

Reviewer Name: _____

Date: _____

Part I: Description of County’s Current Continuum of Behavioral Health Care	
QUESTION:	REVIEWER FEEDBACK:
<p>1. Describe how the County’s publicly funded behavioral health system is organized, including a description of the roles of/collaboration with the applicable entities below:</p> <ul style="list-style-type: none">• The Local Mental Health Authority;• The Community Mental Health Program;• Tribe(s);• Coordinated Care Organization(s);• Community hospitals;• Courts;• Law Enforcement and Community Corrections;• Schools;• Community Action Agencies and Housing Authorities;• ODHS; and• Other local entities with respect to the delivery of publicly funded mental health and substance use disorder services.	<p>🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):</p>
	<p>? ADDITIONAL INFORMATION/DETAILS NEEDED:</p>
	<p>★ STRENGTHS:</p>
	<p>📝 AREAS FOR IMPROVEMENT:</p>
Part II: Description of Core Service Areas	
QUESTION:	REVIEWER FEEDBACK:
<p>1. Explain how the County will deliver or ensure delivery of the Required Services, as well as any Other Allowable Services, for each Core Service Area outlined in Exhibit B of the new CFAA differentiating between systems of</p>	<p>🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):</p>













care for children and adults including discussion of services for young adults in transition and older adults, as appropriate. <ul style="list-style-type: none">• System Management & Coordination• Crisis Services• Forensic & Involuntary Services• Outpatient & Community-Based Services• Residential & Housing Supports• Behavioral Health Promotion & Prevention• Block Grant Funded Services• Invoiced Services	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	📝 AREAS FOR IMPROVEMENT:
2. Describe the role of peers in provision of the Core Service Areas.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	📝 AREAS FOR IMPROVEMENT:
3. Describe how the County will ensure the delivery of trauma informed behavioral health services.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:











	★ STRENGTHS:
	📝 AREAS FOR IMPROVEMENT:
Describe how the County will ensure delivery of culturally and linguistically responsive and appropriate behavioral health services.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	📝 AREAS FOR IMPROVEMENT:
4. Describe the County’s care coordination and transition planning processes for clients including how the County will:	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:

<ul style="list-style-type: none">• Coordinate discharge from Oregon State Hospital, community hospitals, residential treatment programs, and jails;• Determine the most appropriate service provider for clients among a range of qualified providers;• Ensure that appropriate behavioral health referrals are made for clients;• Ensure that clients are served in the least restrictive setting possible based on their strengths and needs; and• Engage in transition planning between levels of care or components of the system of care including transitioning from the youth to the adult services system and transitioning out of forensic/involuntary services.	<div>★ STRENGTHS:</div> <div>📝 AREAS FOR IMPROVEMENT:</div>
Part III: Description of Community Needs Assessment & Planning Process	
QUESTION:	REVIEWER FEEDBACK:
<p>1. Describe the population-based community needs assessment process conducted by the County, including how the County:</p> <ul style="list-style-type: none">• Coordinated its local planning with the development of the community health improvement plan under ORS 414.575 by the coordinated care organization(s) serving the area.• Involved consumers, advocates, families, service providers, schools, and other interested parties in the planning process.	<div>🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):</div> <div>? ADDITIONAL INFORMATION/DETAILS NEEDED:</div>













<ul style="list-style-type: none">Involved the local mental health advisory committee described in ORS 430.630(7).<ul style="list-style-type: none">Coordinated with the local public safety coordinating council to coordinate services among the adult and juvenile criminal legal systems, adult and juvenile corrections systems and local behavioral health programs to ensure that persons with behavioral health disorders who come into contact with the legal and corrections systems receive needed care and to ensure continuity of services for adults and juveniles leaving the corrections system.Determined the types of behavioral health services needed locally including developmentally appropriate, culturally, and linguistically specific services.Determined the types of housing supports needed locally for individuals with behavioral health disorders and their families including, but not limited to, capacity development, rental assistance, and other barrier removal assistance.	
	★ STRENGTHS:
	✍ AREAS FOR IMPROVEMENT:
2. Describe the data or information the County used to select their activities and strategies for Behavioral Health Promotion and Prevention (BHPP).	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:

<ul style="list-style-type: none">Describe how selected activities align with existing local prevention and promotion strategies.Describe how BHPP activities prioritize the determinants of behavioral health wellness including, but not limited to, development and maintenance of healthy communities, skill development, and social emotional competence across the life span.	★ STRENGTHS:
	✍ AREAS FOR IMPROVEMENT:
Part IV: Description of Unmet Service Needs & Critical Gaps	
QUESTION:	REVIEWER FEEDBACK:
1. Describe the unmet service needs and critical identified during the needs assessment described above including the unmet needs and critical gaps of required priority populations listed in Exhibit B of the CFAA. Counties should take a data-driven approach in identifying and describing these unmet needs and gaps.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	✍ AREAS FOR IMPROVEMENT:
2. Describe how the County plans to address the unmet service needs and gaps identified in the needs assessment. In describing services and activities, Counties must also discuss their plan for implementation of these services and activities. Special attention should be made in ensuring each of the required priority populations listed in Exhibit B of the CFAA are addressed in these implementation plans.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	✍ AREAS FOR IMPROVEMENT:

3. Describe any planning activities related to development or expansion of Crisis Stabilization Center services including location and capacity, if applicable.	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
Part V: Metrics	
QUESTION:	REVIEWER FEEDBACK:
1. At minimum, the metrics used to track performance under this plan should include those listed for each Core Service Area described in Exhibit B .	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
2. If there are additional metrics the county wishes to report that are specific to its plans, please list them including the expected outcome associated with the metric.	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:

Part VI: Budget Narrative	
QUESTION:	REVIEWER FEEDBACK:
1. Did the County coordinate with the budgetary cycles of state and local governments that provide funding for behavioral health services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Describe how County will maximize resources for consumers and minimize administrative expenses.	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
3. Describe how County will ensure that Block Grant funds are used to supplement not supplant existing resources.	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
Part VII: Description of Technical Assistance Needs	
QUESTION:	REVIEWER FEEDBACK:
1. For purposes of the Local Plan and to begin any technical assistance needed now please describe any concerns the county has with the required outcome and financial reporting.	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:

	★ STRENGTHS:
	📌 AREAS FOR IMPROVEMENT:
2. Please describe what training and technical assistance is needed from OHA to support the County’s implementation of their Local Plan.	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	📌 AREAS FOR IMPROVEMENT:
Part VIII: Required Attachments	
Attachments:	REVIEWER FEEDBACK:
Attachment #1 – Budget	🚩 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	? ADDITIONAL INFORMATION/DETAILS NEEDED:
	★ STRENGTHS:
	📌 AREAS FOR IMPROVEMENT:

Attachment #2 – Current org chart with estimated FTEs & vacancies	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
Attachment #3 – List of key contacts and their contact information	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT:
Attachment #4 – List of subcontractors used by the LMHA/CMHP to provide any or all of the services funded through the CFAA. The list must include: <ul style="list-style-type: none">• Subcontractor name• Amount of CFAA funds allocated/awarded to the subcontractor• Description of CFAA-funded services and supports provided by the subcontractor	 SERIOUS CONCERNS (e.g. health or safety issues, potential rule or statute conflicts):
	 ADDITIONAL INFORMATION/DETAILS NEEDED:
	 STRENGTHS:
	 AREAS FOR IMPROVEMENT: