



NEW HAMPSHIRE  
**DHHS**  
DEPARTMENT OF  
**HEALTH & HUMAN SERVICES**

# **DHHS Division for Behavioral Health**

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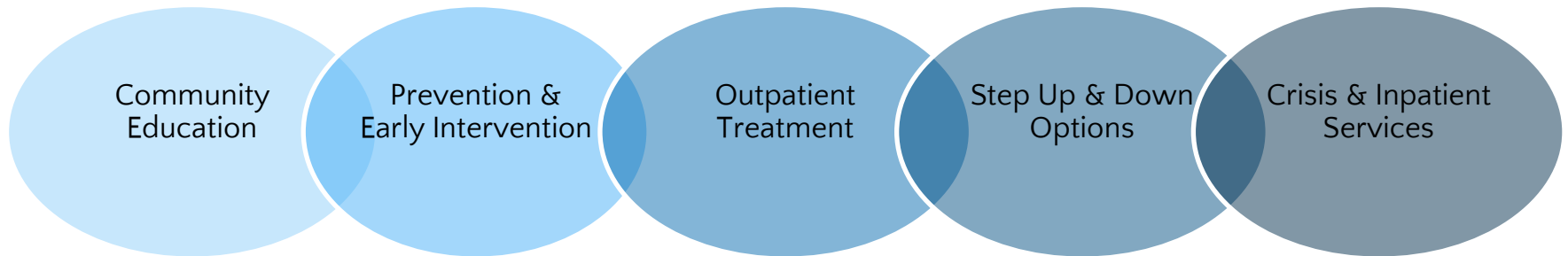
**March 1, 2023**

**Katja Fox, Director**

## Shared Vision

*Envisioning a robust and cohesive system that will respect the dignity and centrality of the whole person; empower people, family, and community; and will reduce stigma while facilitating rapid access to a coordinated, high quality array of localized services and supports.*

# Coordinated Continuum of Care



- Information about resources
- Promoting wellness through awareness & stigma reduction campaigns
- Skill-building screening, assessment, training, etc.
- Universal prevention
- Selective prevention for at-risk groups
- Indicated prevention & early intervention
- Ambulatory healthcare in office and clinic settings
- Assessment & diagnosis
- Consultation
- Treatment
- Rehabilitation
- Recovery from acute mental distress in non-hospital settings
- Divert from ER and hospitalization
- Intermediate step when transitioning out of psychiatric hospitalization
- Support during crisis, acute symptoms when at risk of harm.
- Ranges from community-based in-home supports (e.g. mobile crisis) to longer-term, residential stays in inpatient settings



**DIVISION FOR BEHAVIORAL HEALTH**

**House Finance – Division III**

**BEHAVIORAL HEALTH  
DIRECTOR**

**BUREAU FOR  
CHILDREN'S  
BEHAVIORAL  
HEALTH**

**BUREAU OF  
DRUG  
AND  
ALCOHOL  
SERVICES**

**POLICY  
SECTION**

**BUREAU OF  
MENTAL  
HEALTH  
SERVICES**

**BUREAU OF  
HOMELESS  
SERVICES**

FTE Authorized Positions SFY 2023	Bureau
6	920010-DIV BEHAVIORAL HLTH OPERATIONS
20	920510-BUREAU OF DRUG & ALCOHOL SVCS
9	921010-BUR FOR CHILDRENS BEHAVRL HLTH
14	922010-BUREAU OF MENTAL HEALTH SERVICES
5	423010-HOMELESS & HOUSING
Total: 54	

## KEY ACCOMPLISHMENTS

- Continued Implementation of the 10-Year Mental Health Plan

- Building out the Children's System of Care

- Leveraging funding streams to address the prevention, treatment and recovery of/from substance use disorders

## Bureau of Drug and Alcohol Services

Providing oversight, guidance, training and monitoring for mental health providers statewide to ensure the full continuum of recovery-oriented mental health services to State-eligible adults who experience a mental illness and/or a co-occurring mental illness and substance use disorder(s).

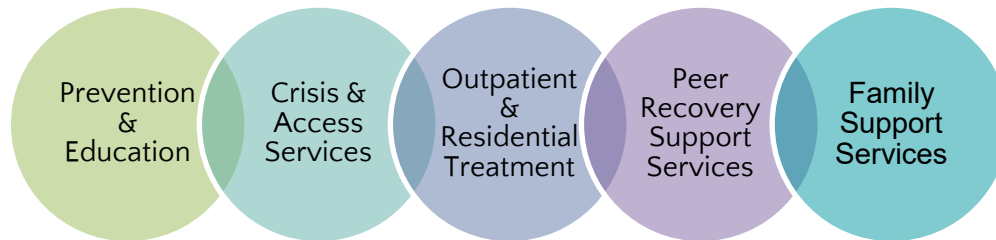
Activity – Accounting Unit	Accounting Unit Title	Budget Book Page #	Budget Briefing Book Page #
9205-2070	Program Operations	1023-1024	4-5
9205-3380	Prevention Services	1024-1025	6-7
9205-3382	Governor Commission Funds	1025-1026	8-11
9205-3384	Clinical Services	1026-1027	12-15
9205-3385	Drug Forfeiture Fund	1028	n/a Under \$1M
9205-7040	State Opioid Response Grant	1029	16-18

# Overview – Bureau of Drug and Alcohol Services (BDAS)

BDAS is New Hampshire's single state substance misuse authority that seeks to join individuals, families and communities in reducing alcohol and other drug problems thereby increasing opportunities for citizens to achieve health and independence.

BDAS provides oversight, guidance, technical assistance, training and monitoring for substance misuse prevention, intervention, treatment, recovery, and impaired driving services statewide to ensure that quality services are comprehensive and evidenced-based.

BDAS seeks to expand the full continuum of substance misuse services to assist all of New Hampshire's citizens in achieving wellness.





# Bureau of Drug and Alcohol Services - Service System

Join individuals, families and communities in reducing alcohol and other drug problems thereby increasing opportunities for citizens to achieve health and independence.



Training, Technical Assistance, Data & Evaluation

**State mandates include:** SUD Treatment: RSA 172, He-A 300, He-W 513; Impaired Driving: RSA 265-A, He-A 500; Recovery Housing: RSA-172-B-2, He-A 305.



