



**To:** Summit County Council

**From:** Aaron W. Newman, *Behavioral Health Director*  
Pamella Bello, *Behavioral Health Prevention Director*

**Date of Meeting:** May 10<sup>th</sup>, 2023

**Item:** **FY24 Behavioral Health Area Plan & Budget**

**Process:** For Consideration and Possible Approval Upon Convening  
as the Local Mental Health and Substance Abuse Authority

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Please find included an Executive Packet for the *FY24 Summit County Mental Health and Substance Abuse Area Plan* and the official documents required for submission to the Utah Office of Substance Use and Mental Health (OSUMH), formerly the Division of Substance Abuse and Mental Health (DSAMH). Also attached is Form D, which the County Council Chair is to sign upon approval of this Area Plan.

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### **State Code Relevant to the Area Plan:**

#### **Utah Code 17-43-301, Local Mental Health Authorities;**

- 5.a: Each local mental health authority shall:
- (ii) as provided in Subsection (5)(b), annually prepare and submit to the division (DSAMH) a plan approved by the county legislative body for mental health funding and service delivery, either directly by the local mental health authority or by contract;

#### **Utah Code 62A-15-103;**

- 2.b.i: (DSAMH will) consult and coordinate with local substance authorities and local mental authorities regarding programs and services;
- 2.b.vi: (DSAMH will) monitor and evaluate programs provided by local substance abuse authorities and local mental health authorities;
- 2.b.vii: (DSAMH will) examine the expenditure of any local, state, and federal funds;
- 2.b.viii: (DSAMH will) review and approve each local substance abuse authority's plan and each local mental health authority's plan...

2.e: (DSAMH will) require each local substance abuse authority and each local mental health authority to submit its plan to the division by May 15\* of each year;

**Utah Code 62A-15-105;**

The division (DSAMH) shall set policy for its operation and for programs funded with state and federal money under Sections 17-43-201, 17-43-301, 17-43-304, and 62A-15-110.

**County Contracts**

Contract 152260:

This contract establishes the vender status of Summit County with the Division of Substance Abuse and Mental Health to provide mental health services and programs at no cost or reduced rates to residents of Summit County through a subcontract with Health U. Behavioral.

Contract 152261:

This contract establishes the vender status of Summit County with the Division of Substance Abuse and Mental Health to provide substance use disorder services and programs, along with prevention programming focused on the reduction and prevention of underage drinking, prescription drug abuse, and decreasing the availability and use of marijuana at no cost or reduced rates to residents of Summit County through a subcontract with Health U. Behavioral.

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**Legislatively Mandated Services:**

As the Local Behavioral Health Authority, Summit County is required to provide the following mental health and substance use disorder services as set forth in Utah Code §§ 17-43-201 and 301 *et seq.*, in addition to those services mandated in the Annual OSUMH Directives. These services are overseen by the Summit County Behavioral Health Division and administered via contract through the Healthy U. Behavioral Network and the Summit County Behavioral Health Network. Services include:

**Mandated Mental Health Services:**

- (1) Adult and Youth Inpatient Care,
- (2) Adult and Youth Residential Care,
- (3) Adult and Youth Outpatient Care,
- (4) Children/Youth Outpatient Care
- (5) 24-Hour Crisis Care,
  - (i) Warm handoff during business hours,
- (6) Adult and Youth Psychotropic Medication Management,
- (7) Adult and Youth Psychoeducation Services & Psychosocial Rehabilitation,
- (8) Adult and Youth Case-Management,
- (9) Adult Community Support Services (Housing Services),
- (10) Children/Youth Community Supports (Respite Services),
- (11) Adult and Youth Peer Support Services,
- (12) Adult and Youth Consultation & Education Services,
- (13) Services to Incarcerated Persons,
- (14) Adult and Youth Outplacement,
- (15) Adult and Youth Unfunded Services,

- (16) Youth Mental Health Early Intervention:
  - (i) Family Resource Facilitation,
  - (ii) School-Based Mental Health Intervention,
- (17) Suicide Prevention, Intervention, and Postvention,
- (18) Justice Reinvestment Institutive Services (Dependent on State Funding),

**Mandated Substance Use Disorder Services:**

- (1) Screening & Assessment,
- (2) Detoxification Services (ASAM IV-D, III.7-D, III.2-D, I-D or II-D),
- (3) Residential Treatment Services (ASAM III.7, III.5, III.3, III.1),
- (4) Opioid Treatment Programs (OTP-Methadone),
- (5) Office-Based Opioid Treatment-Vivitrol, Naltrexone, Buprenorphine,
- (6) Outpatient – Non-Methadone, ASM I,
- (7) Intensive Outpatient – ASM II.5 or II.1,
- (8) Recovery Support Services,
- (9) Adult and Youth Peer Support Services,
- (10) Services to Incarcerated Persons,
- (11) Women’s Treatment,
- (12) Adolescent Treatment,
- (13) Drug Court Program,
- (14) Justice Reinvestment Initiatives,

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**Summary:**

FY24 is expected to see a continued increased utilization of behavioral health resources provided through the Summit County Behavioral Health Network, the Healthy U. Network, non-profit providers, and clinicians in private practice. Regarding Medicaid, we continue to see a decrease in the number of eligible residents for coverage while experiencing continued growth in enrollment for behavioral health services covered by Medicaid. On average, 82% of individuals enrolled in Medicaid in Summit County are also enrolled in Behavioral Health Medicaid. (Medicaid coverage for behavioral health operates as a separate system from Medicaid for physical health.)

