Dear Colleagues:

In our 6th year serving the state of Nebraska, it is our privilege to thank every one of you for your partnership. Our mission is to improve access to behavioral health care across the state by developing a skilled and passionate workforce. From rural communities seeking a psychiatric prescriber to primary care clinics integrating a therapist, BHECN is developing solutions to the access challenges that face our state’s consumers and families.

Our work is broad and requires collaboration. In this effort, we have benefited from the creativity and dedication of so many organizations and individuals. Here are just a few examples:

- Implementation of a grant from the Rural Futures Institute at the University of Nebraska to develop online mentoring programs for rural high school and college students (see page 11)
- Launch of a free statewide behavioral health jobs website in collaboration with the Nebraska Regional Behavioral Health Authorities (see page 21)
- Partnership with 10 community organizations to sponsor a School Mental Health Conference which attracted 270 attendees (see page 21)

It is our hope that this report recognizes the spirit of collaboration which inspires us to come to work each day. As Steven Johnson once said, “innovation doesn’t come just from giving people incentives; it comes from creating environments where their ideas can connect.” In that spirit, BHECN aspires to be a common ground where passionate individuals can solve our state’s mental health workforce challenges.

Sincerely,

From the Directors

Howard Liu, MD
Director, Behavioral Health Education Center of Nebraska (BHECN)

Brent Khan, EdD
Co-Director, Behavioral Health Education Center of Nebraska (BHECN)
BHECN EXECUTIVE COMMITTEE MEMBERS

Rod Markin, M.D., Ph.D.
Associate Vice Chancellor for Business Development and Chief Technology Officer
University of Nebraska Medical Center

Rhonda Hawks
The Hawks Foundation

Steven Wengel, M.D.
UNMC College of Medicine, Department of Psychiatry, Chair and Professor

Tom Svolos, M.D.
Creighton University School of Medicine, Department of Psychiatry, Chair and Professor

Mary Kunes-Connell, Ph.D., R.N.
Creighton University College of Nursing, Associate Dean for Academic and Clinical Affairs and Professor

Howard Liu, M.D.
BHECN Director

Brent Khan, Ed.D.
BHECN Co-Director

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Regional Administrator, Region 3

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President and CEO, Community Alliance

Aileen Brady
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VP of Behavioral Health, Compliance, and Government Relations, Boys Town

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H. Dele Davies, M.D.
Vice Chancellor for Academic Affairs, UNMC

Joe Evans, Ph.D.
Director, Department of Psychology, Munroe-Meyer Institute, UNMC

Donald Frey, M.D.
Vice President for Health Sciences, Creighton University

Ingrid Gansebom
Regional Administrator, Region 4

Kay Glidden
Assistant Regional Administrator, Region 3; Training Coordinator, BHECN Kearney

CJ Johnson
Regional Administrator, Region 5

Leon Jons, M.D.
Rural Primary Care Physician

Mary Seacrest
Regional Administrator, Region 2

Blaine Shaffer, M.D.
Chief Clinical Officer, Division of Behavioral Health, DHHS

Patti Jurjevich
Regional Administrator, Region 6

Sheree Keely
Vice President for Behavioral Health, Alegent Creighton Health

Nancy Kelley
President, Board of Directors NAMI Nebraska

Kasey Moyer
Associate Director, Mental Health Association of Nebraska
The Behavioral Health Education Center of Nebraska (BHECN), pronounced “beacon”, was established in 2009 by LB 603 to improve access to mental health and substance abuse services commonly referred to as behavioral health (BH) services for all Nebraskans through development of a skilled workforce. To accomplish this objective, BHECN’s workforce development activities have been focused on four major efforts: a) **Recruitment** through development of a “pipeline” into behavioral health professions, b) **Preparation** of students in the provision of quality BH services, c) **Training and Retention** of the current BH workforce, and d) **Evaluation and Reporting** of the BH workforce in Nebraska. Significant activities in all four of these areas are noted in the following report. Highlights from each area of activity are listed:

**BH RECRUITMENT AND PIPELINE DEVELOPMENT**

- **Ambassador Program** conferences designed to attract high school students (130) to careers in behavioral health (psychiatry, psychology, social work, marriage and family therapy, counseling, and psychiatric nursing).
- **College Ambassador** conferences for undergraduate students (67) interested in graduate training leading to careers in behavioral health.
- **Virtual Mentorship Network** program, funded by the Rural Futures Institute, to conduct behavioral health career mentorship sessions for high school and college students using interactive internet-based technology.