# State Opioid Response (SOR) Grant

## Overview

- Beginning in September 2018, States can access Federal SOR funds to develop and provide opioid misuse prevention, treatment, and recovery support services
- Federal goals for SOR funding include the following:
  - Increase the availability of MAT treatment for OUD (Opioid Use Disorder)
  - Reduce opioid-related overdose deaths
  - Improve retention in care, using a chronic care or other innovative evidenced-based model of care
- Funding is subject to a two-year application/approval process (with annual budget approvals)

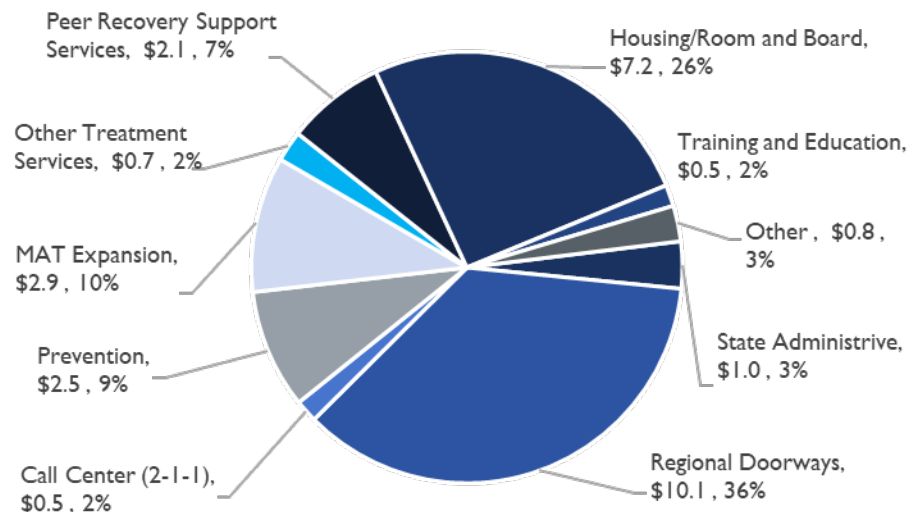


# State Opioid Response (SOR) Grant

## New Hampshire SOR Program

- New Hampshire's SOR grant budget was approximately \$23.0 million during the first two years and increased to \$28.1 million in Years 3 and 4; the federal allotment for Years 5 and 6 is \$28.5 million
- In 2020-2021 \$28.1 million in SOR funds supported:
  - Access to medication-assisted treatment (MAT)
  - Enhanced peer recovery support services
  - Access to residential treatment and recovery housing services
  - Development of evidence-based prevention programs
  - Expand workforce opportunities
  - Provide training and education
- The Doorway program represents approximately one-third of total SOR funding (Doorway budget includes approximately \$1 million for purchase of Naloxone)

New Hampshire Year 3 SOR Grant Budget  
September 30, 2020 – September 29, 2021  
(\$ millions)



**Bureau for Children’s Behavioral Health**

The Bureau for Children’s Behavioral Health is responsible for developing and implementing a comprehensive, integrated, and cost-effective system of care to meet behavioral health the needs of all New Hampshire youth from early prevention and screening to access to acute psychiatric treatment.

Activity – Accounting Unit	Accounting Unit Title	Budget Book Page #	Budget Briefing Book Page #
9210-2052	Children’s Behavioral Health	1030 - 1031	19-22
9210-2053	System of Care – Children’s Services	1031- 1032	23-25

## **Bureau for Children’s Behavioral Health**

### **System of Care Administration & Integration**

- Tier 1 – Prevention & Screening
- Tier 2 - Community Services
- Tier 5 - Acute Care/Crisis Response

### **Intensive Community Resources**

- Tier 3

### **Residential Treatment**

- Tier 4

## KEY ACCOMPLISHMENTS

### **Children’s Behavioral Health Residential Treatment System Transformation:**

- Summer 2021, entered into contracts with residential treatment providers that require adherence to the system of care values, accreditation, training and enhance performance measures.
- Incorporated the Child and Adolescent Needs and Strengths Tool into the residential system
- Created access to residential behavioral health treatment for youth outside of the DCYF/court system
- Launched the Comprehensive Assessment For Treatment (CAT) that provides a conflict free clinical assessment for the need for and level of residential treatment for each youth.

### **Expanded Children’s Intensive Community Based Behavioral Health Services through the Care Management Entities:**

- Fast Forward expanded from 150 youth to 400 youth served at a point in time.
- Launched Transitional Residential Enhanced Care Coordination (TR-ECC) statewide to support youth in residential and psychiatric treatment
- Launched Early Childhood Enhanced Care coordination to support the population ages 0-5 and their caregivers.

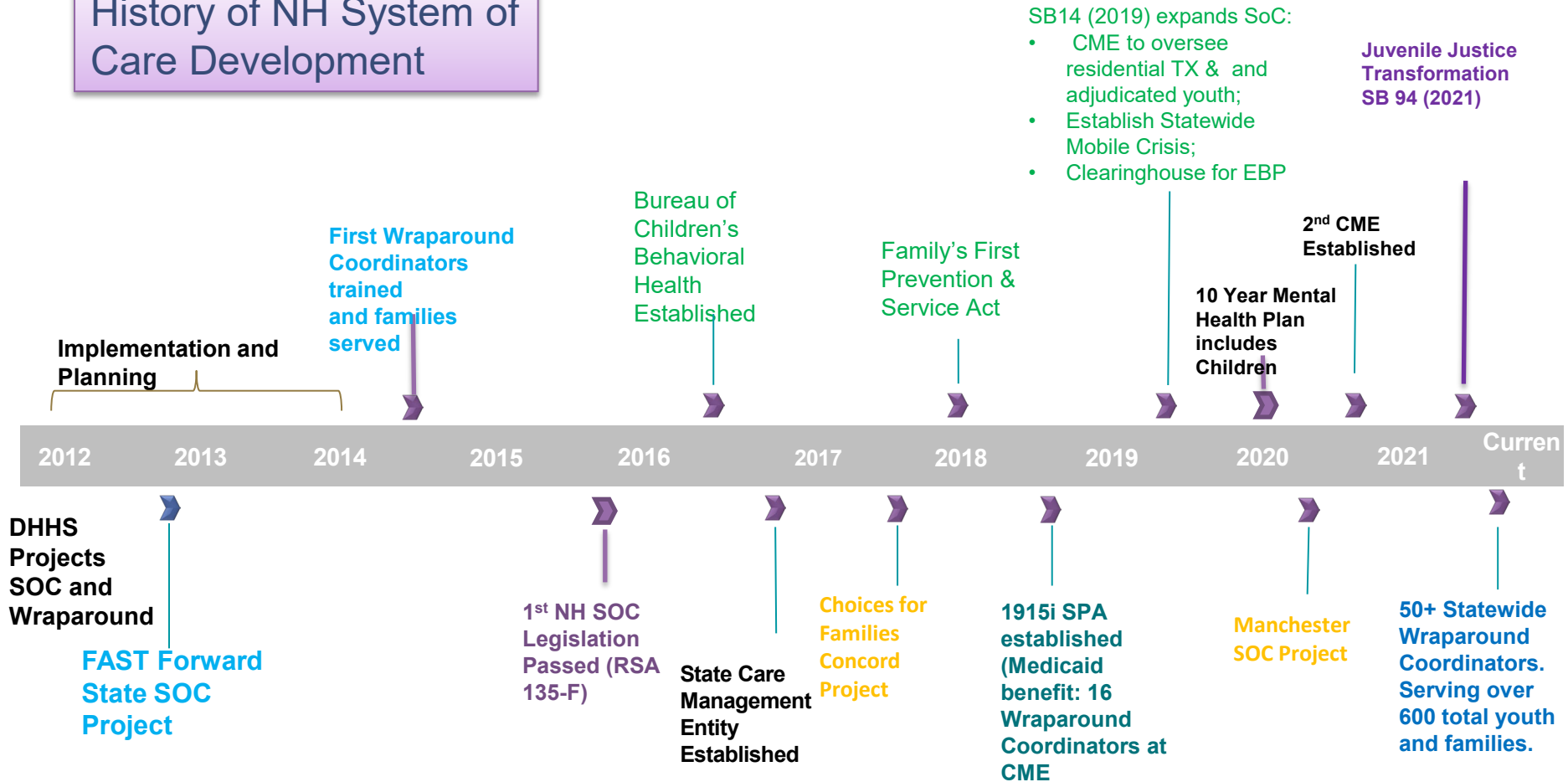
### **Creation of the Children’s Behavioral Health Resource Center Through a Contract with UNH**