For FY24, no new programs or services are being delivered or developed. This is partly due to the current service contract between Summit County and University of Utah Health Plans, the parent of Healthy U. Behavioral, coming up for evaluation and possible renegotiation over the next twelve months. This said Healthy U. Behavioral, the Huntsman Mental Health Institute – Park City, and the Summit County Behavioral Health Division continue to work on improving reporting to the Office of Substance Use and Mental Health and exploring the regional solutions to behavioral health issues such as a partnered receiving center with Wasatch County, similar in collaboration as the Mobil Crisis Outreach Team (MCOT).

## Changes To The Area Plan Process for FY24:

The Office of Substance Use and Mental Health, formerly the Division of Substance Abuse and Mental Health, began reviewing the area plan format and process for submission. While State Code requires the annual development of an Area Plan, approved by the Local Mental Health and Substance Abuse Authority by May 15<sup>th</sup>, the Office of Substance Use and Mental Health is replacing the yearly requirement of submitting narratives (Forms A, B, C, and the Governance and Oversight section) to every three-year. Budgets will continue to be completed and approved by the County Council each year, along with any significant changes to programs or service levels requiring updates to the narratives.

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## Mental Health & Substance Abuse Funding:

Funding for behavioral health services overseen by the Summit County Behavioral Health Division consists of three sources: Medicaid, State Contracts, and Summit County. The new funding, not accounted for in this document, will include the State's share of current and future Opioid Settlements administered by the Utah Office of Substance Use and Mental Health. Total awards from these funds will not be known till July 2023.

FY24 will see a projected increase in funding for behavioral health services of **\$698,326**. This is our largest increase to date, driven by the continued expansion of Medicaid and state funding of mental health and substance use disorder services.

One area where we have a decrease is in Prevention Services. The **\$130,105** decrease is due to the Office of Substance Use and Mental Health waiting to hear if a federal grant that provided these funds will be reawarded. The Office of Substance Use and Mental Health remains confident that this funding will be returned, along with an increase from the State's Opioid Settlement Funds for prevention of over \$100,000, which is not reflected in this budget.

**NOTE:** All amounts are as of May 3rd, 2023, and subject to change up until July 1<sup>st</sup>, 2023

### FY24 SUMMARY

<b>FY24 Revenues</b> <small>(Current Estimates, 5/3/2023)</small>	<b>FY24</b>	<b>FY23</b>	<b>Difference</b>
Federal Medicaid Funds	\$4,000,000	\$3,600,000	\$400,000
State Contracts	\$4,060,954	\$3,825,729	\$235,225
Summit County Medicaid Match* (Federal)	\$375,788	\$293,493	\$82,295
Summit County State Match* (OSUMH)	\$143,206	\$182,400	\$(39,194)
Summit County Funding	\$160,000	\$140,000	\$20,000
MCOT Allocation	\$500,000	\$500,000	-
<b>ESTIMATED TOTAL:</b>	<b>\$9,239,948</b>	<b>\$8,541,622</b>	<b>\$698,326</b>

There are two matches the County is obligated to provide. The Medicaid match is a blanket 20% of traditional Medicaid behavioral health services provided. The \$375,788

match amount is contractually locked through July 2027. The 20% match is only applied to residents on traditional Medicaid (capitation), which accounts for \$1,878,940 of Medicaid dollars. The remaining \$2,571,060 represents the Medicaid expansion population (Fee-For-Service), which does not require a match from the County.

The second required match is to State Funds. This is an additional 10-20% match, depending on the source of the funds. Currently, nine out of thirty-six state funding sources require a match. This match amount may fluctuate during the fiscal year as increases or fund reallocations occur between the Local Authorities, or the Office of Substance Use and Mental Health acquires new funding from state and federal sources.

Proposed FY24 Behavioral Health Services Budget, OSUMH Funds			
Program	FY24	FY23	Change
Mental Health Programs/Services	\$ 2,714,213	\$ 2,526,567	\$ 187,646
SUD Programs/Services	\$ 996,943	\$ 819,259	\$ 177,684
Prevention Programs	\$ 349,798	\$ 479,903	\$ (130,105)
<b>TOTALS</b>	<b>\$ 4,060,954</b>	<b>\$ 3,825,729</b>	<b>\$ 235,225</b>

**FORM A Budget (Mental Health):**

All funding changes in Form A correlate to service demands and utilization during FY22 and projections utilizing current FY23 data. Services that have had their budgets zeroed out are either being provided through other funding lines or have been discontinued by the Office of Substance Use and Mental Health. FY24 will see an increase of \$187,646 in state funding for mental health services.

