

**Behavioral Health Advisory Council
Pierre, South Dakota**

June 10, 2020

**Advisory Council
Members Present:**

Kara Assid (Chair)
Roseann Peterson-Olson (Vice-Chair)
Jacquie Larson
Kristi Bunkers
Christy Alten-Osmera
Bryan Harberts
Matt Glanzer
Joyce Glynn
Linda Reidt-Kilber
Eric Weiss
Ashlee Rathbun

Dianna Marshall
Susan Kornder
Melanie Boetel
Wendy Figland
Karen Severns
Lorraine Polak
Belinda Nelson
Jane Grant
Chuck Frieberg
Angie Dammer
Emily Erickson
Jayne Parsons

**Advisory Council
Members Absent:**

Katherine Jaeger
Rosanne Summerside

Lois Knoke
~~Jayne Parsons~~
Ellen Washenburger

**Division of Behavioral Health Staff
Present:**

Jana Sprenger
Tiffany Wolfgang

Jennifer Humphrey
Stacy Krall
Andrea Heronimus

Others in Attendance:

Terry Dosch
Sue Glodt

Jeremy Johnson
Laurie Gill

Purpose

The purpose of the Advisory Council shall be to guide the Division of Behavioral Health with the planning, coordination and development of the state comprehensive behavioral health services plan. The Advisory Council shall advocate on behalf of persons served to ensure their highest attainable degree of independence, productivity, community integration and quality of services. The Advisory Council will also advise the Division of Behavioral Health on statewide treatment, prevention, and rehabilitation needs within the current behavioral health system.

Minutes:

I. Call to Order / Welcome and Introductions

June 10, 2020 the Behavioral Health Advisory Council meeting was called to order.

II. Laurie Gill, Secretary of the Department of Social Services

Secretary Gill introduced herself, discussed the importance of the Advisory Council and her gratitude towards those volunteering their time to serve.

III. Review and Approval of Meeting Minutes

The Advisory Council reviewed and approved the November 2019 meeting minutes.

IV. Membership

New Members

Emily Erickson was appointed 1/7/20 to fill the position of Jacksyn Bakeberg; A youth with a serious emotional disturbance and/or substance use disorder or a youth who has a sibling with a serious emotional disturbance and/or substance use disorder.

Rosanne Summerside was appointed 4/28/20 to fill the position of Jane York; A family member of an adult with a serious mental illness who is a member of a mental health advocacy organization

V. Sue Glodt, Director of the Oahe Child Development Center

Sue Glodt provided an overview of the services offered through the Oahe Child Development Center.

VI. Human Services Center (HSC) Update

Administrator, Jeremy Johnson, provided an overview of COVID-19 measures implemented at HSC. Jeremy also discussed Competency & Restoration trainings and recruitment efforts for new staff, including Registered Nurses.

VII. COVID-19 Updates

Tiffany Wolfgang provided an overview of COVID-19 measures implemented at the state and local provider levels.

Crisis Counseling Program – SD4527

The Division was awarded a statewide Crisis Counseling Program grant as a result of the 4/30/20 Presidential Disaster Declaration addressing COVID-19. Under the 605 Strong branding used in Governor Noem's Back to Normal Plan, the grant will provide outreach services to individuals impacted by COVID, primarily through technology, and will utilize the 2-1-1 number as the primary source to call for information/resources. The state will also subcontract with providers to deliver targeted outreach to identified populations.

Emergency Grant to Address Mental Health & Substance Use Disorders

The Division was awarded FG-20-006, Emergency Grants to Address Mental Health & Substance Use Disorders during COVID-19. This grant will support crisis intervention services, mental health and substance use treatment and other related recovery supports for children and adults impacted by COVID-19. Funding includes \$2,000,000 over 16 months beginning April 20, 2020 through August 19, 2021.

Emergency Response for Suicide Prevention Grant

On May 22nd the Division applied for FG-20-007, Emergency Response for Suicide Prevention Grant. If awarded, the grant is \$800,000 for 16 months beginning June 30th and will focus specifically on adults (25 and older) at risk for suicide and victims of

domestic violence.

VIII. Boards & Commissions Portal

Tiffany Wolfgang discussed updates to the following topics. The Advisory Council is encouraged to visit the following websites periodically to obtain new information.

Oversight Council for Improving Criminal Justice Responses for Persons with Mental Illness:

<https://boardsandcommissions.sd.gov/SearchResults.aspx?Letter=M>.

Juvenile Justice Public Safety Improvement Act (JJPSIA) Oversight Council

<https://boardsandcommissions.sd.gov/SearchResults.aspx?Letter=J>.

Mental Health Summer Study

<https://sdlegislature.gov/Interim/Documents.aspx?Committee=205&Session=2018#Meetings>

IX. Additional Director Updates

Tiffany Wolfgang provided an overview of the following topics.

