State of New Hampshire
Department of Health and Human Services

10-Year Mental Health Plan

HHS oversight committee
11/9/18

Current Efforts to Address Mental Health

- Transformation Waiver
- Medicaid Benefit for Children
- System of Care (RSA 135-F)
- Community Mental Health Agreement (Amanda D.)
- Transitional Housing Beds
- Behavioral Health Crisis Treatment Center
- Medicaid Rate Increase
- Change Direction Campaign
- Suicide Prevention Initiatives
- Request for Information for Forensic Psychiatric Facility

New 10-Year Mental Health Plan

- Develop a comprehensive approach
- Pull together disparate efforts
- Address multiple needs within the system
- Simplify and expand access for individuals and their families

Supporting Values & Principles

Person-centered	The person (and their family) is the driving force in their healthcare decisions and an equal partner in planning and delivery of care.The unique values, preferences, and circumstances of the individual are honored, resulting in better engagement, treatment ownership/adherence, while protecting the dignity of consumers.
Whole person focus	Whole person care considers the complex intersections between physical, emotional, spiritual, and behavioral health. The focus is not just on behavior, the current mental health crisis, or diagnosis. Attention to social determinants of health is key.
Empowered people, families & communities	People are educated and aware of the resources available, able to navigate the system toward individualized supports and services, increasingly able to rely on on natural supports in their home communities, and feel comfortable and heard in voicing preferences in their health care decisions.
Localized services	Community-based care is prioritized to ensure that to the highest extent possible, individuals receive care in the areas closest to their homes, natural supports, and social networks, resulting in increased access to and satisfaction with care and better community integration for individuals with mental health conditions.
Pooled resources, infrastructure & accountability	Organizations and providers share resources (e.g., common data platforms, shared training and professional development) to leverage financial and human resource capacity to provide the most efficient care. There is shared accountability for service delivery and outcomes.
Equity	The system works toward and holds itself accountable for eliminating disparities in social determinants of health, ensuring equal access to supports and services, and eliminating disparities in mental health outcomes for excluded or marginalized groups.

Stakeholder Engagement Structure



Stakeholder Process to Date

Focus Groups

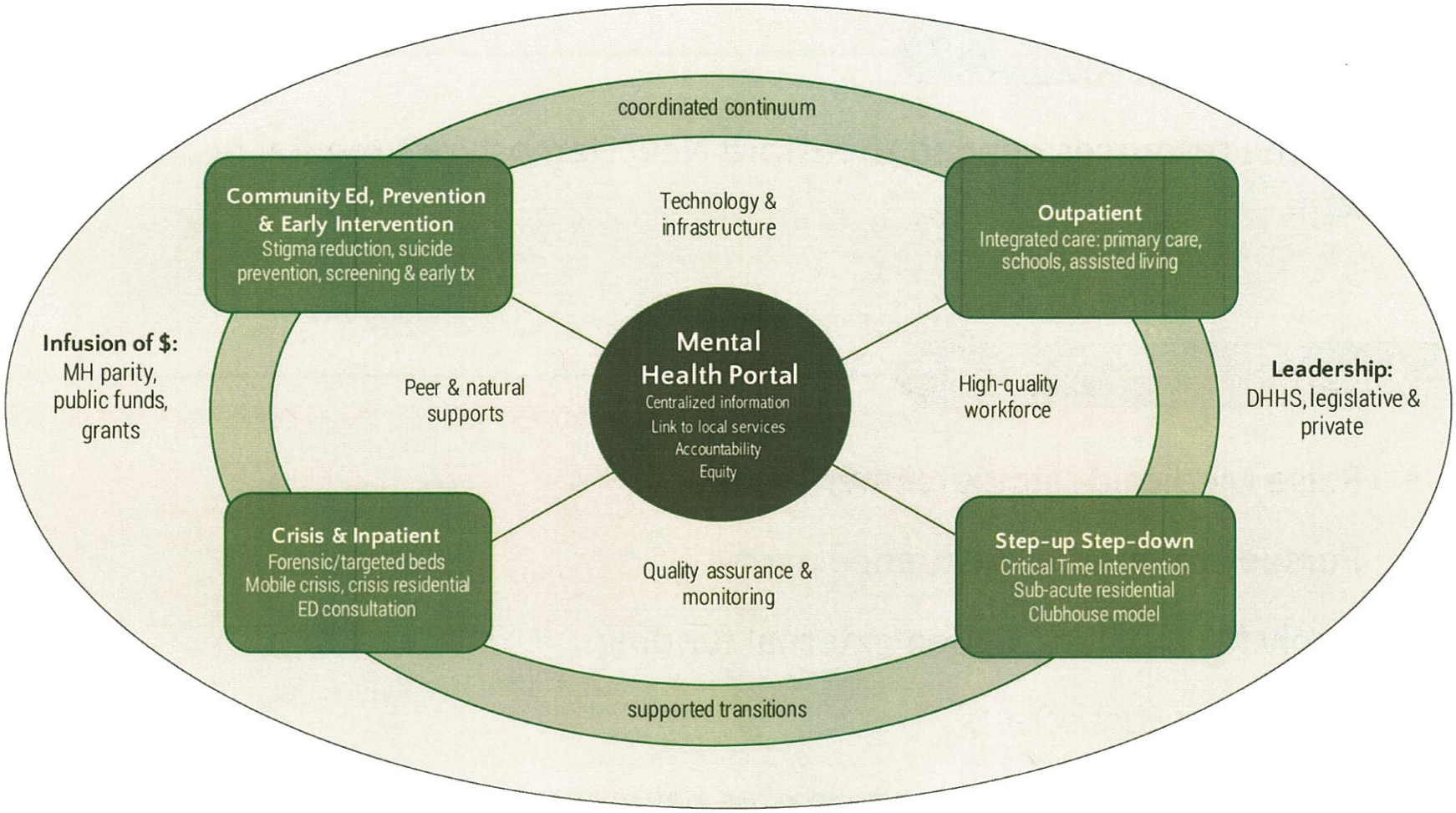
- Over a dozen, including, but not limited to: Children's Behavioral Health Collaborative, EMS providers, CMHCs, Police Chiefs Association, Suicide Prevention Council, NH Hospital Association, Peer Support Agencies, Governor's Legislative Group, NH Consumer Council, Specialty Court Coordinators, Integrated Delivery Networks