- Provides training and technical assistance for providers of evidence based programs
- Conducts system assessments
- Is creating and online resource to assist children, families, providers and other community members in navigate the behavioral health system and scheduled to be fully functional by June 30, 2023.

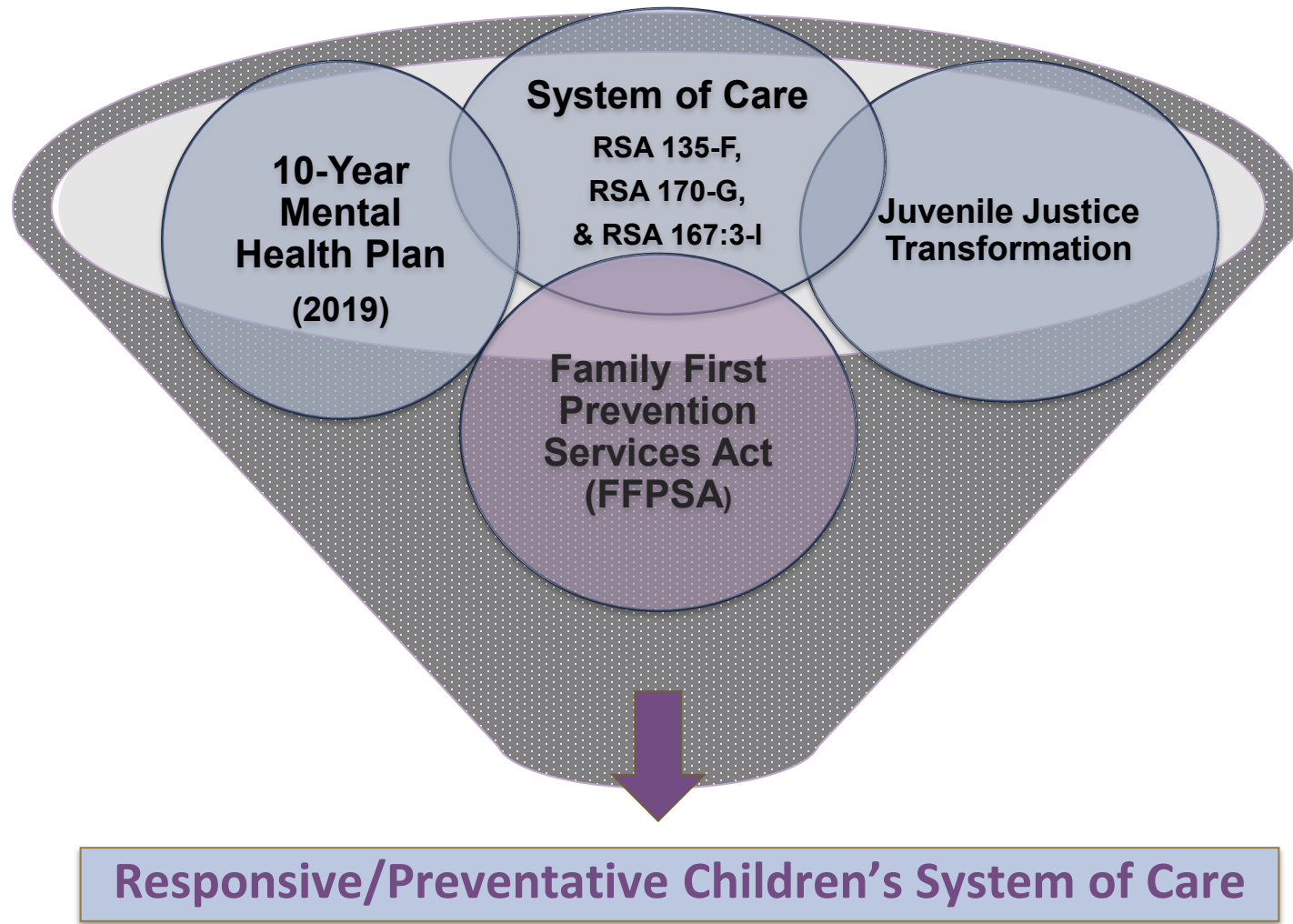
## KEY CHALLENGES: Bureau for Children's Behavioral Health

- Increase in the number of youth experiencing behavioral health needs and an increase in the intensity of their behavioral health needs
- Overall workforce shortages in the area of behavioral health impacting providers at all tiers of the system of care