Needs and Gaps Analysis

A Request for Proposal (RFP) was issued for a Needs and Gaps Analysis which includes both privately and publicly funded behavioral health services in South Dakota, including mental health and substance use prevention, treatment, and recovery supports. The purpose of the analysis is to guide strategic goals and priorities for future investments in behavioral health that support improved outcomes and develop a comprehensive, evidence-based continuum of care for individuals. The RFP was due May 22nd and a contract award is anticipated June 26th. This endeavor will include stakeholder involvement, including the Advisory Council.

State Opioid Response Grant

The Division submitted a 2nd application to the State Opioid Response grant on May 15th. If awarded, the grant will begin September 30th and will support efforts around both opioid and meth; including Medication Assisted Treatment, peer recovery support services, prevention and intensive case management for pregnant women and women with dependent children.

Office of Licensure & Accreditation

Governor Noem requested that the Department of Social Services do a full analysis on the process for licensing and inspecting private treatment facilities for children and youth. Eleven recommendations resulted including the creation of an independent monitor (SB 20) and the creation of the Office of Licensure and Accreditation. A full report can be found at:

https://dss.sd.gov/docs/mainpage/licensed_and_accredited_treatment_facilities_with_executive_summary.pdf.

2020 Legislative Session

A 2% provider inflation was approved during the 2020 Legislative Session. Just over 3 million was approved to support meth treatment in the Northeast and Western regions.

\$138,500 was approved to support full year funding of Mental Health Court in Minnehaha County and \$436,662 was approved to fully fund 211 statewide. Additional funding adjustments were made to the Juvenile Justice Reinvestment Initiative, substance use disorder outpatient services and meth treatment; and one-time funding to support suicide prevention.

X. Prevention Services & Committees

Jana Sprenger provided overview of COVID-19 measures implemented by prevention providers.

Middle School Prevention Programming

Funding was approved in 2019 to provide evidence-based substance use prevention programming, with an emphasis on meth prevention, in South Dakota middle schools. Nine offerors were approved funding from the Request for Proposal issued in August 2019, identifying a projected 40 schools to receive programming which began January 2020.

The Division worked collaboratively with the three Prevention Resource Centers to conduct outreach to all middle schools in their catchment area in an effort to on-board additional middle schools for programming. In FY20 69 middle schools received programming. In FY21, 83 middle schools will receive programming.

South Dakota Prevention Facebook Page

The Division is utilizing the South Dakota Prevention Facebook page to disseminate behavioral health information, including prevention and treatment; promoting self-help seeking behaviors, and de-stigmatizing behavioral health issues. Please go and “Like,” the page: <https://www.facebook.com/southdakotaprevention/>

Meth Awareness Campaign – Anyone. Everyone.

In connection with Mental Health Awareness Month and National Prevention week in May, the meth campaign transitioned to phase two: “Meth can affect anyone, so it’s time to help everyone.”

The Community Support Toolkit has been added to the www.onmeth.com website, in addition to other various resources on how one can prevent methamphetamine use in their home, school, work, and community. To download the Community Support Toolkit, visit: <https://onmeth.com/wp-content/uploads/2020/05/south-dakota-community-support-toolkit.pdf>

Suicide Prevention

In 2019, the Department of Health, Social Services, Education, Tribal Relations, Agriculture and the Great Plains Tribal Chairmen’s Health Board formed a work group and developed South Dakota’s 2020-2025 Strategic Plan. The development of the strategic plan included review of prior work related to suicide prevention and review of national strategies. The final Plan, selected strategies and the Take Action Now document can be found: <https://sdsuicideprevention.org/toolkits/strategic-plans/>. In addition, a listserv function has been added to the website.

National Strategy for Suicide Prevention Grants

The Division applied for the SM-20-014, Grants to Implement the National Strategy for Suicide Prevention. If awarded, the grant will begin August 30, 2020 with up to \$4700,000 per year for three years. The purpose of the grant is to improve the continuity of care and targeted follow-up to adults at risk for suicide after discharge from inpatient behavioral health units by establishing or enhancing care transition protocols as well as increasing the confidence and competence among critical stakeholders to better identify those at risk of suicide.

Strategic Prevention Framework-Partnerships for Success Grant (SPF-PFS)

The Division applied for the SP-20-002 Strategic Prevention Framework-Partnerships for Success Grant. If awarded, the grant will begin August 30, 2020 with up to \$1,000,000 per year for five years. The purpose of the grant is to increase and enhance the capacity of communities to support the implementation of the SPF by establishing two-to-three additional Prevention Resource Centers.

State Epidemiological Outcomes Workgroup (SEOW) & Screening, Brief Intervention, and Referral to Treatment (SBIRT):

The Division submitted a Change in Scope on Monday, February 10, 2020. The Change in Scope has been approved by the Substance Abuse and Mental Health Services Administration and staff are moving forward with FY21 contracts to support the SEOW through the SBIRT grant and mini-grant opportunities for primary care clinics to implement SBIRT.

XI. Division of Behavioral Health Update

Melanie Boetel provided an overview of the following topics.