Work Groups

- Community Education, Prevention & Early Intervention, Outpatient Treatment, Step up/Step down, Crisis and Intervention

Key Advisors

A Coherent, High Functioning System of Care



Infusion of Resources

Goal

Infuse the resources needed to restore New Hampshire's mental health system.

Actions

- Raise Medicaid reimbursement rates
- Pursue commercial insurance parity
- Apply for mission-aligned external funding
- Reallocate cost offsets
- Implement value-based, alternative payment models

Mental Health Portal

Goal

Create a single, integrated point of entry to localized information, triage and referral to local services for both mental health and substance misuse conditions.

Actions

- Create centralized MH Portal
- Create regional hubs
- Integrate centralized and regional MH portal with SUD hub and spoke model

Mental Health Portal



High Quality Workforce

Goal

Improve the recruitment, retention and quality of the mental health workforce.

Actions

- Create workforce oversight body
- Apply other recruitment and retention incentives
- Enhance professional development
- Create technical assistance hub
- Improve compensation and reduce burden on workforce

Quality Assurance and Monitoring

Goal

Develop meaningful quality assurance and monitoring systems and procedures that provide real-time feedback and promote ongoing learning and continuous quality improvement.

Actions

- Collect and use meaningful data
- Accountability through DHHS or another system administrator
- Shared performance measures
- Build a common data platform

Investment in statewide technology and infrastructure to enhance capacity Improvement and integration of DHHS data platforms

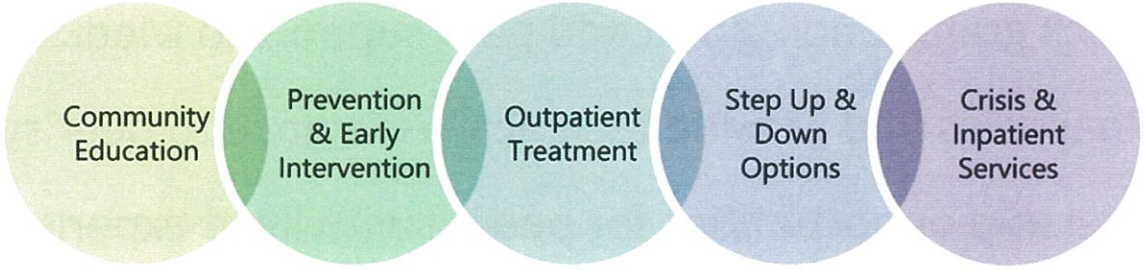
Coordinated Continuum of Care

Goal

Create comprehensive, robust and coordinated continuum of care with supported transitions between steps in the care pathway to meet the mental health needs of NH citizens.