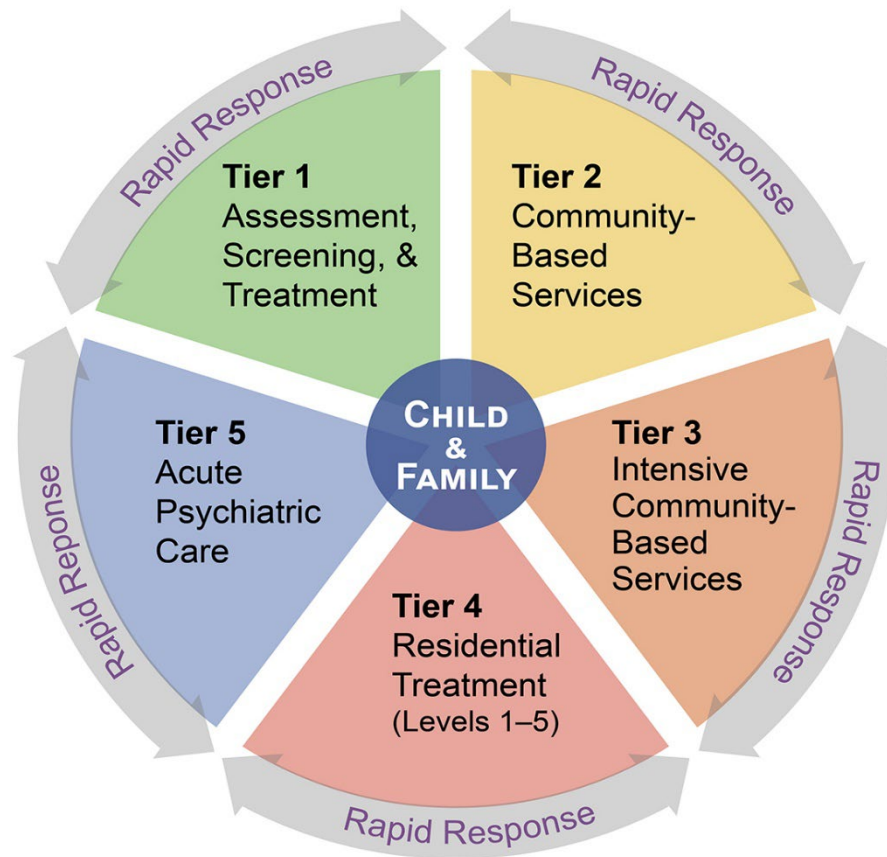
## History of NH System of Care Development





