

Behavioral
Health Strategic
Plan:
Overview and
Next Steps

Agenda

- Data and Current Investments
- Project Goal and Process
- Focus Areas and Strategies
- Gap Analysis Preview
- Next Steps



Data and Current Investments



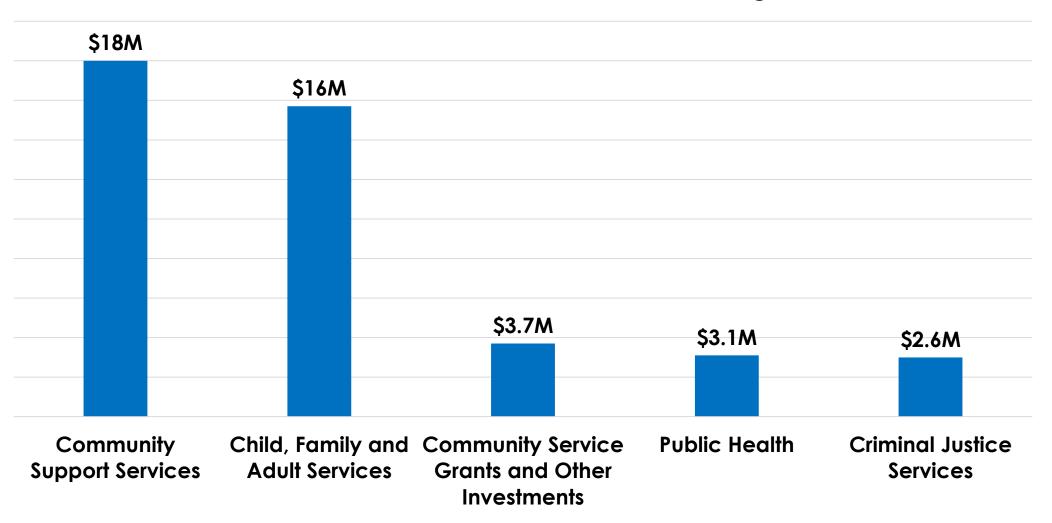
Local Behavioral Health Data Points

- 1 in 5 adults reported experiencing poor mental health for 8 or more days in a month. (2020-2021)
- Nearly 25% of adults are diagnosed with depression. (2020-2021)
- From 2019 to 2021, emergency department visits for suicide attempts in children under 18 years of age increased by 20%.
- From 2021 to 2022, drug overdose deaths increased by 22%.

^{*}Data drawn from Mecklenburg County's 2022 Community Health Assessment and NCDHHS Substance Use Action Plan Data Dashboard.

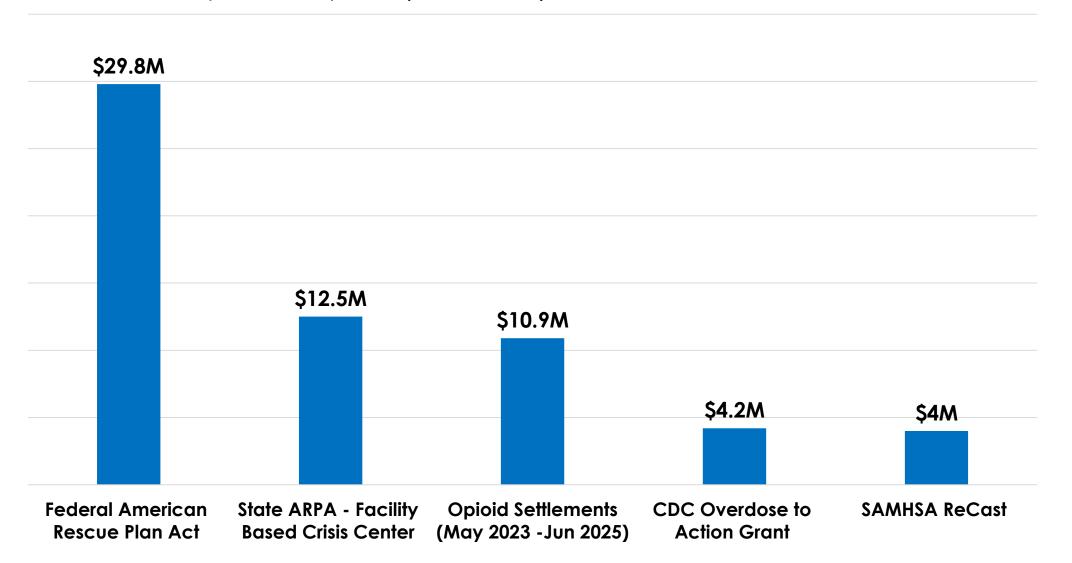
Mecklenburg County Funding for Behavioral Health

<u>Approximately \$43.4 million dollars in local funding invested in behavioral health related services during FY24.</u>