FORM A: Mental Health Services				
Section	Mandated Service	FY24	FY23	Change
1	Adult Inpatient	\$ 40,006	\$ 23,788	\$ 16,218
2	Child/Youth Inpatient	\$ 20,003	\$ 35,681	\$ (15,678)
3	Adult Residential Care	\$ 9,906	\$ 15,000	\$ (5,094)
4	Child/Youth Residential Care	\$ 9,906	\$ 25,000	\$ (15,094)
5	Adult Outpatient Care	\$ 588,174	\$ 482,327	\$ 105,847
6	Child/Youth Outpatient Care	\$ 882,259	\$ 735,490	\$ 146,769
7	Adult 24-Hour Crisis Care	\$ 518,013	\$ 500,000	\$ 18,013
8	Child/Youth Crisis Care	<i>Combined with #7 Above</i>		
9	Adult Psychotropic Medication Management	\$ 144,850	\$ 106,055	\$ 38,795
10	Child/Youth Psychotropic Medication Management	\$ 217,264	\$ 159,083	\$ 58,181
11	Adult Psychoeducation Services & Psychosocial Rehabilitation	\$ 41,909	\$ 12,000	\$ 29,909
12	Child/Youth Psychoeducational Services & Psychosocial Rehabilitation	\$ 13,970	\$ -	\$ 13,970
13	Adult Case Management	\$ 40,083	\$ 29,857	\$ 30,226
14	Child/Youth Case Management	\$ 25,040	\$ 44,787	\$ (19,747)
15	Adult Community Supports (Housing Services)	\$ 5,000	\$ -	\$ 5,000
16	Child/Youth Community Support (respite)	\$ 5,000	\$ 5,000	\$ -
17	Adult Peer Support	\$ 19,835	\$ 25,000	\$ (5,165)
18	Family Peer Support Services	\$ 40,672	\$ 28,000	\$ 12,672
19	Adult Consultation & Education Services	\$ 5,000	\$ -	\$ 5,000

20	Children/Youth Consultation & Education Services	\$ 30,000	\$ -	\$ 30,000
21	Services to Incarcerated Persons	\$ 47,323	\$ 75,000	\$ (27,677)
22	Adult Outplacement	\$ -	\$ 4,500	\$ (4,500)
23	Children/Youth Outplacement	\$ -	\$ -	\$ -
24	Unfunded Adult Clients	\$ -	\$ 10,000	\$ (10,000)
25	Unfunded Children/Youth	\$ -	\$ 10,000	\$ (10,000)
26	First Episode Psychosis Services	\$ \$10,000	\$ 25,000	\$ (15,000)
27	COVID Funding ( <i>Discontinued for FY24</i> )	\$ -	\$ 175,000	\$ (175,000)
<b>TOTALS</b>		<b>\$ 2,714,213</b>	<b>\$2,526,567</b>	<b>\$ 187,646</b>

**FORM B Budget:**

After experiencing an overall decrease in Substance Use Disorder funding in FY23, funding is projected to be restored with an increase of \$177,684 due to the overall increase in residents receiving substance use treatment. This growth results from private clinicians becoming more selective about whom they treat and declining to provide addiction services. As such, this has resulted in increased substance use treatment by the Huntsman Mental Health Institute – Park City.

FORM B: Substance Use Disorders				
Section	Service	FY24	FY23	Change
1	Early Intervention	\$65,000	\$65,000	\$0
2	Ambulatory Care & Withdrawal Management (ASAM IV-D, III.7-D, III.2-D, I-D, or II-D)	\$38,756	\$20,000	\$18,756
3	Residential Treatment Services (ASAM III.7, III.5, III.3, III.1)	\$99,493	\$75,000	\$24,493
4	Opioid Treatment Programs (Methadone)	\$35,000	\$0	\$35,000
5	Office-Based Opioid Treatment (Vivitrol, Naltrexone, and Buprenorphine)	\$116,500	\$124,000	(\$7,500)
6	Outpatient (ASAM I)	\$529,942	\$320,305	\$209,637
7	Intensive Outpatient (ASAM II.5 or II.1)	\$97,500	\$140,000	(\$42,500)
8	Recovery Support Services	\$14,752	\$10,000	\$4,752
9	Peer Support Services ( <i>Combined with Recovery Support in FY24</i> )	\$0	\$20,000	(\$20,000)
10	COVID Funding ( <i>Discontinued for FY24</i> )	\$0	\$44,954	(\$44,954)
<b>TOTALS</b>		<b>\$996,943</b>	<b>\$819,259</b>	<b>\$177,684</b>

**Form C Budget: Prevention Programs**

Prevention Programs are currently showing a **\$130,105** decrease due to the Office of Substance Use and Mental Health waiting to hear if a federal grant previously provided to these funds will be reawarded. The Office of Substance Use and Mental Health remains confident that this funding will be returned, along with an increase from the State’s Opioid Settlement Funds directed to Prevention Programs.

FORM C: Prevention Programs				
Section	Service	FY22	FY23	Change
	Combined Allocation State & Federal	\$ 349,798	\$ 479,903	\$ (130,105)
	<b>TOTALS</b>	<b>\$ 349,798</b>	<b>\$ 479,903</b>	<b>\$ (130,105)</b>

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**Recommendation:**

**The Behavioral Health Division recommends that the Summit County Council, in its capacity as the Local Substance Abuse and Mental Health Authority, through the statutory mandate of UCA §17-43-201 & 301 et. seq., approve the included Area Plan for FY24, and direct the Behavioral Health Division to submit the Area Plan to the Office of Substance Use and Mental Health for the continuation of funding for mental health, substance abuse, and prevention programs and services in Summit County.**

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**- END OF SUMMARY -**

**Summit County**  
**FORM D**  
**LOCAL AUTHORITY APPROVAL OF AREA PLAN**  
**3-Year Plan (2024-2026)**

**IN WITNESS WHEREOF:**

The Local Authority approves and submits the attached Area Plan for State Fiscal Years 2024-2026 in accordance with Utah Code Title 17 Chapter 43.

The Local Authority represents that it has been authorized to approve the attached Area Plan, as evidenced by the attached Resolution or other written verification of the Local Authority's action in this matter.

The Local Authority acknowledges that if this Area Plan is approved by the Utah Department of Health and Human Services Office of Substance Use and Mental Health (DHHS/OSUMH) pursuant to the terms of Contract(s) # A03090, the terms and conditions of the Area Plan as approved shall be incorporated into the above-identified contract by reference.