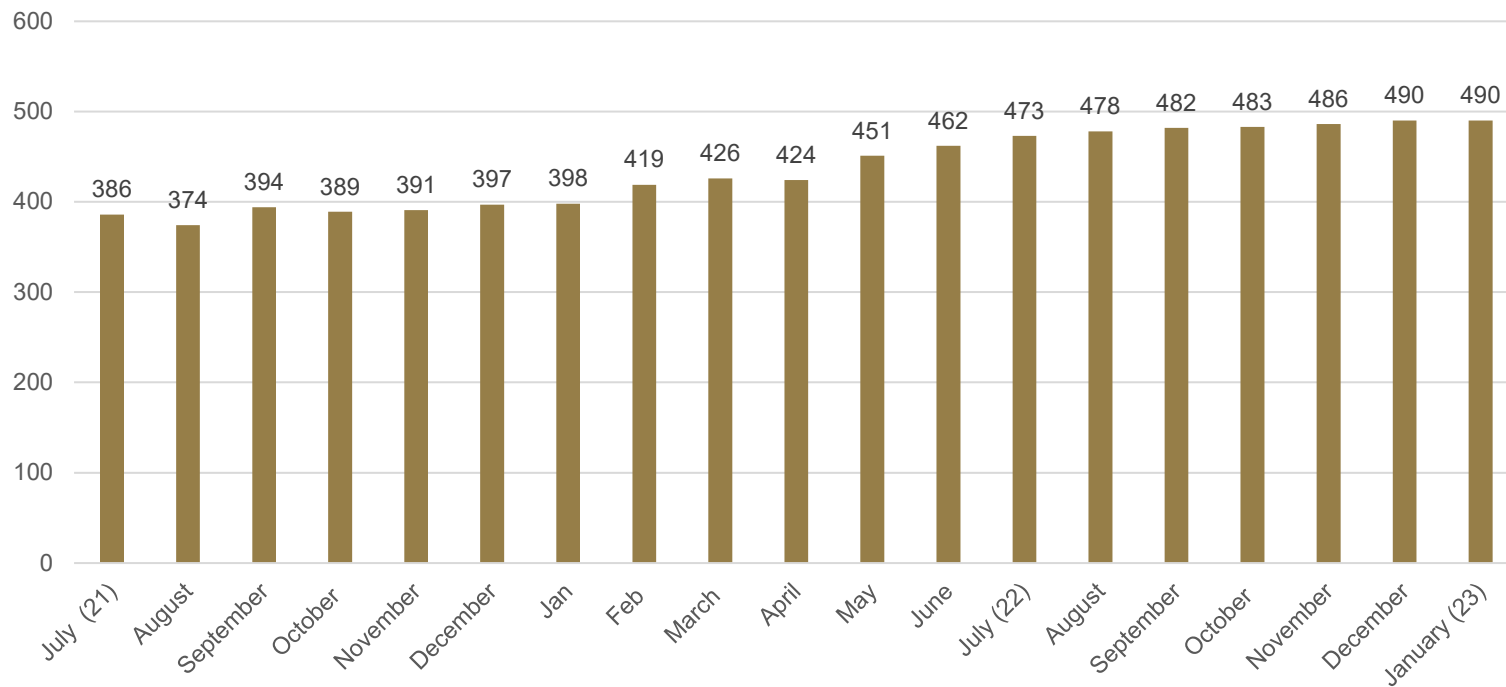


# Children’s Behavioral Health System of Care



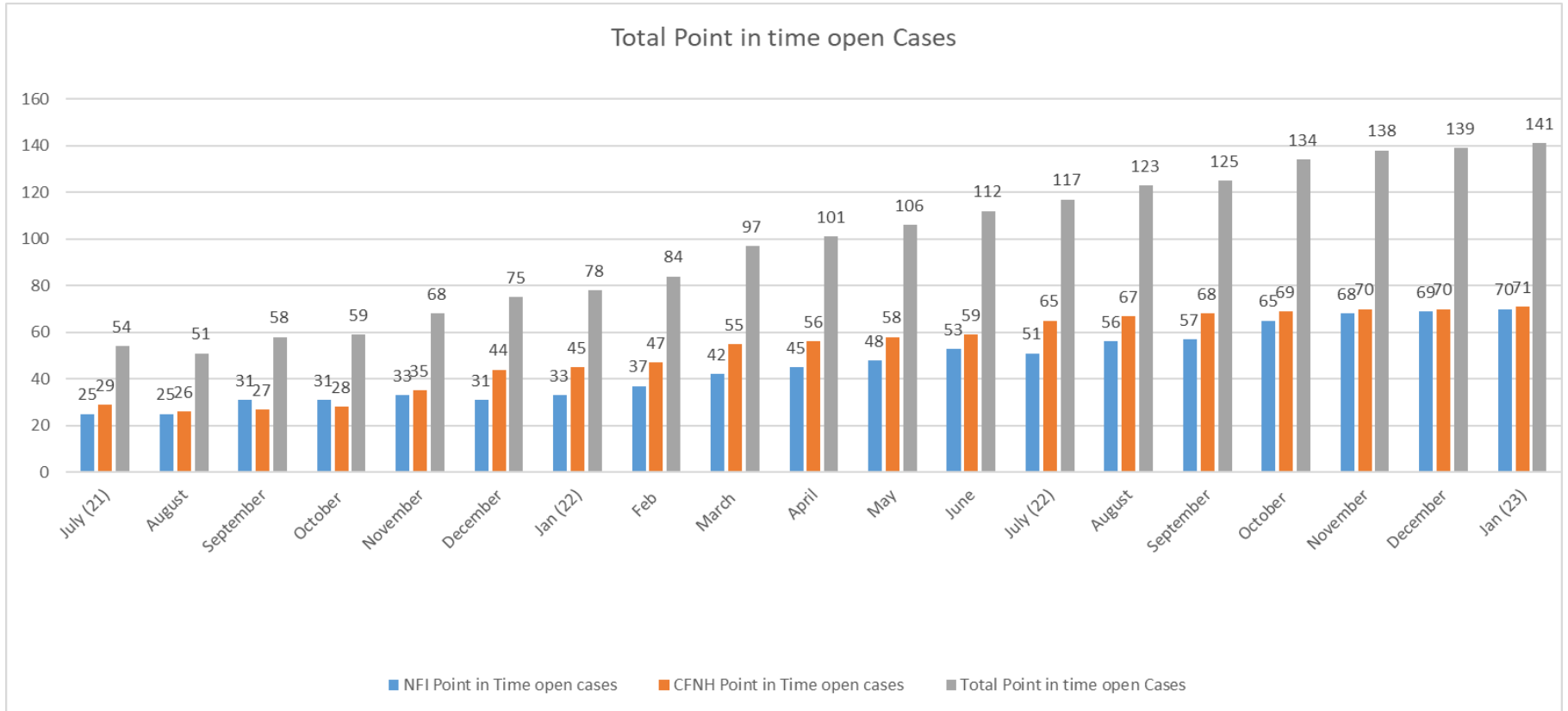
### Fast Forward Program Growth

Total Point in time open Cases

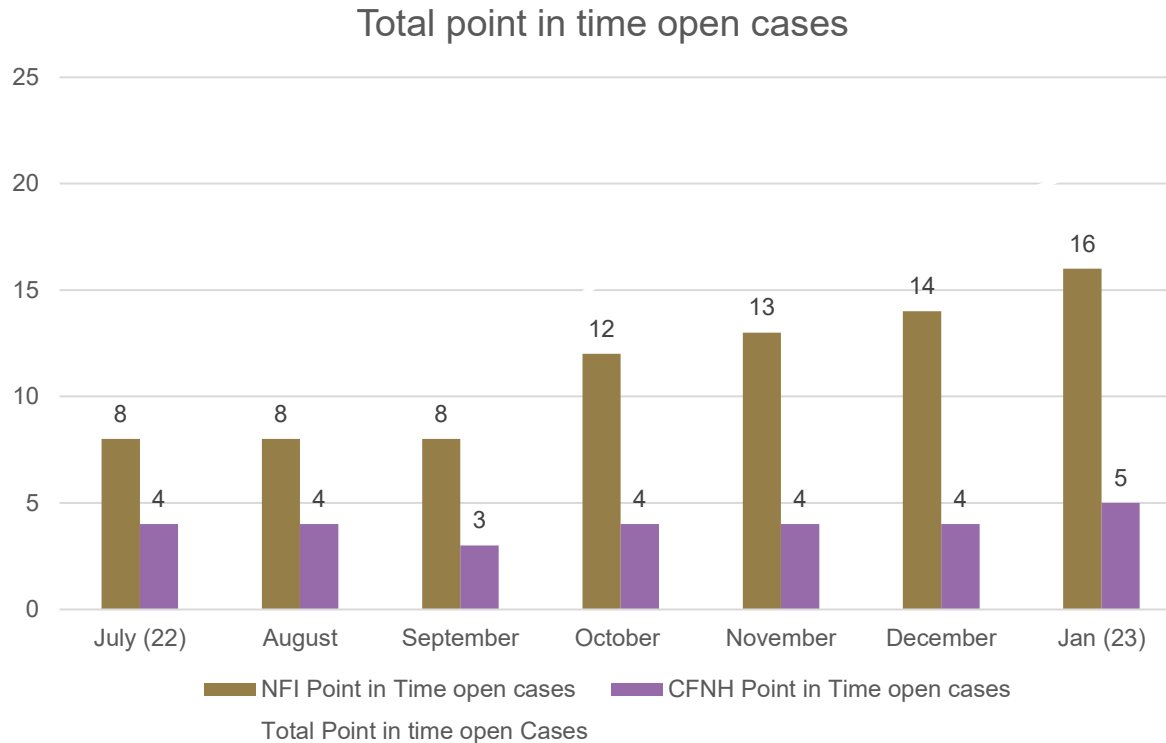


### TR-ECC Program Growth

Total Point in time open Cases




### Early Childhood Enhance Care Coordination Launch July 2022



## Bureau of Mental Health Services

Providing oversight, guidance, training and monitoring for mental health providers statewide to ensure the full continuum of recovery-oriented mental health services to State-eligible adults who experience a mental illness and/or a co-occurring mental illness and substance use disorder(s).