Fiscal Update

Melanie Boetel provided an overview of the 2nd and 3rd quarter report for Fiscal Year 2020 regarding the amount expended for contract and Medicaid services by area.

State Pilot Grant Program for Treatment for Pregnant Women and Postpartum Women

The Division of Behavioral Health applied for TI-20-010, State Pilot Grant for Treatment for Pregnant and Postpartum Women. If awarded, the grant will support the RESTORE model of intensive case management provided by Bethany Christian Services. Awards are up to \$900,000 annually for three years, beginning August 30, 2020.

Crisis Counseling Program – SD4440

On June 7, 2019 the State of South Dakota received a Presidential Disaster Declaration for individual assistance for Severe Winter Storm, Snowstorm and Flooding in the counties of Bon Homme, Charles Mix, Hutchinson, Minnehaha and Yankton; the Pine Ridge Reservation to include counties of Oglala Lakota, Jackson and Bennett; the Rosebud Reservation to include the counties of Mellette and Todd; and the Cheyenne River Sioux Reservation to include the counties of Dewey and Ziebach. The Division has sub contracted with five Community Mental Health Centers and the Avera Farm and Rural Crisis Stress Hotline to assist with outreach services to identified populations. The grant will end July 30, 2020.

Crisis Counseling Program – SD4469

On November 18, 2019, the Presidential Disaster Declaration was received. Individual assistance was requested and approved for the following counties: Aurora, Brookings, Charles Mix, Davison, Hanson, Hutchinson, Lake, Lincoln, McCook, Minnehaha, Moody, and Yankton. Additionally, the Flandreau Santee Indian Reservation and the Yankton Indian Reservation were included. The Division has subcontracted with five Community Mental Health Centers and the Avera Farm and Rural Crisis Stress Hotline to assist with outreach services to identified populations. In addition, the Division is currently undergoing a virtual site visit conducted this week by the Federal Emergency Management Agency and the Substance Abuse and Mental Health Services Administration. Overall, feedback has been very positive regarding the work done through these grants.

Training and Quality Assurance

The Division distributed a training survey to providers January 2020 receiving input in several training topics of interest. The Division will coordinate training opportunities with contracted consultants, and with Technology Transfer Centers for FY2021.

XII. Open Discussion/Council Member Updates

Housing Choice Vouchers

Lorraine Polak announced that through the Foster Youth to Independence initiative, Public Housing Agencies and Public Child Welfare Agencies may request Housing Choice Vouchers to assist eligible youth between the ages of 18 and 24 years of age for a period of 36 months. For more information, please contact Lorraine at lorraine@sdhda.org or 605.773.3181.

South Dakota Housing for the Homeless Consortium

Lorraine Polak announced that the 2020 Statewide Point-in-Time Count took place January 28, 2020. For more information, please visit: <http://www.housingforthehomeless.org/primary-content/public-awareness.html>.

XIII. Public Comment / Testimony

No public comment or testimony received.

XIV. Future Meetings

The next meeting will take place Wednesday, August 12, 2020

Jennifer Humphrey will work with Roseann Peterson-Olson and Lois Knoke on establishing a new date for the "In Your Own Voice" presentation.

The Advisory Council discussed the possibility of having 211/Helpline present. The Division will reach out to the Helpline about presenting.

Future presentation requests and agenda items should be directed to Jennifer Humphrey.

XV. Adjourn

Meeting was adjourned.

helpline center



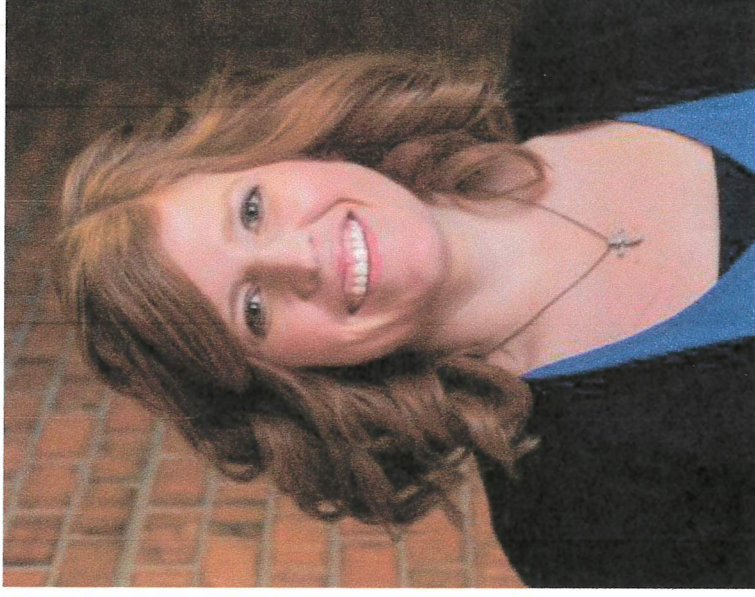
**Making lives better by giving support, offering hope
and creating connections all day, every day.**

III.

Welcome!