Additional Funding for Behavioral Health

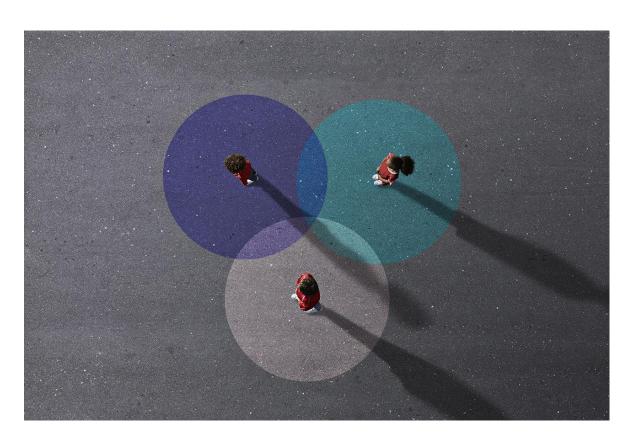
Another \$61.4 million dollars in state and federal funding spanning multiple fiscal years (FY23-FY29) for behavioral health initiatives.





Project Goal and Process

Behavioral Health Strategic Plan



Project Goal: Develop a strategic plan to improve access, coordination, and quality of behavioral health services in the community.

Aligned with BOCC Priority of Access to Healthcare.

Strategic Planning Process



Steering Committee consisted of representatives from Mecklenburg County, Alliance Health, Atrium, Novant, CMS, justice system, and advocacy organizations.



Steering Committee met from November 2022 to April 2024 to define key priorities, strategies and action steps informed by community input.



Project consultant conducted nearly 50 stakeholder interviews with local subject matter experts and individuals with lived experience.



County staff held community engagement sessions with nearly 700 residents participating from a wide variety of backgrounds.



Focus Areas and Strategies

Strategic Plan's Five Focus Areas



Collaborative and Coordinated Care



Objective

Create a comprehensive, collaborative, and accountable network of strength-based services and supports.



Strategy 1

Develop a crosssystem, behavioral health coordinated services model.



Strategy 2

Implement training protocol for identified service providers through a phased-implementation approach.



Strategy 3

Develop targeted outreach for populations that interact with multiple systems.

Social Determinants of Health



Objective

Increase resources to address non-medical factors that influence outcomes.



Strategy 1

Provide resource connections and navigation to individuals with behavioral health needs.



Strategy 2

Identify and support evidence-based, resilient community programs in underresourced neighborhoods.



Strategy 3

Increase permanent housing and wrap-around supports for individuals with behavioral health needs.

Prevention and Early Intervention



Objective

Focus resources on programs and services designed to assist people at greater risk of developing behavioral health needs.



Strategy 1

Create a robust publicawareness campaign.



Strategy 2

Increase availability of Mental Health First Aid by offering education in schools, libraries, places of worship and other settings.

Access to Care



Enhance and increase the ability to see a qualified service provider.



Strategy 1

Assess and develop entry points to the behavioral health system to address identified gaps.



Strategy 2

Evaluate existing, online service-navigation portals to identify opportunities to optimize utilization.

Service Array



Objective

Reduce gaps in services and establish a comprehensive and robust service continuum.



Strategy 1

Utilize gap analysis findings to create a comprehensive service continuum.



Strategy 2

Create a workforce pipeline to grow the number of behavioral health providers.



Strategy 3

Facilitate collaboration between providers and natural supports.