Activity – Accounting Unit	Accounting Unit Title	Budget Book Page #	Budget Briefing Book Page #
9220-2340	ProHealth NH Grant	1034	26-27
9220-4113	Office of Consumer and Family Affairs	1034-1035	n/a Under \$1M
9220-4114	Guardianship Services	1035-1036	28
9220-4115	Commitment Costs	1036	29
9220-4116	Interim Care Funds	1037	n/a Under \$1M
9220-4117	Community Mental Health Program Support	1037-1038	30-34
9220-4118	Peer Support Services	1039	35-36
9220-4119	Family Mutual Support Services	1039	n/a Under \$1M
9220-4120	Mental Health Block Grant	1040	37-38
9220-4120	Mental Health Data Collection	1041	n/a Under \$1M

- ✓ Transformed NH's crisis response system by launching NH Rapid Response with a centralized contact center and mobile response teams statewide (9220-4117, 9220-4120 & XXXX-2052)  **New Hampshire**  
Rapid Response
- ✓ Launched Recovery Oriented Step-up/Step-down programs (15 beds in last biennium) (9220-4118)
- ✓ Increased supported housing from 763 beds in SFY20 to 1,007 beds in SFY22 (9220-4117)
- ✓ Implemented Critical Time Intervention (CTI) program
- ✓ Expanded first episode psychosis coordinated specialty care from 1 team to 4 teams (9220-4120)

# Overview of the NH Rapid Response Model

Integrated system that builds upon current provider network - All interventions are brief and episode based



## New Hampshire Rapid Response



Someone  
to call, text or chat



Someone to  
respond



Somewhere  
to go

### 1. Statewide Access Point

Create and implement a central, statewide operations center 24/7 for centralized phone triage, initial assessments, brief interventions, deployment, coordination of regional crisis services, use of the Crisis Now toolkit, development of Rapid Response training Curriculum, training of the Rapid Response workforce, and data collection to promote consistency and quality.

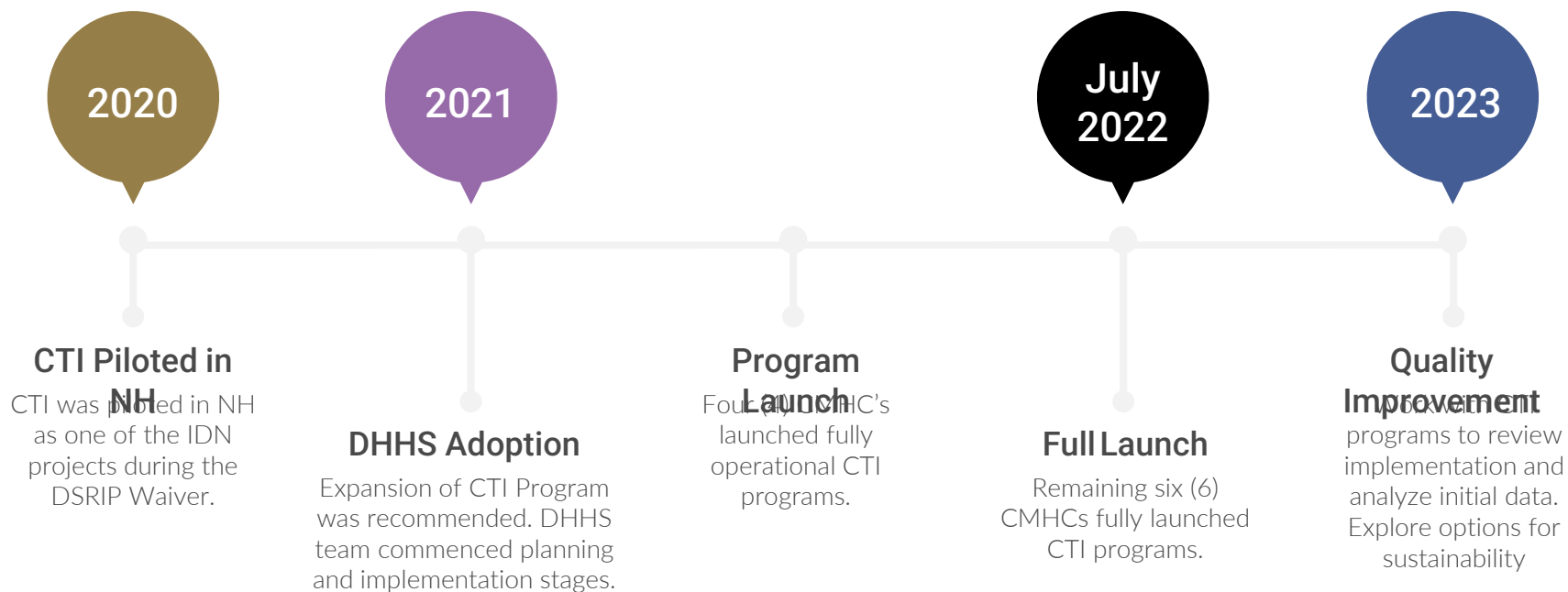
### 2. Local Face-to-Face Services

Specialty trained staff are deployed to facilitate community-based face-to-face assessment and intervention for persons experiencing a behavioral health crisis, in order to de-escalate crises without removing the individual from their homes and/or community programs, consistent with safety protocols within 1 hour. Regional teams also have location-based services available for drop-off and drop-in episode based crisis interventions.





# CTI Timeline in NH



# CTI Model

## Guiding Principles

- Phased, Time Limited
- Decreasing in intensity
- Evidence-based
- Transition focused
- Implemented by workers in the client's community
- Focused on specific goals
- Facilitates linkages with enduring supports

### Pre CTI

Initial Relationship –  
Connects with client pre-  
discharge to build a trusting  
relationship

Days  
–  
A  
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### Phase One

“Transition” – Provide support  
& begin to connect client to  
people and agencies that will  
assume the primary role of

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### Phase Three

“Transfer of Care” –  
Terminate CTI  
service with support  
network safety in  
place