**PREPARATION OF BH STUDENTS**

- **Support for psychiatry training** (4.2 residents annually) with 7 of 11 recent graduates remaining in Nebraska. One graduate accepted a position in a rural underserved community and 2 accepted positions at agencies serving urban underserved communities.
- **Psychology traineeship** (5 trainees) stipends to support doctoral internships in integrated BH in primary care in rural areas of the state.
- **Medical and BH Student Rotations** (1,519 students) at Lasting Hope Recovery Center and Community Alliance, urban underserved settings with a recovery focus.
- **Medical Student recruitment into psychiatry** 9.68% of University of Nebraska Medical Center (UNMC) senior medical students (12 students) chose psychiatry as a profession – more than twice the national average. At Creighton University School of Medicine, 7.1% (11 students) chose the psychiatry profession.
- **Rural psychiatry residency rotations** (10 residents) psychiatry residents spent 1 month at rural psychiatry facilities in Hastings, Kearney and North Platte.
- **Supervision and intensive training for Applied Behavior Analysis students** (7 students) in working with children with autism spectrum disorders through the Munroe-Meyer Institute (MMI) Autism Care for Toddlers (ACT) Clinic.
- **Practicum and internship training in integrated BH in primary care for Master’s degree students** (16 students) from UN-Kearney, Doane, UN-Omaha, Bellevue, Chadron State, and UNMC.
TRAINING AND RETENTION OF BH WORKFORCE

- **Two annual BHECN conferences** held on Integrated Behavioral Health Care (170 participants in 2014) and School Mental Health (270 participants in 2015) for attendees from all BH and education professions.

- **In-service training to 3,207 participants** from state and community BH agencies on a variety of topics including Trauma-informed Care, Compassion Fatigue, and Mental Health First Aid.

- **Online training on BH topics** through webinars (325 participants) and learning modules (77 participants).

- A “**Jobs Website**” designed by BHECN in partnership with Region 5 has been used by 63 employers and 291 prospective employees.

- A “**Retention Toolkit**” on best practices in BH has been disseminated to BH employers, trainees, and providers statewide.

EVALUATION AND REPORTING

A “**Nebraska Behavioral Health Workforce Analysis**” report is developed semi-annually by BHECN and College of Public Health faculty and staff for presentation to the Nebraska Legislature to measure training and workforce development impact.

The BHECN Ambassador Program introduces rural students to behavioral health careers. It recruits and mentors students — from high school to college through professional school — and into practice as behavioral health professionals.
BEHAVIORAL HEALTH NEED

Children
Based on the National Research Council and Institute of Medicine report that gathered findings from previous studies, it is estimated that 13 – 20 percent of children living in the United States (up to 1 out of 5 children) experience a mental disorder in a given year and an estimated $247 billion is spent each year on childhood mental disorders (National Research Council and Institute of Medicine: Preventing mental, emotional, and behavioral disorders among young people: progress and possibilities, 2009; CDC - Mental Health Surveillance Among Children — United States, 2005–2011).

Adults
According to the World Health Organization, mental illness results in more disability in developed countries than any other group of illnesses, including cancer and heart disease. Other published studies report that about 25% of all U.S. adults have a mental illness and that nearly 50% of U.S. adults will develop at least one mental illness during their lifetime. (CDC Report: Mental Illness Surveillance Among Adults in the United States, 2011). In Nebraska, it is also estimated that 7.6% (114,000) of individuals 12 or older have alcohol abuse or dependence. Of these, 5.3% received treatment. An estimated 2.2% (32,000) of individuals have an illicit drug dependence. Of these, 9.3% received treatment. (SAMHSA, 2015). Substance use disorders commonly co-occur with mental illness for a variety of reasons, including family history, self-medication with alcohol/substances, etc.