**LOCAL AUTHORITY: Summit County**

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*(Signature of authorized Local Authority Official, as provided in Utah Code Annotated)*

**Name:** Roger Armstrong  
*Chair, Summit County Council*

**Date:** May 10<sup>th</sup>, 2023

# Summit County Mental Health Authority: FY24 Area Plan

## *Governance & Oversight Narrative*

*Note: All changes and new additions are highlighted in **BLUE***

# Summit County GOVERNANCE & OVERSIGHT NARRATIVE 3-Year Plan (2024-2026)

**Local Authority:** Summit County

**Instructions:**

In the cells below, please provide an answer/description for each question. **PLEASE CHANGE THE COLOR TO BLUE, OF SUBSTANTIVE NEW LANGUAGE INCLUDED IN YOUR PLAN THIS YEAR!**

**1) Subcontractor Monitoring**

The DHS Contract with Mental Health/Substance Abuse Local Authority states:  
When the Local Authority subcontracts, the Local Authority shall at a minimum:

- (1) Conduct at least one annual monitoring review of each subcontractor. The Local Authority shall specify in its Area Plan how it will monitor their subcontracts.

**Describe how monitoring will be conducted, what items will be monitored and how required documentation will be kept up-to-date for active subcontractors.**

**Yearly:**

In January of 2023, the Summit County Council awarded funds for contracting with Davis Behavioral Health to conduct an annual audit of Healthy U. Behavioral and the Huntsman Mental Health Institute - Park City. Per the terms of this contract, audits will be conducted each May/June, with a full report presented to the Summit County Behavioral Health Advisory Committee prior to the end of June. Davis Behavioral Health will utilize the same metrics and reviews it currently uses for its contracted providers. This includes the Office of Substance Use and Mental Health's Form 05-21-2021 for mental health and its corresponding substance use disorder form. Any findings will be addressed through a corrective action plan approved by the Summit County Behavioral Health Advisory Committee prior to July 1<sup>st</sup> of each year. All findings and corrective plans will be made available to the Office of Substance Use and Mental Health for review during their yearly audit of the Summit County Behavioral Health Division and Local Behavioral Health Authority.

**Monthly:**

Each month, the Summit County Behavioral Health Division meets with Healthy U. Behavioral and the Huntsman Mental Health Institute - Park City to review invoices prior to their submission into the State's billing system KissFlow. This review consists of a random sampling of services provided and billed for, and to verify that the service reported in the invoice is reflected in the patient's clinical chart. Billed services which are unable to be verified will be denied, and a full review of each billed service to the corresponding billing code will be reviewed prior to submission into KissFlow.

**Ongoing:**

In addition to the above, Healthy U. Behavioral is required, per the terms of the contract with Summit County, to provide the following reports to the Behavioral Health Division by the indicated dates.

#	Name of Report	Frequency	Period Reported On	Due Date
1	Penetration Report	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
2	Provider Claim Inventory	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
3	Contract Utilization Report	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
4	Claim Denial Reasons	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
5	Service Utilization by Provider	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
6	Service Utilization by Rate Code	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
7	Services Provided Report by Population: a.) Medicaid b.) Unfunded c.) Insurance d.) Self-Pay e.) Other	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
8	Unduplicated Client Count: a.) Medicaid b.) Unfunded c.) Insurance d.) Self-Pay e.) Spanish Language	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
9	Monthly Inpatient Utilization Management Report	Monthly	Fiscal Year to Date	1 <sup>st</sup> Wednesday of each month
10	Monthly Residential Utilization Management Report	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
11	MCOT, Receiving Center, Wellness & Recovery Center	Monthly	Fiscal Year to Date	3 <sup>rd</sup> Thursday of each month
12	Crisis Outcomes Report	Quarterly	Quarterly & Fiscal Year to Date	Quarterly submitted by the 3 <sup>rd</sup> Thursday of each month following the end of the quarter. Previously reported quarters will be re-reported with updated information.
13	Wait Time Report	Semi-Annually	Quarterly & Fiscal Year to Date	Quarterly submitted by the 3 <sup>rd</sup> Thursday of each month following the end of the quarter. Previously reported quarters will be re-reported with updated information.
14	Grievance Report	Semi-Annually	Fiscal Year to Date	Third Thursday of January and July

# Summit County Mental Health Authority: FY24 Area Plan

## *Form A: Mental Health Narrative*

*Note: All changes and new additions are highlighted in **BLUE***

# Summit County

## FORM A - MENTAL HEALTH BUDGET NARRATIVE

### 3 Year Plan (FY 2024-2026)

**Local Authority:** Summit County

**Instructions:**

In the cells below, please provide an answer/description for each question. **PLEASE CHANGE THE COLOR TO BLUE, OF SUBSTANTIVE NEW LANGUAGE INCLUDED IN YOUR PLAN THIS YEAR!**

**1) Inpatient Services**

**Adult Services**

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

**Definitions**

**Summit County Network:**

The term Summit County Network refers to the overall umbrella of services coordinated by the Summit County Behavioral Health Division, which includes the services contracted to the University of Utah Health Plans (UUHP), their behavioral health department known as Healthy U. Behavioral (HUB), local non-profits which provide low to no cost care to residents, Intermountain Healthcare (IHC), Wasatch Behavioral Health (WBH), and private clinicians within Summit County.