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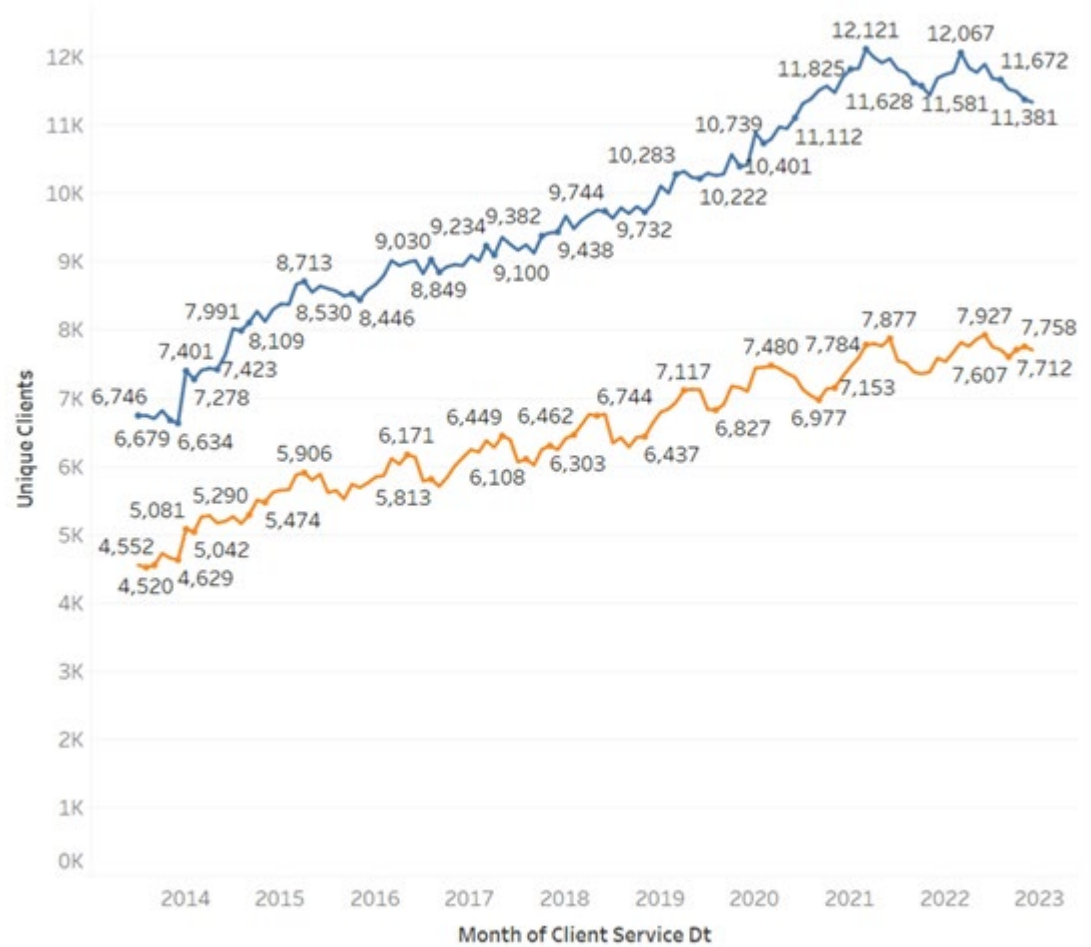
[About-the-CTI-Model-82114.pdf \(pantheon.io\)](#)

KEY CHALLENGES

Mental Health

- Increased Demand for Services
- Workforce Shortages
- Limited Available Housing

CMHC Eligible Client Trend,



## Bureau of Homeless Services

BHS assists people who are experiencing homelessness or housing instability to access housing, emergency shelter, and/or supportive services to assist in achieving or maintaining housing stability.

Activity – Accounting Unit	Accounting Unit Title	Budget Book Page #	Budget Briefing Book Page #
4230-7926	PATH Grant	897	n/a Under \$1M
4230-7927	Housing – Shelter Program	898	39-41

# Bureau of Homeless Services Programs

## U.S. Department of Housing & Urban Development (HUD)

Balance of state Continuum of Care works collaboratively with HUDS funded projects throughout NH

Continuum of Care funded projects provide Permanent Supportive Housing, Rapid Re-Housing, and Coordinated Entry outreach.

Emergency Solutions Grant provides Homeless Prevention and Rapid Re-Housing to homeless or at-risk households

Housing Opportunities for People With AIDS (HOPWA) provides short and long term rental assistance and supportive services to individuals experiencing homelessness who have a diagnosis of HIV or AIDS.

## Emergency Shelters (ES)

ES provides temporary shelter (non-permanent) designed to meet the basic needs of individuals and families who have no other housing options and who would otherwise be sleeping in a place not meant for human habitation.

ES ensure the basic needs of each individual are met. At a minimum including a safe, protective, and sanitary environment as described in RSA 126-A:26

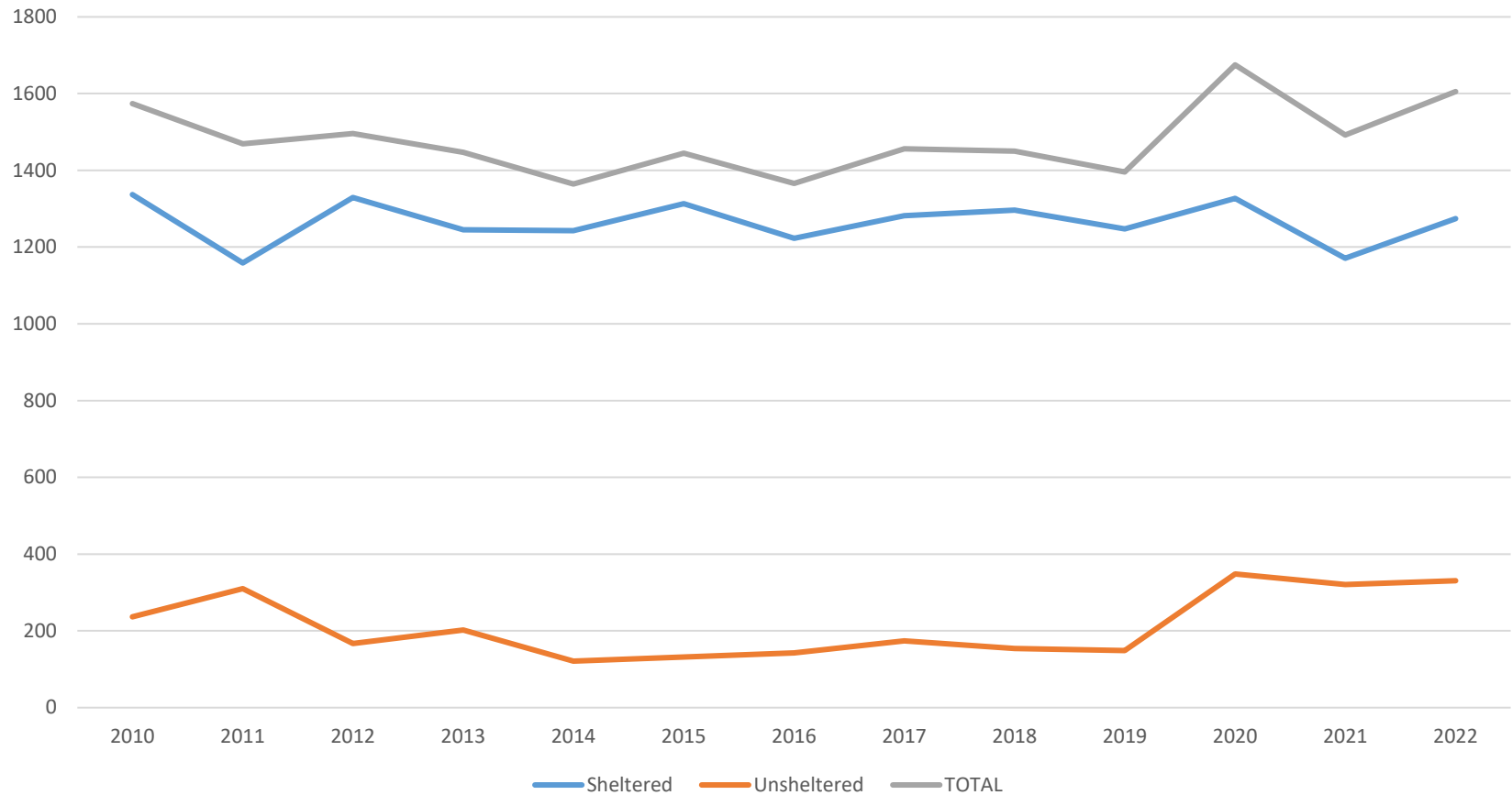
## Substance Abuse & Mental Health Services Administration