Why BHECN Was Created
The Behavioral Health Education Center of Nebraska (BHECN) was created by the Legislature in 2009 to address the shortage of behavioral health professionals in rural and underserved areas of the state.

MISSION: BHECN is dedicated to improving access to behavioral health care across the state of Nebraska by developing a skilled and passionate workforce.
BY THE NUMBERS

Since 2010, Nebraska has made some progress increasing the number of behavioral health professionals—particularly in the number of nurse practitioners, physician assistants, and independent mental health practitioners.

<table>
<thead>
<tr>
<th>Professional</th>
<th>2010</th>
<th>2014</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatrists</td>
<td>161</td>
<td>156</td>
<td>-3.10%</td>
</tr>
<tr>
<td>Psychologists</td>
<td>318</td>
<td>366</td>
<td>15.10%</td>
</tr>
<tr>
<td>Nurse Practitioners</td>
<td>62</td>
<td>98</td>
<td>25.60%</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>9</td>
<td>16</td>
<td>43.70%</td>
</tr>
<tr>
<td>Independent Mental Health Practitioners</td>
<td>589</td>
<td>814</td>
<td>38.20%</td>
</tr>
<tr>
<td>Mental Health Practitioners</td>
<td>991</td>
<td>918</td>
<td>-7.30%</td>
</tr>
<tr>
<td>Addiction Counselors</td>
<td>138</td>
<td>143</td>
<td>3.60%</td>
</tr>
</tbody>
</table>

78 Nebraska counties HAVE A HIGH NEED FOR BEHAVIORAL HEALTH SERVICES based on poverty rates, ratio of youth to adult population, and/or ratio of elderly to adult population.

32 Nebraska counties DO NOT HAVE A BEHAVIORAL HEALTH PROVIDER of any kind.

71 Nebraska counties DO NOT HAVE A PSYCHIATRIC PRESCRIBER—either a psychiatrist, psychiatric nurse practitioner, or psychiatric physician assistant.

See definitions of behavioral health workforce professions on page 9.
AN AGING WORKFORCE

The behavioral health workforce is aging. In most professions, at least 1 in 8 professionals are over the typical retirement age of 65 and more than half are over the age of 50. We need to recruit, train, and retain younger professionals to replace professionals as they retire.

Addiction counselors, psychiatrists and nurse practitioners are at the greatest risk of retirement.

See definitions of behavioral health workforce professions on page 9.
BEHAVIORAL HEALTH WORKFORCE PROFESSIONS

**Psychiatrist**: Licensed physician who specializes in the diagnosis, treatment, and prevention of mental illnesses. Psychiatrists prescribe medications, provide talk therapy, and care for patients with complex medical problems.

**Psychologist**: Independently licensed behavioral health professional who performs psychological assessments, provides therapy, and conducts research for a variety of mental health disorders. Licensed psychologists require a doctoral degree in an applied area of psychology.

**Nurse Practitioner (APRN-NP)**: Advanced practice registered nurses can diagnose and treat mental illnesses. This is an advanced practice license beyond that held by registered nurses.

**Physician Assistant (PA)**: Under physician supervision, Physician Assistants conduct histories and physicals, perform psychiatric evaluations and assessments, order and interpret diagnostic studies, establish and manage treatment plans and order referrals as needed.

**Licensed Mental Health Professional (LMHP)**: A counselor in the state of Nebraska who holds a license to offer or render mental health practice services. Mental health practitioners include social workers, professional counselors, and marriage and family therapists.

**Licensed Independent Mental Health Professional (LIMHP)**: A counselor in the state of Nebraska who holds a LMHP license to offer or render mental health practice services and has completed supervised hours working with clients diagnosed under the major mental illness or disorder category.

