

REGIONAL GAPS

Priority/ Need	Specific Descriptions
Youth	1. 24/7 youth behavioral health crisis response
	2. Sustainable funding and expansion of youth mental health diversion programs such as Juvenile Assessment Services Triage Team (JASTT) in Carson City
	3. Identification and funding for evidence-based youth treatment and interventions for juvenile justice diversion
	4. Behavioral health professionals capable of treating youth
Behavioral health system with variety of levels of care	1. Currently our region's primary levels of care are inpatient and outpatient behavioral health services. The region needs development of all levels of care described by the LOCUS (Levels of Care Utilization System)
	2. Sustainable funding for Assertive Community Treatment (ACT)
	3. Sustainable funding for support and expansion of Certified Community Behavioral Health Clinics (CCBHC's)
	4. Peer support services
	5. Group homes with varying levels of care
	6. Affordable and supportive housing

	7. Clarification of NRS 433A legal hold process to increase provider understanding and standardization of care
	8. Options for non-emergency behavioral health transport for mental health crisis holds
	9. Development of legal information sharing process of multidisciplinary teams for vulnerable adults 18-59
	10. Develop services to support continuity of care (i.e. continuation of medication/ service connection)
	11. Funding options for inmate healthcare
Crisis Stabilization and Diversion	1. Need for 24/7 behavioral health crisis response
	2. Need for sustainable funding mechanism for crisis triage centers such as Mallory Crisis Center
	3. Need for crisis triage centers in strategic locations in the rural counties to allow individuals to stay in their communities, reduce unnecessary long-distance travel, and reduce pressure on urban counties.
	4. Sustainable funding for existing Mobile Outreach Safety Teams (MOST)
	5. Case management follow up for MOST
	6. Sustainable funding for existing Forensic Assessment Services Triage Teams (FASTT)

	7. Sustainable funding to support Crisis Intervention Training programs
	8. Funding to expand crisis stabilization programs such as Crisis Intervention Training, Mobile Outreach Safety Teams, and Forensic Assessment Services Teams to other counties
Workforce Development	1. Behavioral health professionals with capability to treat youth
	2. Behavioral health professionals that are capable of treating co-occurring disorders
	3. Lack of psychiatrists, behavioral health clinicians, substance use treatment professionals
	4. Lack of clinical internship sites
	5. Funding opportunities to entice healthcare providers into rural areas
Data Needs	1. Accurate behavioral health data that is aligned with national indicators
	2. Legal hold tracking data
	3. Technical assistance for program evaluation
	4. Mechanism for central data
	5. Data Infrastructure: better communication between state and county (e.g., case management systems, referral tracking, case processing, outcomes)

	6. Streamline use of research screening/assessment tools