recovery support services are accessible.</li> <li>Assess current access to recovery services, research recovery service models and make recommendations for local access standards.</li> <li>Install recommended access standard requirements through targeted approaches to funding for BH-ASOs and local providers that ensure consistent access.</li> <li>Incubate new providers of recovery services and supports by assessing training and technical assistance needs and deploying technical assistance and training targeted at addressing knowledge gaps to improve recruitment and retention.</li> </ul>	HHS BH-ASOs Local Providers
<b>Tactic 1.4</b> : Make recovery visible through the promotion of support services and recovery resources (see Prevention and Education strategy #2)	HHS BH-ASOs Local Providers
Tactic 1.5: Deploy environmental strategies related to supporting recovery in Iowa's communities  ■ Develop and disseminate environmental strategies  □ Identify ways to support a recovery-oriented workforce  ■ Assist providers in implementing environmental strategies  Tactic 1.5: Determine how to provide support and the funding for recovery.	HHS BH-ASOs Local Providers
<ul> <li>Tactic 1.6: Determine how to create sustainable funding for recovery</li> <li>Leverage funding opportunities to reimburse expanded peer support activities</li> <li>Inventory what is reimbursable by insurance providers         <ul> <li>Determine barriers</li> </ul> </li> </ul>	HHS BH-ASOs



<ul> <li>Determine changes needed</li> </ul>	
<ul> <li>Identify and secure funding to promote recovery</li> </ul>	
<ul> <li>Tactic 1.7: Identify, expand, and strengthen collaborative opportunities for a unified behavioral health recovery ecosystem promoting safety, resiliency, and health.</li> <li>Build local collaborations to enhance the recovery network.</li> <li>Build partnerships with associations, schools, community organizations, faith-based groups, and other stakeholders to enhance behavioral health recovery efforts and support results-based solutions.         <ul> <li>Lead or participate in coalitions/workgroups to strengthen and promote recovery.</li> <li>Develop and nurture public/private partnerships to identify innovative solutions and expand access to behavioral health recovery services and supports.</li> <li>Identify stable, flexible funding</li> </ul> </li> </ul>	HHS BH-ASOs Local Providers

## STRATEGY 2: ESTABLISH THE FOUNDATION FOR AN INTEGRATED, STATEWIDE BEHAVIORAL HEALTH RECOVERY SYSTEM.

Tactics	Responsible Entity
<b>Tactic 2.1</b> : Adopt SAMHSAs Working Definition of Recovery to guide HHS efforts in expanding pathways to recovery.	HHS
<ul> <li>Tactic 2.2: Develop and implement HHS' Recovery in Action Plan based on SAMHSAs Working Definition of Recovery.</li> <li>Define recovery support services and domains.</li> <li>Conduct an inventory of current efforts.         <ul> <li>Include HHS funded SUD and MH recovery services and their funding streams.</li> <li>Include SUD and MH recovery services funded outside of HHS.</li> </ul> </li> <li>Establish regular HHS staff meetings about addictive disorder and MH activities related to recovery efforts.</li> <li>Identify policies and procedures to guide system staff on implementation of behavioral health recovery work.</li> <li>Build internal capacity to provide the level of technical assistance and training needed to BH-ASOs.</li> </ul>	HHS
<ul> <li>Tactic 2.3: Ensure HHS, BH-ASOs, and local providers work collectively to:         <ul> <li>Develop and follow consistent implementation guidance.</li> <li>Provide technical assistance as needed.</li> </ul> </li> <li>Assess recovery efforts.</li> <li>Identify emerging recovery needs to develop and implement results-based solutions.</li> </ul>	HHS BH-ASOs Local Providers



#### STRATEGY 3: SUPPORT AND ENHANCE PROFESSIONAL DEVELOPMENT FOR RECOVERY PROVIDERS.

Tactics	Responsible Entity
<b>Tactic 3.1</b> : Ensure HHS, BH-ASOs and local partners have the necessary skills to deliver effective behavioral health recovery services based on SAMHSA's Working Definition of Recovery.	HHS BH-ASOs
<ul> <li>Tactic 3.2: Identify and address training and technical assistance needs to support retention of a skilled behavioral health recovery workforce.</li> <li>Reevaluate recovery education for providers (consider using a multi-perspective approach to determine training/education)</li> <li>Certification</li> </ul>	HHS BH-ASOs