Projects for Assistance in Transitioning from Homelessness (PATH) street outreach for people with serious mental illness (SMI) experiencing homelessness.

NH receives the small state minimum of \$300,000 per year for the entire state. PATH has been level funded since NH first received the funding in the 1990s.

PATH services are provided by 6 CMHCs and the Tri-County Community Action Program.

# Point in Time Counts (PTC)



\*PIT count is conducted during the last 10 days of January of each calendar year (per HUD requirement)



# HUD and Continuum of Care (CoC)

The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability.

## NH has 3 CoC:

- Greater Nashua- Harbor Homes
- Manchester- Families in Transition (FIT)
- Balance of State- Bureau of Housing Supports (BHS)

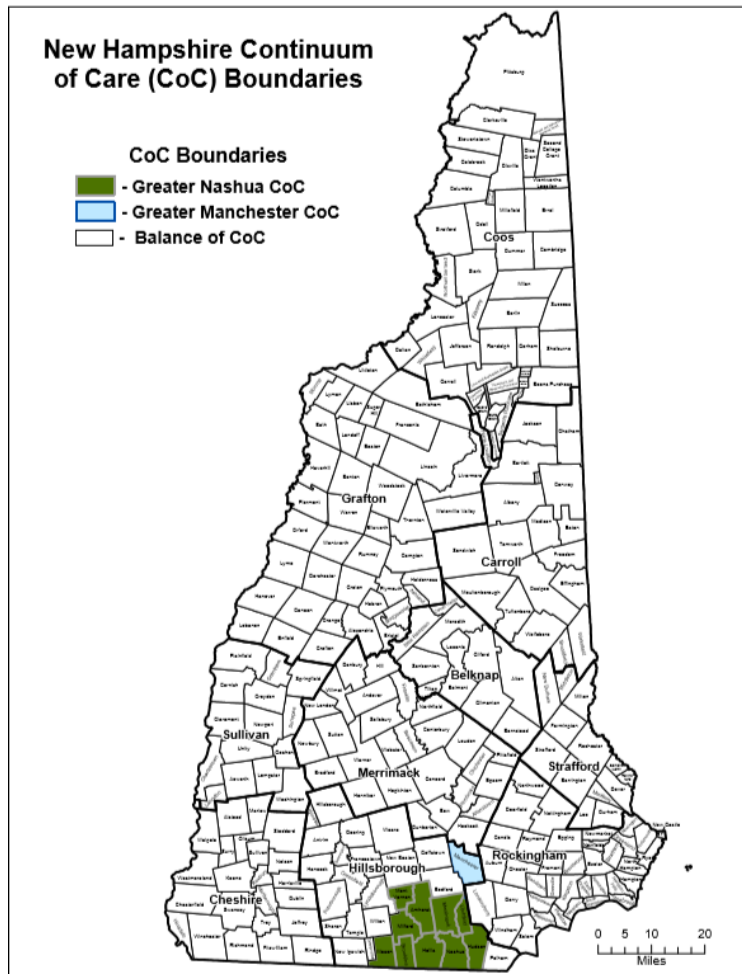
## HUD contracts directly with the CoC to:

- Promote community-wide planning and strategic use of resources to address homelessness;
- Improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and
- Allow each community to tailor its program to the particular strengths and challenges within that community.
- CoC Projects submit annual applications to serve people in the identified geography of their CoC.

**FY 2021 funding for each CoC**, used to promote a community-wide commitment to the goal of ending homelessness

- Balance of State: \$5,418,296
- Greater Nashua: \$2,186,929
- Manchester: \$1,862,233

# Continuum of Care



- A geographically based group of representatives that carries out the planning responsibilities of the Continuum of Care program, as established under 24 CFR part 578.
- These representatives come from organizations that provide services to persons experiencing homelessness, represent the interests of persons experiencing homelessness or persons formerly homeless.
- Continuum of Care then designates certain “applicants” as the entities responsible for carrying out the projects that the Continuum has identified through its planning responsibilities.



# BHS Key Accomplishments

- BHS implemented a Coordinated Entry process for the Balance of State Continuum of Care that standardizes the way individuals and families who are at risk of homelessness or who are experiencing homelessness are assessed and referred to housing options. By using a Prioritization List of all people in the homeless services system, individuals with the highest level of vulnerability are prioritized for available housing.

- BHS was awarded 2 new projects through the FY 2021 Housing and Urban Development Continuum of Care competition
- Rapid re-housing for survivors of Domestic Violence in Merrimack County
- Rapid re-housing for survivors of Human Trafficking in Rockingham County

- Through the work with the Council on Housing Stability, BHS is leading these key initiatives:
- Using one-time grants, providing Cold Weather response contracts for all 10 counties for the 2022-2023 winter.
- Using \$4 million in one-time grants, providing supplemental assistance to emergency shelters under contract with DHHS for COVID-19 related costs.

- BHS applied for a Supplemental Funding Opportunity through the US Department of Housing and Urban Development for Rural and Unsheltered Homelessness for the Balance of State Continuum of Care (BOSCOC).
- The BOSCOC was one of 46 communities selected for this funding, which will expand supportive services for individuals experiencing unsheltered homelessness in Belknap and Merrimack counties.



**Katja Fox, Division Director**

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