Janet Kittams
CEO
janet@helplinecenter.org



Betsy Schuster
VP of Program Development
betsy@helplinecenter.org

Road Map

- Helpline Center Overview
- Understanding 211
- Exploring the 211 website
www.helplinecenter.org
- Next Steps/Questions



We are here for you. All day, every day.

Through our mission of *making lives better by giving support, offering hope and creating connections all day, every day*, we believe everyone deserves help when they need simple answers, community connections or hope during difficult times.

LEARN MORE

2-1-1

LEARN MORE

Suicide Prevention
& Crisis Support

LEARN MORE

Volunteer
Connections

LEARN MORE

Available in Black Hills,
Brookings, Sioux Falls

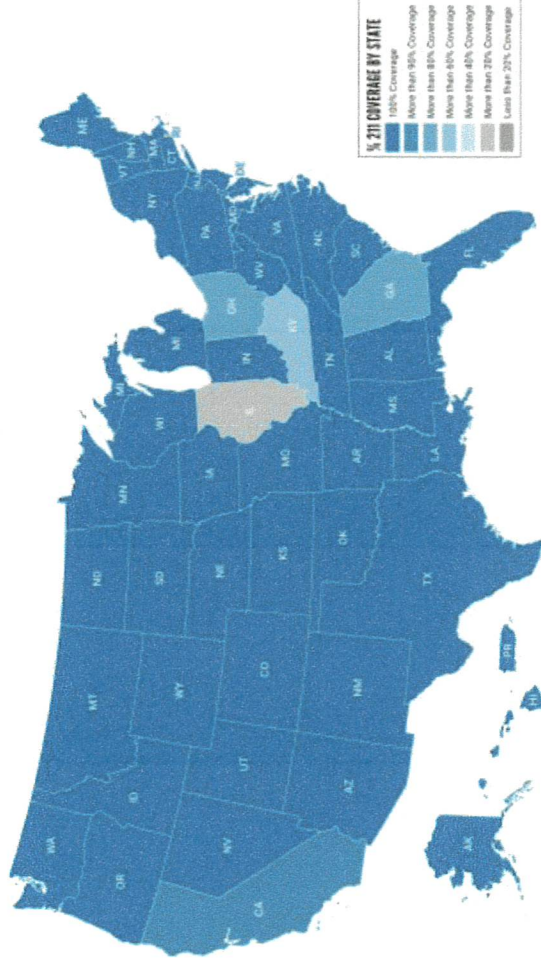
2-1-1 in South Dakota

The Helpline Center has been the 211 provider in South Dakota since 2001.

In 2020, South Dakota's State Legislature passed SB 2, which provided funding to provide 211 statewide beginning July 1, 2020.

95.6% OVERALL COVERAGE

% of Population Covered* by 211 in Each State



*Data provided by 211.org and 211.us, June 2020

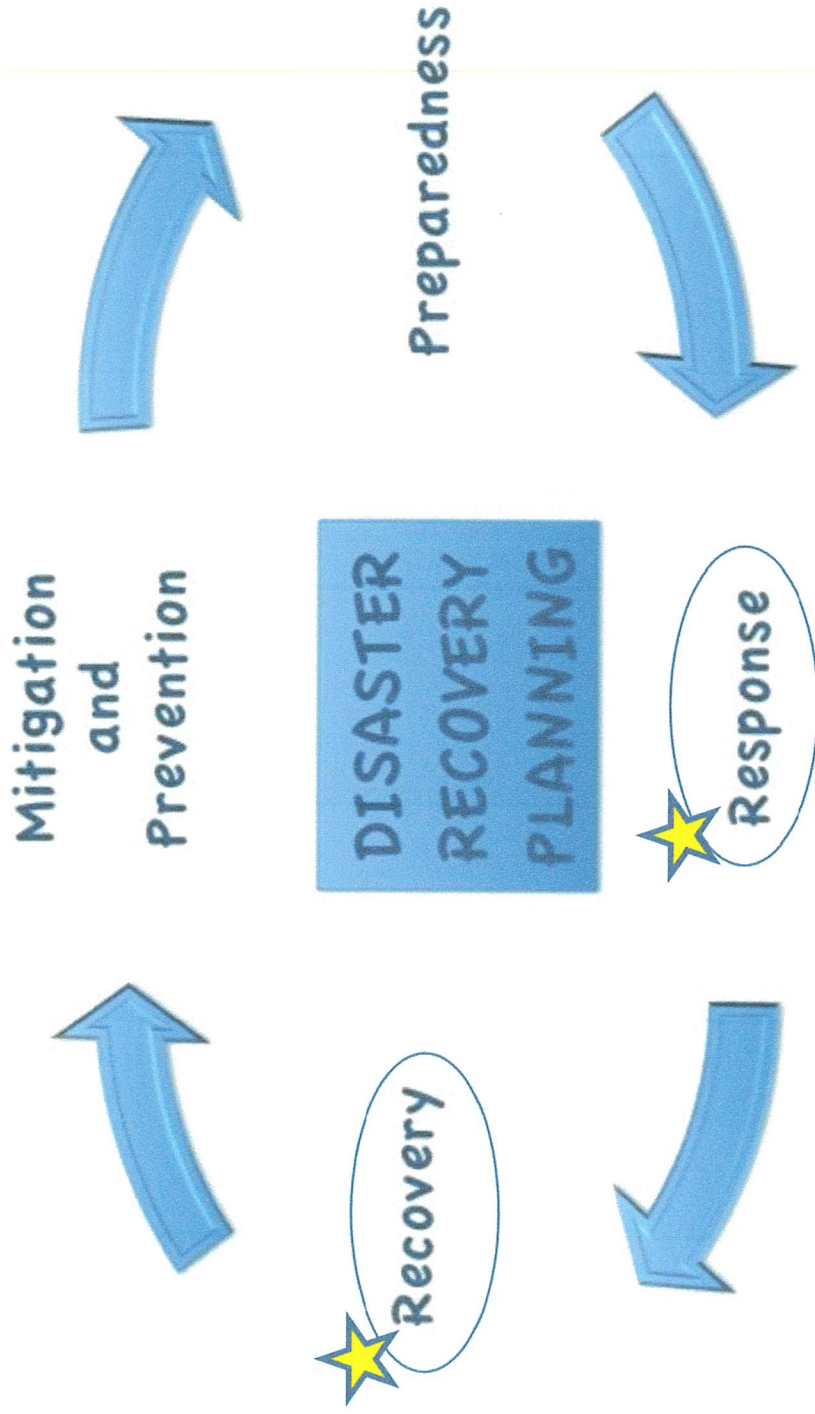
© 2020 South Dakota Helpline Center

Coverage is calculated by 211.org data.

What is 2-1-1?

helpline
center

2-1-1

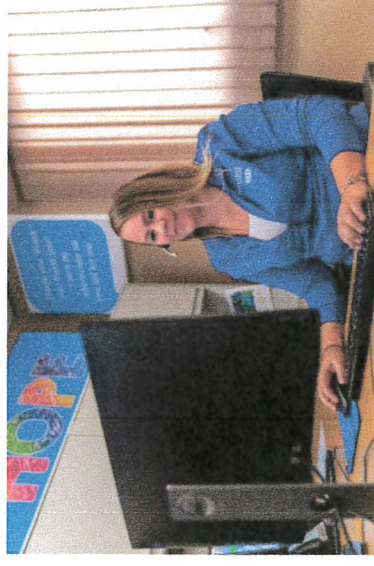


Benefits of 211

- Reduces the number of inappropriate calls to 911, saving that vital community resource for life and death emergencies and freeing them to handle emergency response calls.
- Provides a place for you to refer individuals when you have provided the services you are able to provide
- Confidential – sometimes individuals don't want to share stressors with people they know
- 211 staff are trained professionals

Crisis Calls

- 211 is available to listen and support
 - Immediate crisis de-escalation and collaboration with the individual for their own safety. If safety can't be secured, we do work with law enforcement for a well-being check
- About 75% we are able to secure safety through the development of a safety plan to avoid a law enforcement well being check
- Provide follow up calls to ensure the individual is following through the developed safety plan and remaining safe
 - Reaching out to counseling
 - Practicing additional coping skills



Utilizing 211!



Response to COVID-19

2019 v 2020 Contact Comparison

	March:	April:	May:	June	Total:
2019	5,381	4,918	4,231	4,150	18,680
2020	9,185	11,442	8,061	7,217	35,905

Identified Needs in 2020

Needs Categories

Health Care	13,860
Food/Meals	12,313
Housing	11,616
Mental Health/Addictions	8,993
Information Services	6,227
Income Support/Assistance	4,997
Other Government/Economic Services	4,459
Clothing/Personal/Household Needs	4,236
Utility Assistance	3,986
Legal, Consumer and Public Safety Services	2,570
Individual, Family and Community Support	1,736
Transportation	1,097
Volunteers/Donations	713
Disaster Services	452
Arts, Culture and Recreation	372
Education	221
Employment	211
Total Needs	78,059

* Each Call may have multiple needs

2019 Comparison:

Food Pantries:
3,880

Rent Payment Assistance:
3,411

**Entire YEAR data*

Next Steps...

- If you are from a program that needs to be listed – fill out the intake today!
- Like the Helpline Center on Facebook!
 - We have two pages – Helpline Center & Helpline Center Black Hills
- Go search the database or make a HelpList today!