**Licensed Addiction Counselor (LADC)**: A counselor in the state of Nebraska who holds a license to practice general counseling theories and treatment methods adapted to specific addiction theory and research for the express purpose of treating any alcohol or drug abuse, dependence or disorder.
GEOGRAPHIC MISDISTRIBUTION

Providers are not evenly distributed across the state of Nebraska. Often they are concentrated in the state’s metropolitan urban areas including Douglas, Lancaster, and Hall counties. However, counties with the greatest distribution of providers continue to experience major access issues limited by a shortage of providers.

Number of mental health professional by county, 2014

The maldistribution is even more apparent in the number and location of psychiatric prescribers (psychiatrists, psychiatric nurse practitioners, or psychiatric physician assistants). Only 21 Nebraska counties have a psychiatric prescriber practicing primarily in that county.

Number of psychiatric prescribers by county, 2014
Recruiting the Future Workforce

THE BHECN AMBASSADOR PROGRAM

Established in 2012, the BHECN Ambassador Program is a pipeline of Nebraska students interested in behavioral health careers. The program follows students from high school and college, through professional school, and on to careers in behavioral health professions. The program is a “grow our own” approach to recruiting future professionals to work in rural and underserved communities.

Career Day Participants

(Approximately 1 hour sessions)
2013: 505 Students
2014: 488 Students

High School Conferences

BHECN AMBASSADOR CONFERENCE

(Approximately 1 day)
2014 (Kearney): 41 students
2015 (South Omaha): 25 students
2015 (Kearney): 64 students

College Conferences

BHECN COLLEGE CONFERENCE

(Approximately 3-5 days)
2014: 22 students
2015: 45 students

Outcomes

As of October 2014, of the 43 past participants in the high school conferences who have since graduated from high school, 32 are enrolled in a Nebraska college or university.

Of the 64 past participants in the college conferences who have since graduated, 20 have enrolled at UNMC (6 in medical school, 7 in pharmacy school, 4 in nursing, and 3 in the physician assistant program) and 25 have continued their education at other institutions.

THE VIRTUAL MENTORSHIP NETWORK

• Pilot project developed using a two year educational grant awarded by the Rural Futures Institute
• Designed to connect BHECN mentors online with students across the state, the mental health workforce of the future
• 40 student participants interacted with 2 psychiatry residents and 2 psychology doctoral-level trainees via 6 live online sessions and continuous access to a secure online blog site
• Evaluation information collected in year 1 is driving year 2 program improvements
• 92.9% of the students indicated that they would recommend the Virtual Mentorship Network project to their friends and/or colleagues
MEDICAL STUDENTS

BHECN sponsors psychiatry mentorship activities and a course on student wellness for 4th year medical students at the University of Nebraska Medical Center (UNMC). At UNMC, the number of medical students taking electives in psychiatry has risen 667% since 2011. Even if students are not pursuing a career in psychiatry, they will be better prepared at delivering mental health services in primary care or their chosen medical specialty.

In addition, recruitment into a psychiatry residency program has improved at UNMC. In 2015, 9.68% (12 students) of graduating UNMC medical students matched in psychiatry; more than double the national average of 4.2%. Creighton University School of Medicine matched 11 students, or 7.1%, in psychiatry. 6 out of the 8 in-state psychiatry residency positions were filled by UNMC graduates.

National, UNMC & Creighton University School of Medicine
Rate of Medical Students Matching in Psychiatry
(2001-2015)
PSYCHIATRY RESIDENTS

BHECN helps fund part of the Creighton University/UNMC Psychiatry Residency Program, the state’s only psychiatry residency program.

