



Human Services
Research Institute

North Dakota Behavioral Health Plan

Updates and Discussion with the Behavioral Health
Planning Council | December 2025

Plan Updates

Aim 1 – Strategic Planning

- October dashboard published and available at www.hsri.org/ND-plan

Aim 5 – Children and Youth

- Developing a goal related to a youth partial hospitalization program that recently opened in Bismarck

Aim 7 - Workforce

- Updated objectives to reflect expanded and continuing work of the Training Academy for Addiction Professionals (TAAP)
- Aim 7 workgroup is developing four new objectives

Aim 11 – Project HEAL

New goal 11.4: Expand capacity for culturally-informed trauma-focused treatment for youth through Project HEAL.

- Objective 1: Provide education on historical trauma for child-serving professionals.
- Objective 2: Provide culturally-informed trauma-focused treatment trainings for clinicians.

Reworked Aim 13 – Data and Quality

Goal 13.3: Align state and local data systems to support system goals of quality, transparency, and community health

- Objective 1: Establish a Quality and Technical Services team within the Behavioral Health Division (complete)
- Objective 2: Modernize the Behavioral Health Division data infrastructure through the creation of a data warehouse and establishment of a data governance framework.
- Objective 3: Modernize the electronic health record system for HHS clinics.
- Objective 4: Develop and implement a BHD-wide quality framework

Updating BHPC progress metrics for the dashboard: Expect a brief survey in January

Last assessment was July 2025

Will be looking for progress during the second half of 2025 (through 12/31/25)

Consensus Ratings

1

Not Yet

We have not made any significant progress toward this aim.

2

Modest Progress

We have made some steps toward achieving this aim but have not made significant progress.

3

Progressing

We have made significant progress but still have a long way to go.

4

Well on Our Way

We have made significant progress and are well on our way to achieving this aim.

5

Achieved

This aim is nearly or fully achieved.

Progress Metrics Brainstorm

#	Aim	Potential Metrics
1	Develop and implement a comprehensive strategic plan	BHPC consensus ratings, quarterly dashboards
2	Invest in prevention and early intervention	self-reported mental health and substance use problems among youth, adult/youth prevalence, prevention and early intervention spending as a proportion of overall budget
3	Ensure all North Dakotans have timely access to behavioral health services	screening rates, average wait times for services
4	Expand outpatient and community-based service array for adults	penetration rates for adults in clinics (will not capture people receiving services in other settings), crisis or ED visits for adults, use of 1915(i) services for adults
5	Expand outpatient and community-based service array for children, youth, and families	penetration rates for children/youth in clinics (will not capture people receiving services in other settings), availability of youth-specific services, crisis or ED visits for children/youth, use of 1915(i) services for youth
6	Strengthen diversion and reentry practices through cross-system collaboration to reduce incarceration, promote community integration, and support justice-involved people.	rates of prison and jail re-entry, jail diversion rates, 30-day post-release treatment engagement, enrollment in FTR/Community Connect
7	Engage in targeted efforts to recruit and retain a qualified and competent behavioral health workforce	numbers of providers licensed/certified, turnover and vacancy rates at clinics and contracted providers, geographic distribution of providers
8	Increase access and improve outcomes for rural populations	% of population within a x-hour drive of key services (would need to carefully define), provider-to-population ratio in each region, penetration rates for rural populations
9	Ensure the system reflects its values of person-centeredness, health equity, and trauma-informed approaches	person-centered practices self-assessment information, participant experience data, involuntary commitment rate by region and demographic
10	Encourage and support communities to share responsibility with the state for promoting high-quality behavioral health services	# of local behavioral health-related coalitions or community organizations that are designated by BHPC as active
11	Partner with tribal nations to increase health equity for American Indian populations	# of joint initiatives/partnerships with Tribes, penetration rates for American Indian populations in clinics
12	Diversify and enhance funding for behavioral health	% of behavioral health service budget coming from non-general revenue sources, Medicaid provider network size, # and size of grants secured by the state
13	Conduct ongoing, system-wide, data-driven monitoring of need and access	regularity and timeliness of public reporting on key metrics, # or % of providers reporting into state systems

Thank You.



www.hsri.org/ND-plan

Bevin Croft
bcroft@hsri.org

