

BEHAVIORAL HEALTH SERVICES ACT AND SUBSTANCE USE DISORDER SERVICES PUBLIC LISTENING SESSION THEMES REPORT

July 30, 2024, 1 p.m. – 2 p.m. (Pacific Daylight Time)

Total Registrants: 636, Unique Viewers: 361

Question 1

How can DHCS assist stakeholders in understanding the requirements, limitations, and opportunities of the various county funding sources for substance use disorders (SUD)?

Participant Responses

Common Themes

- » **Compliance Tools and Resources:** Develop an audit tool to help stakeholders understand the limitations of funding sources and comply with requirements.
- » **Educational and Informational Support:** Host webinars and training sessions to provide detailed explanations of funding sources, their requirements, and ways to access them. Create guides, summary tables, and fact sheets that break down the details of funding sources and can be easily referenced by county staff and Behavioral Health Service Act coordinators.
- » **Transparency and Best Practices:** Encourage transparency between departments that provide funding to ensure stakeholders are well-informed about the processes and criteria. Facilitate platforms in which counties and local providers can share their best practices and experiences in leveraging funds effectively.
- » **Communication and Engagement Strategies:** Designate points of contact within DHCS for stakeholders to contact with questions regarding funding sources. Organize events during which DHCS provides an overview of the funds before they are solicited, helping stakeholders understand available opportunities. Include members as stakeholders to provide insights based on

Disclaimer: Feedback is not a reflection of DHCS opinion but participants of listening session

Behavioral Health Services Act and Substance Use Disorder Services – Behavioral Health Transformation Public Listening Session Themes Report

their experiences, which could help tailor funding sources to better meet the needs of the community.

Question 2

Do the SUD items in the Behavioral Health Service Act resonate with you? What would you add or change?

Participant Responses

Common Themes

- » **Integration and Funding:** Difficulty in integrating funding when regulations between mental health and substance use disorders contradict each other. Provide sufficient funding to break down siloes in service provision. Direct funds toward prevention and early intervention rather than just treatment. Enhance funding and flexibility to cover more comprehensive services, including housing and non-traditional treatment settings.
- » **Service Provision and Accessibility:** Allow services to be provided at non-traditional sites in the community, which could resonate with people seeking more accessible or less conventional treatment environments. The flexibility and use of resources to provide housing options for unhoused individuals suffering from SUDs indicates a need for more comprehensive support services. Include broader and more inclusive definitions that allow for innovative harm reduction strategies like safe injection sites.
- » **Definitions and Staffing:** The Substance Abuse Mental Health Services Administration definition's compatibility with safe injection sites is questioned, suggesting a need for definitions that support a broader range of harm reduction strategies. Add a SUD waived worker to address staffing shortages.
- » **Feedback on Current Approaches:** While the definitions (**Slide 20**) are seen as good, there is a perceived disconnect at the county level regarding the understanding of what is involved in recovery or harm reduction, which affects funding decisions.

Other Responses

- » **Training:** Improve training for county employees to better understand harm reduction and recovery, ensuring the more effective use of funds.

Disclaimer: Feedback is not a reflection of DHCS opinion but participants of listening session

Behavioral Health Services Act and Substance Use Disorder Services – Behavioral Health Transformation Public Listening Session Themes Report

Question 3

As DHCS develops guidance on the “Integrated Plan, Behavioral Health Oversight, Accountability, and Transparency Report” planning process and other Behavioral Health Service Act policy, what do you want DHCS to include regarding the delivery of SUD services utilizing Behavioral Health Service Act funds?

Participant Responses

Common Themes

- » **Comprehensive Coverage:** Develop guidance that aims to cover all aspects of SUD services, including prevention, treatment, and recovery support.
- » **Integration with Other Health Services:** Develop guidance on how SUD services can be integrated with other health and social services to provide holistic care.
- » **Funding Utilization:** Define instructions on how Behavioral Health Service Act funds should be utilized effectively for the enhancement of SUD services.
- » **Quality and Accessibility:** Maintain high-quality service delivery and improve accessibility for all individuals in need.

Other Responses

- » **Stakeholder Engagement:** Include feedback from a diverse range of stakeholders in the SUD community to inform the guidance.

Disclaimer: Feedback is not a reflection of DHCS opinion but participants of listening session

Behavioral Health Services Act and Substance Use Disorder Services – Behavioral Health Transformation Public Listening Session Themes Report

Question 4

Are there specific areas of guidance needed to further develop the use of housing intervention and behavioral health services, and support funding categories for individuals with a SUD?

Participant Responses

Common Themes

- » **Housing Support and Stigma Reduction:** Support with acquisition, indicating an investment in housing resources. Continue efforts on reducing stigma to decrease negative attitudes, which can help in finding available housing for individuals needing support. Expand the Recovery Bridge Housing with Behavioral Health Service Act funds to close the gap for individuals exiting residential treatment.
- » **Funding and Policy Guidance:** Develop guidance on housing interventions that help promote alternative housing to transitional/recovery housing. Balance expectations of reducing mental health service delivery by about 30% without new funding for SUDs.
- » **Specific Housing Programs:** Develop appropriate housing programs specifically for Transition Age Youth (TAY), ages 18-25. Emphasize the importance of ensuring that individuals in housing are not evicted if they relapse, focusing on recovery-oriented housing solutions.

Other Responses

- » **Community Involvement in Design:** Develop communities (e.g., tiny homes) designed by peers for peers. Include the people who are going to be housed in the decision-making process.

Disclaimer: Feedback is not a reflection of DHCS opinion but participants of listening session

Behavioral Health Services Act and Substance Use Disorder Services – Behavioral Health Transformation Public Listening Session Themes Report

Question 5

Are there other suggestions DHCS should consider for integrating SUD services into Full Service Partnerships (FSP)?

Participant Responses

Common Themes

- » **Accessibility and Continuity of Care:** Focus on improving accessibility and continuity of care for individuals with SUDs and ensure that they have ongoing support and treatment options available as needed.
- » **Comprehensive Care Integration:** Emphasize the importance of integrating SUD services with mental health and other medical services to provide comprehensive, holistic care to individuals in FSP programs.
- » **Staffing and Expertise:** Address the need for specialized staffing, including SUD specialists and trained professionals, to ensure clients receive expert care tailored to their specific needs. Stress the importance of ongoing training and education for staff members to stay updated on the best practices and emerging trends in SUD treatment.
- » **Evidence-Based Practices:** Advocate for the implementation of evidence-based practices in the treatment of SUDs within FSP programs to ensure the effectiveness and efficiency of the services provided.
- » **Funding and Resource Allocation:** Discuss the necessity of adequate funding and resources to support the integration of SUD services, addressing potential financial barriers to effective implementation.
- » **Policy and Regulation:** Develop and refine policies and regulations to facilitate smoother integration of SUD services into FSP programs, ensuring these services are accessible and appropriately managed.

Other Responses

- » **Community and Family Support:** Recognize the role of community and family support systems in the recovery process, suggesting that these elements be incorporated into SUD treatment planning.

Disclaimer: Feedback is not a reflection of DHCS opinion but participants of listening session

Behavioral Health Services Act and Substance Use Disorder Services – Behavioral Health Transformation Public Listening Session Themes Report