As part of this funding, residents are required to complete a one month rotation in a rural community during their second year of training. These rotations are in Kearney, Hastings, and North Platte. The 2014-15 academic year was the first year of these rotations, with 10 residents rotating to rural communities. Overall, residents rated the rotation very highly, at an average of 4.67 on a 5 point scale, with categories rated as shown below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Variety</td>
<td>4.33</td>
</tr>
<tr>
<td>Quality of facilities</td>
<td>4</td>
</tr>
<tr>
<td>Quality of support Staff</td>
<td>3.67</td>
</tr>
<tr>
<td>Work load</td>
<td>3</td>
</tr>
<tr>
<td>Provided adequate educational experience</td>
<td>4.67</td>
</tr>
</tbody>
</table>

**Overall rating: 4.67**

Psychiatry Residency Outcomes Post Graduation

**2014:**
0 of 2 stayed in Nebraska

**2015:**
7 of 11 stayed in Nebraska
- 1 works in a rural underserved community (Norfolk)
- 2 work in urban underserved settings
- 4 currently practice in Nebraska

The UNMC Psychiatry Student Interest Group (PsIG) is an active, medical student-run organization which works to promote psychiatry and mental health through a variety of different educational activities, mentorship and outreach.
PSYCHOLOGY INTERNSHIPS

- Availability of practicing doctoral psychologists on a national scale is 33.2 professionals per 100,000 population.

- In Nebraska, the number of practicing psychologists is 17.6 per 100,000 population, which is significantly lower than national standards. Additionally, only 61 psychologists practice outside of the Omaha and Lincoln areas, leaving a major shortage of these behavioral health providers.

- Through funding secured from the 2014 Legislative session, BHECN and the UNMC Munroe-Meyer Institute (MMI) Psychology Department were awarded funding to provide doctoral internship training for five doctoral psychology interns.

- These interns were placed in outstate integrated primary care medical practices in Hastings, Nebraska City, Chadron/Alliance, Kearney, Columbus, and Grand Island.

- Through 2015-16, placements will expand to 6 internship sites.

- Interns received 10,000 hours of supervised training from licensed psychologists integrated into primary care settings and trained through MMI.

- **Overall, the five supported psychology interns provided an additional 3,500+ patient visits to children, adolescents, and families in rural areas.** These services would not have been available without LB 901 support to BHECN and MMI.

2014-15 Psychology Rural Internship Placements - LB 901
TRAINING SITES—MUNROE-MEYER INSTITUTE CHILD-ADOLESCENT BH PROGRAMS

- BHECN has partnered with UNMC’s Munroe-Meyer Institute (MMI) to fund long-term intensive Master’s level training for applied behavioral analysis, social work, psychology, counseling, and nurse practitioner students in 2013-14 and in 2014-15.

- Trainees were MMI AmeriCorps members providing services to children and adolescents with behavior disorders, their families, and also to children with autism spectrum disorders.

- BHECN matching funds supported training for these AmeriCorps members who were recruited from Chadron State, Doane College, University of Nebraska-Omaha, Bellevue University, University of Nebraska-Kearney, UNMC, and Creighton University.

- Trainees provided BH services in Chadron, Alliance, Valentine, Kearney, Columbus, Grand Island, Plattsmouth, York, Wahoo, and Omaha - at MMI and the Autism Care for Toddlers (ACT) Clinics.

- With an emphasis upon recruitment of rural trainees, a total of 16 (76%) of 21 “graduates” have remained in Nebraska and have embarked upon careers in integrated behavioral health, school mental health, human service agencies, and related areas.

- Members received a combined total of over 3,000 hours of supervised training and provided more than 12,000 hours of services to children, adolescents and families over the past two years.
2015 Integrated Behavioral Health Clinic Training Sites

<table>
<thead>
<tr>
<th>Numbers BHECN supported</th>
<th>Number graduated</th>
<th>Number working in Nebraska after graduation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-14</td>
<td>19</td>
<td>13</td>
</tr>
<tr>
<td>2014-15</td>
<td>18</td>
<td>18</td>
</tr>
</tbody>
</table>
BHECN and Lasting Hope Recovery Center partnered in the formation of a model behavioral health interprofessional, community-based education and training site. The mission of this collaboration is to create a replicable model of hospital-based behavioral health training to support interprofessional clinical training for the state.