**Healthy U. Behavioral Network:**

The term Healthy U. Behavioral Network refers to the network administered by the University of Utah Health Plan's behavioral health arm, Healthy U. Behavioral (HUB). Healthy U. Behavioral is responsible for providing all the mandated services through a network of clinicians as outlined in Utah Administrative Code. Additionally, University of Utah Health Plans holds the Medicaid Contract and is responsible for its administration and service delivery.

Neither Summit County nor University of Utah Health Plans directly provide services. Rather a network of clinicians in Summit County and neighboring counties is administered by University of Utah Health Plans. The Huntsman Mental Health Institute – Park City is the main referral source for Adult Inpatient admissions, provided at the Huntsman Mental Health Institute-Salt Lake City, where referrals from Summit County receive priority admission based on the availability of beds. When beds are not available at Huntsman Mental Health Institute – Salt Lake City, the case management team at Huntsman Mental Health Institute – Park City works with University of Utah Health Plans to place adults who require inpatient treatment in appropriate facilities and follow their progress through aftercare appointments.

Through both the Healthy U. Behavioral Network and Summit County Network, Summit County have established diversion and alternative paths for inpatient admissions, which

provides for the Park City Hospital and the Summit County Jail to serve as referrers of last resort. Healthy U. Behavioral Network clinicians provide direct inpatient referrals to both Park City and Salt Lake City Huntsman Mental Health Institutes. Huntsman Mental Health Institute – Park City serves as the point of assessment for non-network clinicians.

The following psychiatric hospitals are participating facilities within the Healthy U. Behavioral Network:

- Provo Canyon Behavioral Hospital
- Huntsman Mental Health Institute – Salt Lake City

FY24 represents the final year of the current service contract between University of Utah Health Plans and Summit County. During this time, both will be working collectively to develop better utilizes Office of Substance Use and Mental Health funding, improve Office of Substance Use and Mental Health data reporting, and increase network efficiencies.

**Describe your efforts to support the transition from this level of care back to the community.**

University of Utah Health Plans coordinates with primary care physicians so that patients in need of additional care, are able to do so through a referral from their primary care physician. Medical professionals can make referrals based on their visits and follow-ups with patients regarding pre- and post-behavioral healthcare. Huntsman Mental Health Institute – Park City offers a peer support specialist to help with coordination of check-in and follow-up services. Case Management services are available through the Huntsman Mental Health Institute – Park City to aid the transition to a lower level of care.

**Children’s Services**

**Leah Colburn**

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

The Huntsman Mental Health Institute - Park City is the primary referral source for Child/Youth Inpatient admissions. The Huntsman Mental Health Institute - Park City case management team works with the University of Utah Health Plans to place youth who require inpatient treatment in appropriate facilities and track their progress through aftercare and follow-up appointments.

The following psychiatric hospitals are participating facilities within the Healthy U. Behavioral Network:

- Provo Canyon Behavioral Hospital
- Huntsman Mental Health Institute – Salt Lake City

In the event that it is necessary, single-case agreements are utilized to serve client needs.

**Describe your efforts to support the transition from this level of care back to the community.**

Case Management from Huntsman Mental Health Institute - Park City follows youth inpatient admissions and assists with coordinating discharge planning. Because most of the referrals to inpatient levels of care come from Huntsman Mental Health Institute - Park City, this allows for seamless resuming of services with established clinicians as well as coordinating with community supports.

School-based clinicians are able to make referrals to inpatient care through Huntsman Mental Health Institute - Park City, allowing for school-based clinicians to be part of the discharge plan for continued services. Summit County and University of Utah Health Plans are committed to increasing the availability of peer support for children and youth in Spanish and English, which aids in the transition to the appropriate level of care. Latino Behavioral Health provides peer support services that assist in Spanish-speaking clients in transitioning to appropriate levels of care.

**2) Residential Care**  
*Adult Services*

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

Huntsman Mental Health Institute – Park City is the primary referral source for Adult Residential Care. The case management team at Huntsman Mental Health Institute – Park City works with the University of Utah Health Plans Utilization Management team (UM) to place adults who require residential care (Acute psychiatric, dual diagnosis, conduct disorder (CD), detox, discharge planning, and other prescribed inpatient treatments.) in appropriate facilities and follows their progress through follow-up appointments, referrals, and accommodations.

Currently, University of Utah Health Plans has the following Residential Mental Health Facilities associated as participating facilities in the Healthy U. Behavioral Network:

- Volunteers of America
- Provo Canyon Behavioral Hospital
- Provo Canyon School
- Foothill Residential Treatment Center
- Highland Ridge

In the event that it is necessary, single-case agreements are utilized to serve client needs.

**How is access to this level of care determined? How is the effectiveness and accessibility of residential care evaluated?**

Huntsman Mental Health Institute – Park City is the main referral source for adult residential

care. The case management team at the clinic works with clients to find appropriate placements when clinically indicated. The case management team works with the inpatient clinicians to make sure that inpatient criteria is met prior to admissions. Appropriateness for residential care is determined through clinician recommendations and case staffing. Effectiveness of care is determined through amelioration or worsening of symptoms and further recommendations are made through scheduled staffing or emergency staffing, based on need.

The accessibility of care is determined by whether there are openings for our members. The effectiveness is determined by readmission rates. Case managers work with the facility's clinical staff to create a discharge plan so that the client can successfully transition to a lower level of care.

### **Children's Services**

**Leah Colburn**

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. Please identify your current residential contracts. Please identify any significant service gaps related to residential services for youth you may be experiencing.**

Huntsman Mental Health Institute – Park City is the main referral source for Child/Youth Residential Care. The case management team at Huntsman Mental Health Institute – Park City and the care management team at University of Utah Health Plans work to place children and youth who require residential care in appropriate facilities and follow their progress through follow-up appointments. Services include acute psychiatric, detox, long term residential with age-appropriate schooling.