Actions

- Build out a comprehensive system to ensure that people can access appropriate levels of care where and when they need it. These goals and strategies are detailed in the following slides:



Infusion of Peer Supports

Goal

Infuse peer and natural supports throughout the continuum or care to empower consumers, reduce reliance on professional supports and reduce avoidable Emergency Department and inpatient visits.

Actions

- Integrate peer supports throughout the continuum of care
- Expand peer supports for youth and the elderly
- Increase block grant funding and add peer support to Medicaid Plan
- Develop clear roles and provide technical assistance to peer supports
- Create leadership opportunities for people with lived experience

Community Education

Goal

Reduce mental health stigma and improve recognition and response to signs of mental distress in NH communities.

Actions

- Universal communication and stigma reduction campaign
- Deliver mental health training throughout NH
- Renewed focus on suicide prevention

Prevention and Early Intervention

Goal

Intervene "upstream" to prevent the emergence of and halt the progression of mental illness.

Actions

- Advocate for statewide attention to social determinants of health
- Enhance early childhood and family strengthening programs
- Expand early intervention for mental illness

Outpatient Services

Goal

Support people with mental health conditions safely and effectively in their home communities.

Actions

- Integrate behavioral health into primary care, elder settings
- Implement multi-tiered systems of supports in schools throughout the state
- Increase access to Permanent Supportive Housing
- Expand access to high-fidelity evidenced-based practices

Step-down Services

Goal

Support people at risk of hospitalization safely and therapeutically in their communities while reducing avoidable hospitalizations and readmissions.

Actions

- Support transitions from residential to community settings
- Expand access to Clubhouses
- Increase access to and utilization of peer respite
- Develop community based sub –acute residential programs

Crisis and Inpatient Services

Goal

Stabilize and support individuals experiencing mental health crisis and acute psychiatric episodes while reducing avoidable inpatient stays.

Actions

- Psychiatric consults
- Place peer navigators in Emergency Departments
- Extend mobile crisis geographically and to kids
- Create crisis residential programs and beds
- Add targeted inpatient beds to improve outflow from NH Hospital

Shared Leadership

Goal

Compelling vision, strong shared leadership, strategic advocacy and grassroots support creates commitment among law and policy makers to resource and restore New Hampshire's mental health system.

Actions

- Disseminate and prioritize the plan
- Cultivate law and policy maker champions
- Develop social marketing campaign

Implementation Strategy

- First invest in system change infrastructure to set the foundation for long term successes.
- Continuous infusion of additional resources to allow for robust implementation of the plan.
- Ongoing revision and prioritization.

Milestones 2018-2028

Phase I: Build Foundation	Phase II: Establish the System	Phase III: Reflect, Look Forward
Leadership • Foster champions • Disseminate to public	**Leadership** • Continued prioritization • Review and adapt • Social marketing and public information	**Leadership** • Review and disseminate results • Identify problems and gaps • Maintain success
Resources and Infrastructure • Grant funding • MH Portal plan • Workforce adequacy	**Resources and Infrastructure** • Alternative payment models • Compensation and workforce strategies	**Resources and Infrastructure** • Reallocate costs offsets • Integrate MH portal with other systems • Workforce strategies
System Strategies • Review rules and administration • Coordinated continuum • Add peer support to Medicaid State Plan	**System Strategies** • Enhance DHHS data systems • Create intentional pathways • Integrate peer supports at every point	**System Strategies** • Reinforce DHHS capacity • Refine service/support pathways • Demonstrate peer support outcomes
Practice Strategies • Public information campaigns • Early intervention strategies • Primary care integration	**Practice Strategies** • Fully deploy stigma and suicide prevention campaign • Supported housing expansion • Expansion of EBP and other effective services	**Practice Strategies** • Continue to refine and expand success • Re-examine gaps in services array and need for beds • Incorporate new knowledge/practices