Link Reminders:

- **Search Now = Online Resource Database**
- www.helpinecenter.org/211database
 - Guided Search (categories with picture)
 - See the details available in a resource including, how to translate a resource
 - Keyword Search (type name or term in field)
- **Resource Guides**
- www.helpinecenter.org/guides
 - Specific to areas
 - Statewide Telehealth/Mental Health Guide
- **HelpLists**
- www.helpinecenter.org/helplist
- **HelpSheets**
- www.helpinecenter.org/helpsheets
- **Community Events**
- www.helpinecenter.org/communityevents
 - Professional Training Opportunities
- **Professionals**
- www.helpinecenter.org/professionals
 - How-to videos to learn about searching database, translating a resource or find a Guide
 - Links for adding a new program (online intake), or updating an already existing one
 - Marketing Requests
- **COVID Links:**
- <https://www.helpinecenter.org/when-disaster-strikes/>
- www.helpinecenter.org/masks
- **Get listed or update!**
- www.helpinecenter.org/211intake

605 Strong Program

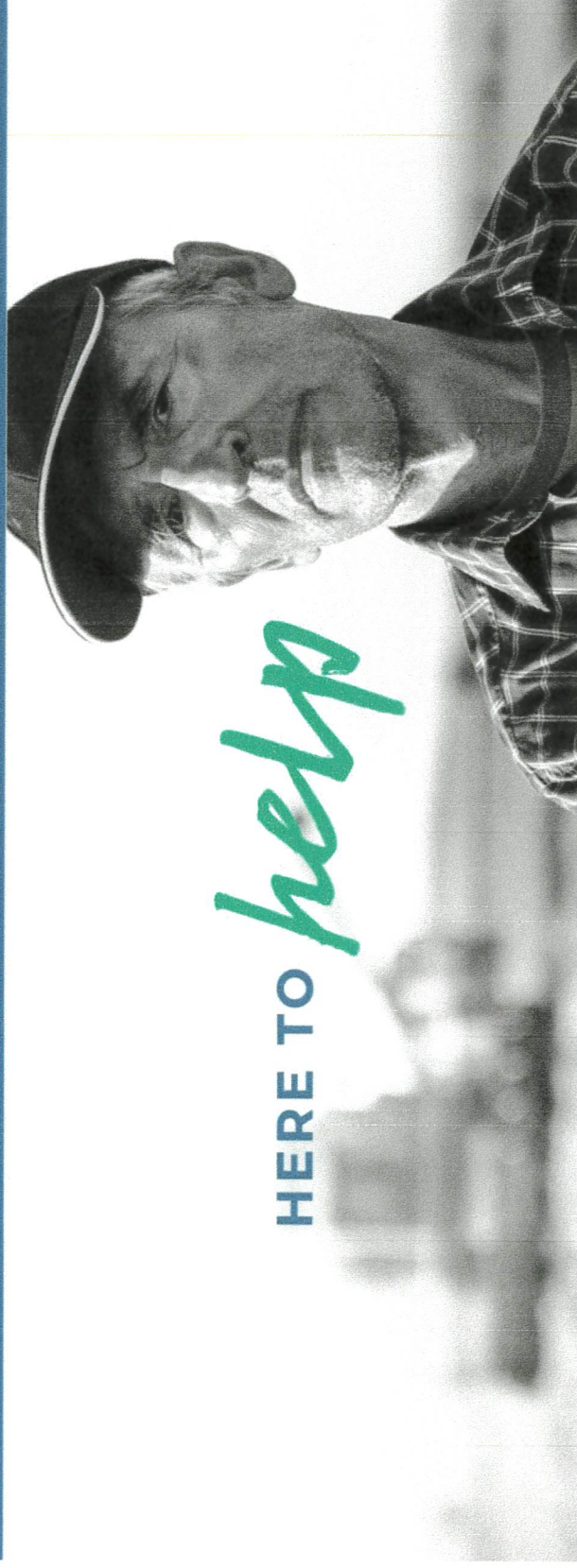


CRISIS COUNSELING

FIND SUPPORT

PRESS KIT

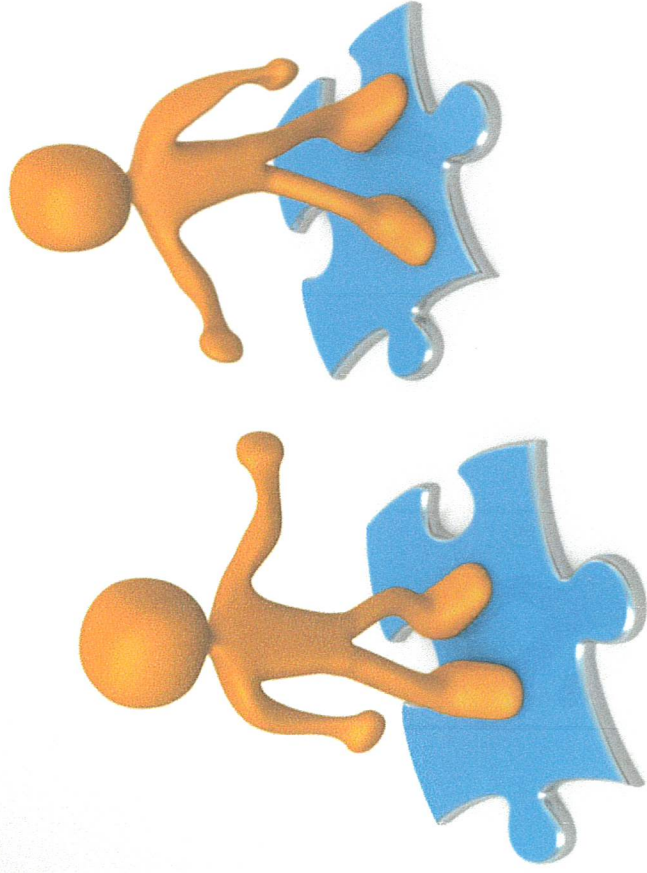
ABOUT



605 Strong Program



- The Department of Social Services (DSS) launched 605 Strong, a new crisis counseling program, dedicated to helping people struggling with the effects of the COVID-19 pandemic.
- The program provides COVID-19 related resources and support, including crisis intervention and access to the 211 Call Center.
- Additionally, outreach support to individuals impacted by COVID-19 is provided. The outreach includes a follow-up program for individuals in acute distress and those in need of supportive contacts, stress management skills, or connection to additional services. To learn more, access support or resources, visit 605strong.com or call 211.



Questions?

Janet Kittams

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Betsy Schuster

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center



Behavioral Health Advisory Council Fiscal Reports: Fiscal Year 2021

The attached fiscal information is provided to the Behavioral Health Advisory Council as required by the Behavioral Health State Plan. The tables below show the budgeted amounts to support the Mental Health and Substance Use Disorder programs.

Mental Health Budgeted Items for FY2021	
Administration (Includes salaries, benefits, travel, etc.)	\$966,158
CYF Services	\$8,951,554
CARE	\$13,546,914
Room and Board	\$287,320
Outpatient Services	\$2,785,834
IMPACT	\$4,601,256
Mental Health Courts: Forensic Assertive Community Treatment	\$562,310
Transition Age Youth	\$561,202
Emergency Services	\$725,442
Indigent Medication	\$463,685
PATH	\$288,000
Special Projects (ex. Behavioral Health Services Information Systems Agreement)	\$173,157
Juvenile Justice Reinvestment Initiative	\$2,930,673
Systems of Care	\$1,836,713
Resource Information System (211)	\$855,101
Total:	\$39,535,319

Substance Use Disorder Budgeted Items for FY2021	
Administration (Includes salaries, benefits, travel, etc.)	\$965,188
Outpatient Services	\$4,697,738