Currently, University of Utah Health Plans has the following Residential Mental Health Facilities within its network:

- Provo Canyon Behavioral Hospital
- Provo Canyon School
- Provo Canyon School-Springville

In the event that it is necessary, single-case agreements are utilized to serve client needs.

Facilities are not local to Summit County, and the resources are utilized in Salt Lake and Utah Counties with corresponding waitlists for 6-8 weeks for admissions into youth programs. During FY23, the Newport Academy opened at the site of the former Oakley school and is focused on providing these services in Summit County. The University of Utah Health Plans is working towards bringing the Newport Academy into the Healthy U. Behavioral Network.

Overall, there is a general lack of youth residential care in Utah. As a result, youth who would benefit from this level of care are having to be managed through outpatient treatments until such time as space in a residential program becomes available. In these situations, it is often the school-based clinicians that is reasonable to maintain care, placing additional strain on school-based services.

**How is access to this level of care determined? Please describe your efforts to support the transition from this level of care back to the community.**

Case Management from Huntsman Mental Health Institute – Park City follows youth residential care admissions and assists with coordinating discharge planning. Because most of the referrals to inpatient care have come from Huntsman Mental Health Institute – Park City, resuming services with established clinicians and coordinating care with community supports is streamlined and able to incorporate the family’s preferences and supports. School-based clinicians have also made referrals to residential levels of care through Huntsman Mental Health Institute – Park City so school-based services are able to be part of the discharge plan. Summit County and University of Utah Health Plans are working to increase the availability of peer support for children and youth in Spanish and English, which will also aid with the transition to the lowest appropriate level of care.

**3) Outpatient Care**  
*Adult Services*

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Define the process for referring an individual to a subcontractor for services. Include any planned changes in programming or funding.**

Currently, the Healthy U. Behavioral Network consists of 93 clinicians serving within Summit & Wasatch counties and an additional 2,545 within the Salt Lake Valley. General Services provided within Summit County include:

- Individual and group Counseling,
- Geriatric Psychiatry,
- Marriage and Family Therapy,
- School-Based Services,
- Medication Assisted Treatments (MAT),
- Medication Management,
- Neuropsychological Assessment,
- General Psychiatric Treatment,
- Child and Adolescent Psychiatric Treatment,
- General Psychology,
- Child and Adolescent Psychology,
- Spanish Language Services.

In addition to network clinicians, Huntsman Mental Health Institute – Park City serves as the primary provider for adult outpatient services funded by the Office of Substance Use and Mental Health. The services offered by Huntsman Mental Health Institute – Park City include:

- Individual Therapy,

- Group Therapy,
- Psychiatric Evaluation,
- Crisis Care,
- Psychiatric Medicaid Management.

Clients within the Healthy U. Behavioral Network are able to access care Monday-Friday from 8am to 5pm at Huntsman Mental Health Institute – Park City (open later for Groups), with additional Summit County Network clinicians providing extended hours till 8pm Monday-Friday and reduced hours on Saturday and Sunday.

**Describe the approach to serving individuals with complex behavioral health presentations or who need multiple supports to remain in the community, including the programmatic approach to serving individuals in the least restrictive level of care. Identify your proposed fidelity monitoring and outcome measures.**

Community-based services are provided for all clients through our Medicaid network of clinicians. Care for Office of Substance Use and Mental Health funded clients is coordinated through and primarily provided by the Huntsman Mental Health Institute – Park City. Client needs are assessed, and delivered, including in-home case management, in-home peer support, mental health therapy, substance use disorder treatments, medication management, care management, and coordination behavioral and physical healthcare. Other services are provided as needed and are evaluated during weekly staffing meetings with Healthy U. Behavioral and Huntsman Mental Health Institute – Park City and may include referral to local non-profits.

**Describe the programmatic approach for serving individuals in the least restrictive level of care who are civilly committed or court-ordered to Assisted Outpatient Treatment. Include the process to track the individuals, including progress in treatment.**

Outpatient care forms the foundation of serving Summit County clients in the least restrictive level of care possible. Huntsman Mental Health Institute – Park City serves the majority of Office of Substance Use and Mental Health funded clients where they receive case management services to assist in determining the most appropriate level of care based on the client's acuity. The University of Utah Health Plans care management team tracks the civil commitments from Summit County and assists the inpatient facilities with discharge planning, which often includes services at the Huntsman Mental Health Institute – Park City clinic where they can be followed by the case management team and connected to community supports. Progress in treatment is tracked on an individual basis during multidisciplinary clinical team and clinical coordinating meetings between University of Utah Health Plans and Huntsman Mental Health Institute – Park City.

**Describe the activities you propose to undertake and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Define the process for referring an individual to a subcontractor for services. Include any planned changes in programming or funding. *Please highlight approaches to engage family systems.***

Healthy U. Behavioral Network services are divided amongst network clinicians and Huntsman Mental Health Institute – Park City. Services provided include:

- Individual Therapy,
- Group Therapy,
- Family Therapy,
- School-Based Services,
- Medication Assisted Treatments,
- Psychiatric Evaluation,
- Medication Management,
- Neuropsychological Assessment,
- Treatment Related Classes,
- Child and Adolescent Psychiatric Treatment,
- Child and Adolescent Psychology,
- Spanish Language Services.

