



# Our Path to CCBHC

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# Who We Are

- Plains is a licensed Substance Use Disorder (SUD) provider
- Certified CMHC
- Employ over 160 employees
- Provide services in 13 counties in Northwest Iowa
- Serve over 8,000 clients per year
- Plains awarded their first expansion grant in April 2020
- Plains awarded the CCBHC-IA grant in September 2022



# Services We Provide

- Outpatient mental health evaluations, including a comprehensive health screen
- SUD evaluations
- Therapy and counseling
- Psychiatric services
- Medication management
- Psychological testing
- School-based mental health services
- DCAT
- SUD and co-occurring services
  - Individual and group services
- MAT services
- ACT

# Services We Provide

- Integrated Health Home (IHH) services
- Two drop-in centers with peer support
- Day habilitation
- Outreach and community support services
- Crisis stabilization residential home – Turning Point
- 24/7 mobile crisis response team (MCAT)
- 24/7 crisis line with telehealth capabilities to ERs, Jails for evaluations and crisis intervention
- Onsite pharmacy
- Onsite behavioral health services to Job Corp
- WRAP groups



# CCBHC Implementation

- Hired additional care coordinators
  - Allowed expansion of care coordination beyond IHH clients
- Hired nurse care managers
- Hired peer support specialists
- Increased community partnerships
- Increased SUD and co-occurring services
- Improved accessibility to services in our service area
- Four therapists became ASIST trainers and Plains began providing trainings in communities in our service area
- Increased staff trainings
- Contracted with Patient Ping to help staff monitor for high-risk clients



# CCBHC Implementation

- Open Access Model
- ACT
- MAT
- MHFA, YMHFA
- WRAP groups
- Intensive Psychiatric Rehabilitation through partnership
- Service provider for Veterans



# CCBHC Implementation Challenges

- COVID
  - Transitioning entire agency to work from home
    - Establishing telework and telehealth capabilities
- Shortened implementation time for initial grant
- New EHR – build, adjustments, changes
- Workforce shortages – capacity to meet scheduling needs
- Change management – rapid cycle change
- Rural service area – transportation, service locations
- Financial – underinsured, uninsured
- Buy-in – staff like things the way they are

# CCBHC Benefits

- Increased access to care
- Increased care coordination and follow up
- Improved integrated care
- Improved data collection processes
- Increased community partnerships
- Expanded services
- Improved services for subpopulations in service area
- Improved collaboration
- Relationships with other CCBHCs within Iowa and nationwide





# CCBHC vs CMHC

- Data collection and reporting.
- Integration of care.
- Care coordination being the lynch pin.
- Core services.
- Funding.
- Focus of improving access to care.
- Focus on bridging gaps in care.



# CCBHC – Bringing It All Together

- This has been a journey.
- We have met with many challenges, but we have come a long way from when we started.
- We are thinking in different ways.
- We are learning to adapt to these challenges in way that results in improvements.
- We have made progress and have made a positive impact.
- Our needs assessments say we need to continue to address mental health in our communities.
- No quick fixes.
- Ongoing review and monitoring.





# Thank you

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