### TRAINING SITES – LASTING HOPE RECOVERY CENTER

<table>
<thead>
<tr>
<th></th>
<th>2013-14</th>
<th>2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Students</td>
<td>118</td>
<td>129</td>
</tr>
<tr>
<td>Psychiatry Residents</td>
<td>32</td>
<td>19</td>
</tr>
<tr>
<td>Social Work &amp; Therapy Students</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Pharmacy Students</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>Nursing Students</td>
<td>0</td>
<td>28</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>161</strong></td>
<td><strong>193</strong></td>
</tr>
</tbody>
</table>

### LASTING HOPE STUDENT TYPE, 2014-15

- **Medical Students**
- **Psychiatry Residents**
- **Social Work & Therapy Students**
- **Pharmacy Students**
- **Nursing Students (began 4/2015)**
## TRAINING SITES – COMMUNITY ALLIANCE

<table>
<thead>
<tr>
<th>Student Type</th>
<th>2013-14</th>
<th>2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Students</td>
<td>128</td>
<td>140</td>
</tr>
<tr>
<td>Psychiatry Residents</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Family Medicine Residents</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>Physician’s Assistant Students</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>Counseling, Graduate</td>
<td>13</td>
<td>9</td>
</tr>
<tr>
<td>Social Work, Graduate</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Social Work, Undergraduate</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Behavioral Health, Doctoral</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Clinical Supervision for Provisionally Licensed Mental Health Practitioner</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Public Health, Graduate</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Nursing, Undergraduate</td>
<td>309</td>
<td>344</td>
</tr>
<tr>
<td>Peer Support Specialists</td>
<td>65</td>
<td>61</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>561</strong></td>
<td><strong>604</strong></td>
</tr>
</tbody>
</table>

## COMMUNITY ALLIANCE STUDENT TYPE, 2014-15

![Pie chart showing various student types and their numbers for the years 2013-14 and 2014-15.]
Training the Existing Workforce

IN PERSON TRAINING

BHECN offers free training opportunities to all Nebraska behavioral health organizations.

From July 1, 2013 to June 30, 2015, BHECN trained 3,207 individuals. This included both healthcare providers and members of the public. Of these, 2,126 were located in rural counties, 1,081 were in urban counties.

<table>
<thead>
<tr>
<th>Number of Individuals</th>
<th>Type of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>21</strong></td>
<td>Seeking Safety</td>
</tr>
<tr>
<td></td>
<td>Seeking Safety is an evidence-based, present focused, counseling model to help people attain safety from trauma and/or substance abuse.</td>
</tr>
<tr>
<td><strong>82</strong></td>
<td>Mental Health First Aid</td>
</tr>
<tr>
<td></td>
<td>Mental Health First Aid is a public adult or youth education program that helps the public identify, understand, and respond to signs of mental illnesses and substance abuse disorders.</td>
</tr>
<tr>
<td><strong>344</strong></td>
<td>Custom trainings</td>
</tr>
<tr>
<td></td>
<td>Custom trainings on trauma, psychopharmacology, and self-care.</td>
</tr>
<tr>
<td><strong>1,267</strong></td>
<td>Trauma Informed</td>
</tr>
<tr>
<td></td>
<td>Trauma Informed The principles of a trauma-informed approach and trauma-specific interventions are designed to address the consequences of trauma in the individual and organizations, such as schools, to facilitate healing.</td>
</tr>
<tr>
<td><strong>1,493</strong></td>
<td>Compassion Fatigue</td>
</tr>
<tr>
<td></td>
<td>Compassion Fatigue This training helps attendees improve their understanding of compassion fatigue, vicarious trauma and burn out, identify signs and symptom recognition and receive tools for increasing resiliency and self-care.</td>
</tr>
<tr>
<td><strong>3,207</strong></td>
<td>Individuals trained through BHECN</td>
</tr>
<tr>
<td></td>
<td>Effectiveness rating: 4.7 out of 5</td>
</tr>
</tbody>
</table>