Adolescent Substance Use Disorder Evidence-Based Services	\$269,076
Low-Intensity Services	\$4,735,598
Inpatient Services	\$5,643,785
Meth Programs	\$3,590,229
Detoxification Services	\$939,583
Gambling Treatment	\$244,000
Medicaid Programs	\$7,688,496
Recovery Supports-Specific to Pregnant Women's Programs	\$15,000
Supported Housing	\$558,450
Resource Development	\$50,989
Prevention Program	\$4,798,579
Criminal Justice Initiative	\$7,793,604
Total:	\$41,990,315

Mental Health and Substance Use Disorder Budgeted Grand Total: \$81,525,634

State Funds: 66.4% Federal Funds: 33.2% Other Funds: 0.4%

The Opioid SOR (\$4,019,346) is not included in the above amounts. A no-cost extension has been submitted.

Mental Health Program Descriptions

Children, Youth, and Family Services (CYF Services/CYFS)

CYF services are specialized outpatient services provided to youth with serious emotional disturbance (SED). Services may include case management, individual, group and/or family counseling. Family counseling may include Functional Family Therapy, which is a strength-based model for building skills to help improve family relationships, reduce behavioral issues and improve school performance.

Comprehensive Assistance with Recovery and Empowerment (CARE)

CARE services are specialized outpatient services that include counseling, case management services and psychiatric medication management for adults with serious mental illness (SMI).

Room and Board

Individuals 18 years old and older who have a serious mental illness and due to their illness are unable to function in an independent living environment may access room and board services. CARE or IMPACT services are provided based upon the individuals' needs.

Outpatient Services

Outpatient mental health counseling services are provided to individuals of all ages. It also includes services for First Episode Psychosis related to the 10% set aside of the Mental Health Block Grant.

Individualized Mobile Programs of Assertive Community Treatment (IMPACT)

IMPACT services provide intensive outpatient counseling, case management services and psychiatric medication management for adults living with SMI.

Mental Health Courts: Forensic Assertive Community Treatment (FACT)

Funding supports the mental health treatment component of Mental Health Courts. FACT utilizes the Assertive Community Treatment model similar to IMPACT but focuses on individuals involved in the justice system. The Mental Health Courts are located in Pennington County and Minnehaha County.

Transition Age Youth Program:

The Transition Age Youth Program provides services to individuals transitioning out of children's long-term placements. The program provides mental health treatment and support services along with supported housing services to ensure a successful transition to community living.

Emergency Services

Emergency services are available 24 hours per day, seven days a week, for individuals experiencing a mental health emergency or crisis. Emergency services are designed to stabilize the emergency situation and to provide immediate treatment in the least restrictive environment possible.