### Crisis

#### STRATEGY 1: ADVANCE AND SUPPORT A COMPREHENSIVE, STATEWIDE BEHAVIORAL HEALTH CRISIS SYSTEM.

Tactics	Responsible Entity
<ul> <li>Tactic 1.1: Expand and support the behavioral health crisis network.</li> <li>Build multi-disciplinary teams based on best practices.         <ul> <li>Identify appropriate situations for law enforcement involvement</li> </ul> </li> <li>Build a robust crisis peer workforce.         <ul> <li>Develop capacity for Peer-Operated Respite programs.</li> </ul> </li> <li>Build a robust disaster response behavioral health workforce.</li> </ul>	HHS BH-ASOs Crisis Service Providers
<ul> <li>Tactic 1.2: Identify and maintain a statewide crisis center (e.g., 988) that follows and incorporates best practices.</li> <li>Establish capacity to answer every contact (call, text, chat).</li> <li>Implement consistent call assessment and triage with appropriate clinical oversight.         <ul> <li>Centralized dispatch to mobile response, law enforcement, 911, etc.</li> </ul> </li> <li>Promote crisis resources</li> <li>Educate lowans about crisis services in their communities.</li> </ul>	HHS Crisis Center Staff Crisis Service Providers
<ul> <li>Tactic 1.3: Connect lowans to the services and supports they seek.</li> <li>Utilize the closed-loop referral system</li> <li>Promote crisis resources.</li> <li>Educate lowans about crisis services in their communities.</li> <li>Identify and address crisis needs of diverse populations.</li> </ul>	HHS BH-ASOs Crisis Service Providers
<ul> <li>Tactic 1.4: Implement crisis services across the lifespan with an emphasis on youth and family crisis.</li> <li>Centralize dispatch for mobile response.</li> <li>Coordinate services related to behavioral health crisis care across sectors including law enforcement, hospital systems child welfare, education, justice systems, and community-based organizations.</li> <li>Assure comprehensive post crisis follow up and coordination including connecting individuals to ongoing behavioral health services.</li> </ul>	HHS BH-ASOs Crisis Service Providers
<ul> <li>Tactic 1.5: Identify, expand, and strengthen collaborative opportunities with behavioral health partners.</li> <li>Strengthen partnerships and collaboration between mobile crisis teams, law enforcement co-responders, and emergency responders and behavioral health system partners.</li> <li>Strengthen and support connection to ongoing medical and behavioral health care.         <ul> <li>Establish crisis planning and follow-up care expectations.</li> </ul> </li> <li>Nurture and grow crisis response partnerships with Law Enforcement, Dispatch, and Emergency Medical Services (EMS).</li> </ul>	HHS BH-ASOs Crisis Service Providers



### STRATEGY 2: INCREASE ACCESS TO BEHAVIORAL HEALTH CRISIS SERVICES.

Tactics	Responsible Entity
<b>Tactic 1.1</b> : Standardize bed tracking and referral to crisis receiving and stabilization services.	ннѕ
Make bed tracking information visible.	
<ul> <li>Tactic 1.2: Ensure equitable access to crisis receiving and stabilization services statewide.</li> <li>Establish capacity to accept all referrals and to serve additional behavioral health conditions.</li> <li>Do not require medical clearance prior to admission.</li> </ul>	HHS BH-ASOs Crisis Service Providers
<b>Tactic 1.3</b> : Establish walk-in and first responder drop-off options including development and implementation of no rejection policies.	HHS BH-ASOs Crisis Service Providers

## STRATEGY 3: ESTABLISH THE FOUNDATION FOR AN INTEGRATED, STATEWIDE BEHAVIORAL HEALTH CRISIS SYSTEM.

Tactics	Responsible Entity
<ul> <li>Tactic 3.1: Develop definitions and expectations for the behavioral health crisis system.</li> <li>Develop acceptable standards for lowa's crisis care delivery.</li> </ul>	HHS BH-ASOs
Tactic 3.2: Ensure HHS, BH-ASOs, and local providers work collectively to:  ■ Implement recommendations to improve lowa's Crisis System.  ○ Collaborate with system partners to implement strategies designed to ensure lowans have someone to talk to when in crisis.  ○ Collaborate with system partners to implement strategies designed to ensure people are in place to respond when lowans need emergency care or assistance.  ○ Collaborate with system partners to implement strategies designed to ensure lowans have a place to go when in crisis.	HHS BH-ASOs Crisis Service Providers
Assess crisis response efforts.	
<ul> <li>Identify emerging crisis needs to develop and implement results- based solutions.</li> </ul>	



## STRATEGY 4: SUPPORT AND ENHANCE PROFESSIONAL DEVELOPMENT FOR CRISIS PROVIDERS.

Tactics	Responsible Entity
<ul> <li>Tactic 4.1: Assess district level workforce and crisis training needs to support recruitment and retention:</li> <li>Identify and address deficiencies and barriers</li> <li>Provide training and technical assistance</li> </ul>	HHS BH-ASOs
<ul> <li>Tactic 4.2: Ensure providers have the necessary skills to deliver effective, integrated behavioral health crisis services:</li> <li>Develop and implement a standardized training curriculum for crisis services workers.</li> <li>Bolster training on SUD, co-occurring, special populations including youth and families, problem gambling, tobacco and nicotine use, suicide prevention, harm reduction, recovery needs, Trauma-Informed Care, and EBPs (?).</li> </ul>	HHS BH-ASOs
<b>Tactic 4.3</b> : Assure statewide behavioral health and crisis training for first responders and frontline health workers (CIT, crisis de-escalation, MH First Aid, Trauma-responsive & Strengths-based service planning and provision)	HHS BH-ASOs