BHECN Live Trainings (5 examples out of 75+ requesting training)

Region 1: Western Community Health Resources, Chadron
Region 2: Child Advocacy Center, North Platte
Region 3: Grand Island Public Schools, Grand Island
Region 4: Faith Regional Hospital, Norfolk
Region 5: Crisis Center Lancaster County Corrections, Lincoln
Region 6: Lutheran Family Services, Omaha
ONLINE TRAINING

Recognizing that not everyone has time during the day to attend an in-person training, BHECN offers webinars and online modules to meet the needs of busy behavioral health professionals.

Webinars
From July 1, 2013 to June 30, 2015, **207 individuals attended a webinar during the live broadcast. 118 have watched a webinar recording.**

Learning Modules
**77 individuals have participated in the 4 online learning modules** launched between July 1, 2013 and June 30, 2015.

- **LB 556: 17 Individuals**
  The Children’s Mental Health Screening Act, or LB 556, addresses the need for early identification of children and adolescents with behavior problems (depression, ADHD, etc.) with a “pilot” program to conduct behavioral “screenings”. The module discusses the need for increased access to behavioral health services, reviews the elements of LB 556 as written in the law, and describes how these elements are working in clinics across Nebraska.

- **ADHD Diagnosis: 7 Individuals**
  The module teaches providers how to differentiate between normal and abnormal behaviors and how to diagnose clinical problems accurately.

- **ADHD Screening: 23 Individuals**
  The module explores why screening tools are effective in identifying behavioral health concerns, what tools can be used, and how to incorporate them into practice.

- **Telehealth: 30 Individuals**
  The module discusses the evolution of telehealth, its current use, and answers frequently asked questions. The module also identifies various indications of behavioral telehealth service delivery, describes telehealth etiquette and best practices, and demonstrates basic skills necessary to navigate the use of a telehealth platform.
Retaining the Existing Workforce

JOBS WEBSITE

In 2015, BHECN partnered with Region 5 Behavioral Health Systems to launch NebraskaBehavioralHealthJobs.com, a free jobs board for both employers and job seekers. BHECN will partner with registered employers to determine the effectiveness of the website. From its launch on January 1, 2015 through June 30, 2015, the website has had:

- **5,724** visits,
- **291** jobs posted,
- **63** registered employers.
Partnerships and Special Initiatives

LB 556 – CHILDREN’S BEHAVIORAL HEALTH SCREENING

The Children’s Mental Health Screening Act, or LB 556, was passed by the 2013 Nebraska Legislature in response to needs for early identification of children and adolescents with behavior problems. A collaboration between BHECN and the Munroe-Meyer Institute Psychology Department was established to conduct behavioral “screenings” within primary care, pediatric, and family medicine practices. The legislation required a “pilot” program to be conducted that would serve to develop a model for assessing children’s behavioral health needs across the state. Selected sites included the Dundee Children’s Physicians Clinic, Columbus Children’s Healthcare, and a 3-site collaborative in the Panhandle which included Family Medicine practices in Chadron, Alliance, and Valentine. These sites were selected as presenting both rural and urban populations.

To date, across 22 months, 4,095 children have been screened utilizing the Vanderbilt Scales, which assess ADHD, Conduct Disorder, Learning Problems, Anxiety/Depression, and Oppositional Disorder. Results from the 3 pilot test sites indicate, from parent ratings, that 23% of youngsters have potential behavior problems that need to be further evaluated and/or treated. In addition, 16.5% of parents indicate that they could use help in managing their children’s behavior.

