

Difficult to Place Workgroup Priority Grid

Current and In Process	Developing	Future Development
Resource Guide Development	Intensive Case Management for these individuals	Integration of Behavioral Health and Primary Care
CARE Assessments timely	Crisis beds for children	Develop Emergency Department Protocols for treatment and communication the same for physical health priorities
Timely outpatient supports - CMHCs	High Fidelity Wraparound for these kids	Mobile Crisis
Collaboration between mental health, hospitals, community, justice, MCOs, and other services - develop a warm hand-off so the individual has things in place at discharge or transition	Transition to community integration	Stepdown beds for children, with services to assist with transition to the community.
Regional Crisis bed capacity	Increase Peer Support for all systems	
Discharge plan collaboration between providers, i.e., maybe calls to be certain everyone is aware of the plan. Someone to follow up with the individual to be certain plan is working and make changes if necessary	Clubhouse model	
inpatient bed availability	Homeless outreach to connect to services	
Crisis Intervention Team - Diversion to treatment	Cognitive Behavioral Therapy - Moving from inpatient setting to community	
Supported Employment	Trauma care	
NFMH Training	Complex staffing team to meet for difficult discharges or admissions to include: NFMHs, Hospitals, State Licensed Facilities, ICFs, State Hospitals, DD residential, PRTFs, Other	
MFP - working with individuals who choose to transition to the community. Timely transition with services and transitional services.		