**Individual Therapy:**

Individual therapy is offered on an outpatient basis for Summit County children and youth. Individual therapy can be accessed through the Summit County Network and is also offered in each of the Summit County public and charter schools. Children and youth may receive therapy services from any of the network clinicians, including clinicians at Huntsman Mental Health Institute – Park City and local non-profits. Occasionally students wishing to receive services outside of school for academic or extracurricular reasons are connected to services outside of Summit County but within the Healthy U. Behavioral Network. At times, students are best served outside of school due to level or acuity, comorbid conditions, or family situations. *In these cases, the Huntsman Mental Health Institute – Park City clinical team ensures the child's care is referred to appropriate services for both the child and the family.*

**Group Therapy:**

Group therapy is available through the network of clinicians after school and through school-based services. Currently, only Park City High School offers group therapy. *As the populations of North and South Summit continue to grow, the demand for group therapy will continue to be monitored for future expansion in both school districts.*

*Engagement of family systems occurs through wraparound services and programs such as Systems Of Care, Families First, primary care, school-based programs, and specific outpatient treatment plans focused on working with families to support positive outcomes and engagement outside of treatment. Often, clinicians will refer families and parents to parenting*

resources and classes offered by the Summit County Behavioral Health Prevention team such as Primed For Life and Guiding Good Choices. Huntsman Mental Health Institute – Park City is continuing to work on opening a youth Day Treatment program FY23/24, staffing dependent. This program will be modeled after the Huntsman Mental Health Institute’s Teenscope program offered in Salt Lake City.

Additionally, the Summit County Behavioral Health Division has partnered with the Live Like Sam Foundation to implement THRIVE in all public and charter schools in Summit County. THRIVE is a preventative mental health program that empowers and strengthens a youth’s overall well-being through an evidence-based curriculum and clinical psychology.

**Describe the approach to serving individuals with complex behavioral health presentations or who need multiple supports to remain in the community, including the programmatic approach to serving individuals in the least restrictive level of care. Identify your proposed fidelity monitoring and outcome measures.**

The school-based therapy program in Summit County plays a primary role in service delivery and early intervention for the children and youth of Summit County. In FY23, the school-based therapy program transferred to the Huntsman Mental Health Institute – Park City, which allows for greater integration between the schools and the array of clinical services (psychological, case management, psychiatric) offered through Huntsman Mental Health Institute – Park City. The connection between the schools and Huntsman Mental Health Institute – Park City is important because the first warning signs of the need for behavioral health services are often identified by school staff members, providing the best place for early intervention and reducing the severity of ongoing behavioral health issues throughout their lifetime. In this way, the Summit County approach to serving the children and youth in the least restrictive setting begins in the schools. We are continuing to expand youth-based peer support services in both Spanish and English. Additional community support from local non-profits focused on behavioral health services helps augment services in identifying youth in need of increased support. The Huntsman Mental Health Institute – Park City is able to provide psychological testing and psychiatric services prior to placement in a more restrictive inpatient setting.

**4) 24-Hour Crisis Care**  
**Adult Services**

**Nichole Cunha**

**Please outline plans for the next three years for access to crisis services during daytime work hours, afterhours, weekends and holidays. Describe how crisis services are utilized as a diversion from higher levels of care (inpatient, residential, etc.) and the criminal justice system. Identify what crisis services are currently provided in your area, where services are provided, and what gaps need to still be addressed to offer a full continuum of care to include access to a crisis line, mobile crisis outreach teams, and facility-based stabilization/receiving centers. Identify plans for meeting any statutory or administrative rule governing crisis services. For each service, identify whether you will provide services directly or through a contracted provider. Describe how you coordinate with state and local partners for services to include the Utah Crisis Line, JJS and other DHHS systems of care, law enforcement and first responders, for the provision of crisis services. Include any planned changes in programming or funding.**

FY23 saw a continued increase in the number of adults seeking crisis care. Adult Crisis Services are provided by the Summit County Network, which includes Huntsman Mental Health Institute – Park City, Wasatch Behavioral Health, Latino Behavioral Health, Intermountain Healthcare, Peace House, 911/988, Jewish Family Services, Holy Cross Ministries, Christian Center of Park City, CONNECT Summit County and network clinicians overseen by University of Utah Health Plans. Services within the Summit County Network are coordinated collectively through the Summit County Behavioral Health Division and University of Utah Health Plans. Individuals requiring crisis services are reported to the Summit County Behavioral Health Division and University of Utah Health Plans for appropriate follow-up and recovery care. When interactions involve the Mobile Crisis Outreach Team (MCOT), Wasatch Behavioral Health will coordinate follow-up services with its clinicians when appropriate.

**Huntsman Mental Health Institute – Park City:**

Crisis services are provided by both walk-in and crisis appointment scheduling Monday-Friday, 8am-5pm. Additionally, Huntsman Mental Health Institute – Park City responds to all crisis calls within the Summit County Jail 24/7 (Spanish services available).

**Intermountain Healthcare-Hospital:**

Adult Crisis services are provided 24/7 in the emergency department and in coordination with the Huntsman Mental Health Institute – Salt Lake via tele-health to determine if transport to inpatient care is required or if hospital behavioral staff are able to stabilize. Prior to discharge, a safety plan is developed, including scheduling a follow-up appointment with either Intermountain Healthcare or a University of Utah Health Plan’s Network Provider. For FY24, Huntsman Mental Health Institute – Park City is currently working on providing direct crisis service at the Park City Hospital to ensure greater wraparound for individuals who fall under the Local Authority's role, such as civil commitments and individuals with a severe mental illness (SMI).