Due to the success of this “test project,” LB 240 was passed by the 2015 Nebraska Legislature which provides for expansion of the screening program to a total of 10 primary care sites across Nebraska. These sites will be identified based upon the availability of screening capability as well as licensed behavioral health practitioners present in the primary care clinics. BHECN and MMI are committed to integrating behavioral health care within primary care practice to assist families and provide greater access to care across Nebraska.
BEHAVIORAL HEALTH EDUCATION FOR TEACHERS TEAMS

Part of BHECN’s work is to provide training to both the traditional behavioral health workforce and non-traditional partners, like educators. LB 556, passed in 2013, directed BHECN to provide behavioral health training to teachers in pilot areas. We partnered with the Educational Service Units in the Panhandle and Northeast Nebraska to offer training to teachers and school staff on behavioral health challenges students face. This training is ongoing and new areas will be added in the next year.

PROMOTORAS

In early 2015, BHECN started a project in Lexington, Kearney, and Grand Island to recruit Community Health Workers from the Latino community. These workers, or Promotoras, are trusted members of their community that provide culturally appropriate services and serve as patient advocates, educators, mentors, outreach workers, and translators. Promotoras have not traditionally worked in behavioral healthcare settings, so BHECN is working with local organizations to train these workers and put them to work in the behavioral health system of care.

LEGISLATIVE STUDIES

BHECN actively participated in LR 592 in 2014 and LR 185 in 2015. These studies were designed to highlight the needs of the behavioral health workforce in Nebraska. Both resolutions were assigned to the Health and Human Services committee of the Nebraska Legislature.
# Budget

## FY 2013/14

<table>
<thead>
<tr>
<th>Budget</th>
<th>Spent</th>
<th>Diff</th>
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<tbody>
<tr>
<td>Behavioral Health Trainees</td>
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<td>Telehealth</td>
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**FY14 LB 603 State Appropriation (Budget)**

**$1,637,113.00**

## FY 2014/15

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**FY15 LB 603 State Appropriation (Budget)**

**$1,652,931.00**

## Additional Funding

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<td>RFI Grant**</td>
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**$2,111,660.26**

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*LB 901: This bill creates internship opportunities for doctoral psychologists in underserved areas of Nebraska.*

**RFI Grant: Rural Futures Institute awarded BHECN a grant to create the Virtual Mentorship Network to foster conversations about career choices between interested students and behavioral health professionals using distance technology.*
*In FY 2015, BHECN spent down most of the funds accumulated in carryover funding from the previous 5 fiscal years.*
References


Perou, R; Bitsko, RH; Blumberg, SJ; Pastor, P; Ghandour, RM; Gfroerer, JC; Hedden, SL; Crosby, AE; Visser, SN; Scheive, LA; Parks, SE; Hall, JE; Brody, D; Simile, CM; Thompson, WW; Baio, J; Avenevoli, S; Kogan, MD; Huang, LN (2013). Morbidity and Mortality Weekly Report (MMWR): Supplements, 62(02), 1-35. http://www.cdc.gov/mmwr/index.html

Reeves WC; Strine TW; Pratt LA; Thompson W; Ahluwalia I; Dhingra SS; McKnight-Eily LR; Harrison L; D’Angelo DV; Williams L; Morrow B; Gould D; Safran MA (2011). Mental Illness Surveillance Among Adults in the United States. Morbidity and Mortality Weekly Report (MMWR): Supplements, 60(03), 1-32. http://www.cdc.gov/mmwr/index.html


BHECN STAFF

Howard Liu, M.D.
BHECN Director

Brent Khan, Ed.D.
BHECN Co-Director

Joseph H. Evans, Ph.D.
Associate Clinical Director

Keith Anderson, M.S.
Data Analyst

Robin Bayless, B.A.
Office Associate

Christine L. Chasek, Ph.D., LIMHP, LADC, LPC
Director of BHECN at UNK

Kay Glidden, M.S.
Training Coordinator

Ann Kraft, B.A.
Ambassador Program Coordinator

Holly Roberts, Ph.D.
Assistant Clinical Director

Krista Roberts, B.J.
Communications Coordinator

BHECN
Behavioral Health Education Center of Nebraska

984242 Nebraska Medical Center
Omaha, NE 68198-4242
(402) 552-7697

For more information about BHECN, visit
unmc.edu/bhecn