Cross Cutting Factors

Funding

Advocacy & Policy

Continuous Quality Improvement

Diversity, Equity, and Inclusion

Trauma-Competent Workforce Development



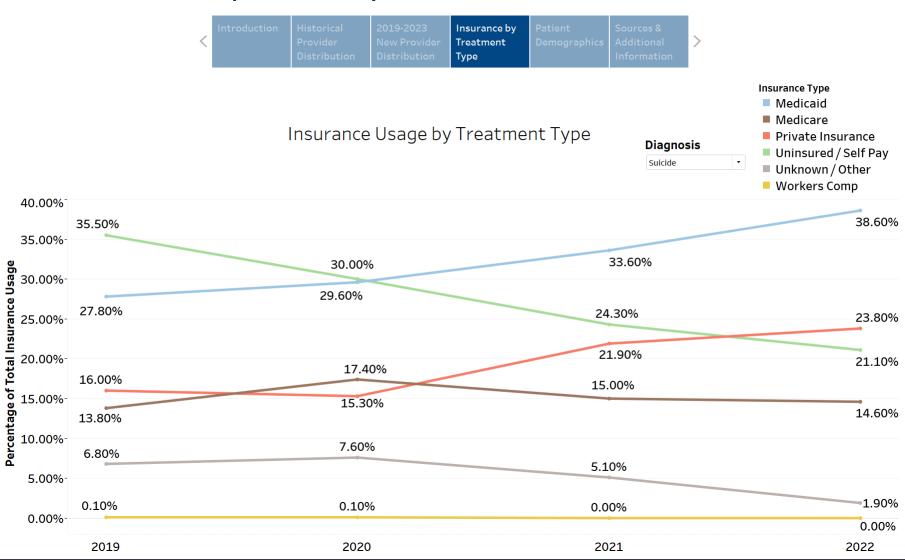
Gap Analysis Preview

Gap Analysis Project Goal



- Define data trends and current capacity of the behavioral health services system.
- Key step to inform the implementation process.
- Anticipated publication of report and accompanying dashboard during summer 2024.

Gap Analysis Data Dashboard



Gap Analysis Data Dashboard (Cont.)



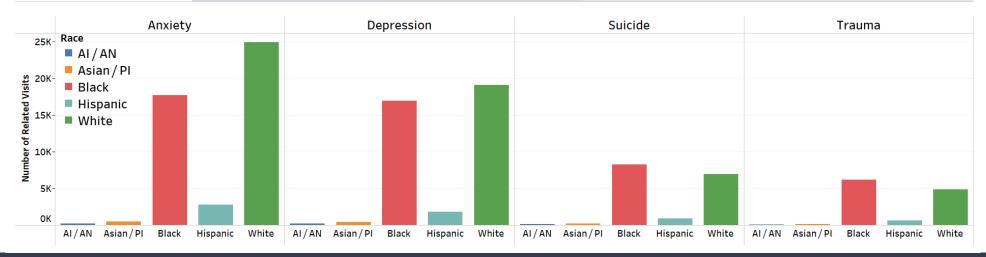
Emergency Department Visits Demographic Analysis

Year

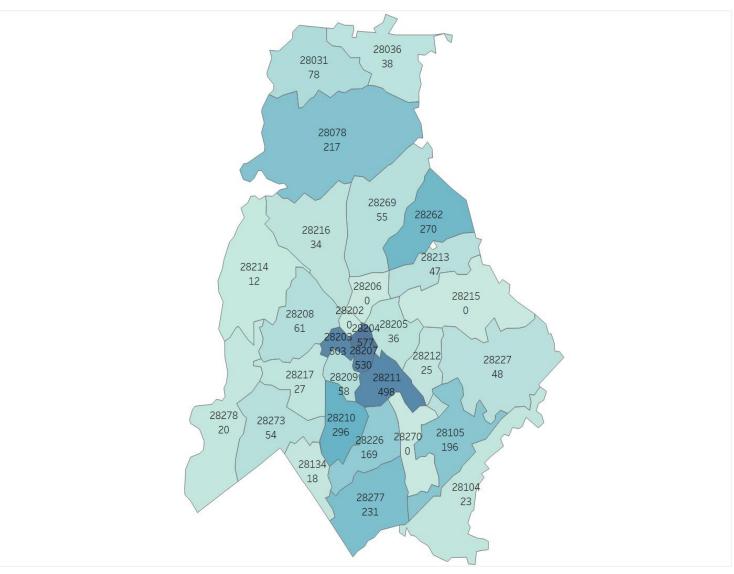
Select year(s) and a treatment type below to drill down by age and race demographics.			(AII)		
А	nxiety	Depression	Suicide	Trauma	
47	7,085	39,462	16,760	12,178	

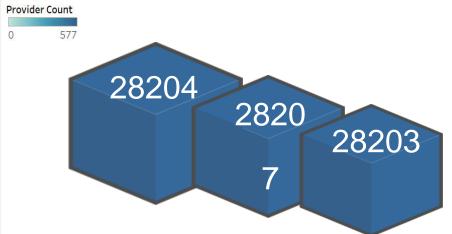
Select year(s) and a treatment type below to drill down by age and race demographics.

Groups	Anxiety	Depression	Suicide	Trauma
Adolescents and Teens (1-17)	2,851	3,573	2,439	1,565
Adults (18-64)	33,759	26,923	13,597	9,289
Seniors (65+)	10,475	8,966	724	1,324



Provider Distribution Study





The three zip codes with the largest behavioral healthcare provider availability are **28204**, **28207**, and **28203**.



There were no behavioral health providers with a primary practice address located in **28202**, **28206**, **28215**, and **28270**.



Next Steps

Next Steps

- The Behavioral Health Strategic Plan will be published for 30-day public comment period.
- Plan will be posted at MeckNC.gov landing page from May 8 to June 8, 2024.
- Residents can submit feedback via the County website, email (<u>BHStrategicPlan@MeckNC.gov</u>) or Phone (704-975-5042).
- The final plan will be published before the end of the fiscal year after incorporating feedback from public comment period.



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