Indigent Medication

The Indigent Medication Program assists individuals, who do not exceed 185% of the Federal Poverty Level, with serious mental illness and/or substance use disorders in purchasing psychotropic medications, related lab costs and medications for substance use disorders, with temporary funding, until longer term funding can be obtained.

Projects for Assistance in Transition from Homelessness (PATH)

PATH is a federal grant to reduce or eliminate homelessness for adults with serious mental illnesses or co-occurring serious mental illnesses and substance use disorders, who are experiencing homelessness or are at imminent risk of becoming homelessness. PATH funds are used to provide an array of allowable services, including street outreach, case management, and services that are not supported by mainstream mental health programs.

Special Projects

Special Projects includes the Behavioral Health Services Information Systems State Agreement which provides funding to support data and outcome collection. These outcomes are the mental health data reported on the Behavioral Health State Plan.

Juvenile Justice Reinvestment Initiative (JJRI)

Under the Juvenile Justice Reinvestment Initiative, the Department of Social Services, the Division of Behavioral Health has been appropriated funding to develop evidence-based interventions for justice-involved youth on probation with the Unified Judicial System or on aftercare with the Department of Corrections. JJRI services are also available to youth who may not have formally entered into the juvenile justice system but are determined to be at risk for justice involvement.

Systems of Care (SOC)

Systems of Care is a wraparound approach to care coordination and service delivery for youth and families with complex needs. It is built on the values of being family driven, team-based, collaborative, individualized, and outcome-based. SOC helps families navigate and access services while also giving them the skills they need to become more self-reliant.

Resource Information System (211)

The Resource Information System, known as 211, provides information and referrals to resources for a person in a crisis or disaster, resources for social services, human services, legal and financial assistance or other related needs as well as assistance for physical and behavioral health needs.

Substance Use Disorder Program Descriptions**Outpatient Services**

Included in this category are early intervention, outpatient services, crisis services, and assessments. Early intervention services offer outpatient services to individuals who may have substance use related problems but are not diagnosed with a substance use disorder. Outpatient treatment services provide counseling services to individuals diagnosed with substance use disorders. An assessment includes an interview with a trained clinician to review a person's substance use and its impact on his or her daily life.

Adolescent Substance Use Disorder Evidence-Based Practices (Adolescent SUD EBP)

Adolescent SUD EBP programs provide services to youth involved or at risk for involvement in the justice system. The identified EBPs include Cannabis Youth Treatment (CYT) and Cognitive Behavioral Interventions for Substance Abuse (CBISA) for adolescents.

Low Intensity Services

Low intensity residential treatment services include residential, peer-oriented treatment programs for individuals with substance use disorders whose living situation or recovery environment is incompatible with recovery goals. To prepare the client to live successfully in the community, the program provides substance use disorder counseling along with case management services.

Inpatient Services

Inpatient treatment services provide residential treatment with medically monitored intensive treatment for individuals with severe substance use disorders.

Methamphetamine (Meth) Services

Intensive Methamphetamine Treatment (IMT) services offer long-term, evidence-based programming to individuals with severe methamphetamine use disorders. Individuals receiving IMT services require extended treatment to allow for recovery of cognitive capacity as well as on-going case management. Treatment may include residential services, outpatient treatment and care coordination to support long-term recovery.

Detoxification

Detoxification treatment services are residential treatment services delivered by trained staff who provide 24-hour supervision, observation and support for individuals who are intoxicated or experiencing withdrawal symptoms. The goal is to motivate the individual to seek further treatment services.

Gambling

Gambling services are designed for individuals who have a gambling problem. Services include assessments, crisis intervention, individual or group counseling, intensive outpatient, day treatment, and inpatient programs as described above.

Medicaid Programs

Medicaid funding supports Medicaid-eligible adolescents and adults who are receiving outpatient, low intensity residential, or inpatient services as described above.

Recovery Supports-Specific to Pregnant Women's Programs

Case management activities are provided by a case manager that bring services, agencies, resources, or people together, within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts. These case management activities are specific to pregnant women.

Supported Housing

Supported Housing provides a sober living environment for individuals 18 and older with a substance use disorder, or experiencing issues related to substance use. Services include case management and other supports to develop independent living skills.

Resource Development

Resource Development funding supports outcomes research on individuals who complete treatment services funded by the Division through community-based programs. Consultants also offer trainings on Native American Cultural Awareness.

Prevention

Prevention programs aim to engage and empower individuals and communities to choose healthy behaviors and make changes that reduce the risk of developing disorders. Programming can be delivered on an individual, community, or state-wide level.

Criminal Justice Initiative (CJI)

The Criminal Justice Initiative provides funding for substance use disorder services to individuals on probation or parole in urban and rural areas. Additionally, criminal thinking programming is offered to address criminogenic risk factors. Programs utilize evidence-based or evidence-informed practices that are appropriate for individuals involved with the justice system.