**Intermountain Healthcare-Round Valley Clinic:**

Adult Crisis services are provided Monday-Saturday, 9am-8pm for both walk-in crisis care and crisis appointment scheduling.

**Peace House:**

Adult female crisis services are available 24/7. Special consideration is required for residential stay. (Spanish Provider Available)

**Healthy U. Behavioral Network Clinicians:**

The majority of clinicians provide 24/7 on-call services for clients in crisis and coordinate with either Huntsman Mental Health Institute – Park City or University of Utah Health Plans on post-care (Spanish Provider Available).

**Latino Behavioral Health:**

Summit County and University of Utah Health Plans contract with Latino Behavioral

Health to provide Spanish language crisis care as needed through an on-call clinician who is able to coordinate with the Mobile Crisis Outreach Team (MCOT). This is in addition to their expanded clinical and peer support services offered in Summit County. Summit County's goal is to have at least one member of each Mobile Crisis Outreach Team (MCOT) be a native and/or clinical Spanish speaker.

**Mobile Crisis Outreach Team (MCOT):**

Summit and Wasatch Counties have entered into an interlocal agreement to contract with Wasatch Behavioral Health for operations of a joint Mobile Crisis Outreach Team (MCOT) serving both counties. Per the agreement, psychiatric services are provided by Summit County along with 911 Dispatching, office space, and law enforcement coordination. Currently, one team provides coverage six days a week during business hours. Wasatch Behavioral Health has increased the starting salary to attract new staff to bring the Mobile Crisis Outreach Team (MCOT) program up to 24/7 operations, but due to the high cost of living in both counties, this is an ongoing problem.

For FY24/25, Wasatch Behavioral Health and the Summit County Behavioral Health Division are working to develop a firehouse service delivery model for the Mobile Crisis Outreach Team. The goal will be to have one Mobile Crisis Outreach Team housed in Summit County for five consecutive days allowing for 24-hour coverage and callout. In preparation, Wasatch Behavioral Health implanted a new housing allowance for staff living and working in the Wasatch back.

**Receiving Center For Wasatch and Summit County:**

In a continued effort to provide crisis services from a regional approach, over the next three years, Wasatch Behavioral Health and the Summit County Behavioral Health Division will be developing an operations plan for a joint Behavioral Health Local Authority Receiving Center, operating 24/7, supplementing the Mobile Crisis Outreach Team. This regional approach to the future development of a joint receiving center was placed in the 2023 update to the Summit County Mental Wellness Strategic Plan. Each year, the Utah Legislature allocates funds to expand receiving centers across the state. By working collectively, Summit and Wasatch Counties are in a strong position as additional state funding becomes available.

**Describe your current and planned evaluation procedures for crisis intervention services that objectively measure access and measurable outcomes for persons with both mental health and substance use disorders using data. Technical assistance with data specifications and key performance indicators are available if needed, please describe any areas for help that are required.**

Adults who are civilly committed have their care coordinated through Huntsman Mental Health Institute – Park City case managers. Those in court-ordered services go through Huntsman Mental Health Institute – Park City clinic for services.

Evaluation procedures for crisis services provided by Wasatch Behavioral Health can be found in their corresponding Area Plan for FY24. The Summit County Behavioral Health Division receives monthly reports from Wasatch Behavioral Health outlining crisis services provided, source of call/dispatch, care provided, results of interaction, and follow-up services

performed.

### **Children's Services**

**Nichole Cunha**

Please outline plans for the next three years for access to crisis services during daytime work hours, afterhours, weekends and holidays. Describe how crisis services are utilized as a diversion from higher levels of care (inpatient, residential, etc.) and the criminal justice system. Identify what crisis services are provided, where services are currently provided in your area, where services are provided, and what gaps need to still be addressed to offer a full continuum of care (including access to a Crisis Line, Mobile Crisis Outreach Teams, facility-based stabilization/receiving centers and In-Home Stabilization Services). Including if you provide SMR/Youth MCOT and Stabilization services, if you are not an SMR/Youth MCOT and Stabilization provider, how do you plan to coordinate with SMR providers in your region? For each service, identify whether you will provide services directly or through a contracted provider. Describe how you coordinate with state and local partners for services to include the Utah Crisis Line, JJYS and other DHHS systems of care, law enforcement and first responders, schools, and hospitals for the provision of crisis services to at-risk youth, children, and their families. Include any planned changes in programming or funding.

Child and Youth Crisis services are provided by the Summit County which includes Huntsman Mental Health Institute – Park City, Intermountain Healthcare, Local Education Authorities, Mobile Crisis Outreach Team (MCOT), and clinicians in the Healthy U. Behavioral Network clinicians. Services within the overall community network are coordinated collectively through the Summit County Behavioral Health Division and University of Utah Health Plans. Individuals who require crisis services are reported to both the Summit County Behavioral Health Division and University of Utah Health Plans for appropriate follow-up and recovery care.

#### **Huntsman Mental Health Institute – Park City:**

Child and Youth Crisis services are provided by both walk-in crisis care and crisis appointment scheduling Monday-Friday, 8am-5pm. (Spanish Provider Available)

#### **Intermountain Healthcare-Hospital:**

Child and Youth Crisis services are provided 24 hours a day in the emergency department in coordination with Huntsman Mental Health Institute - Salt Lake City via tele-health to determine if transport to inpatient care is required or if hospital behavioral staff are able to stabilize. Prior to discharge, an action/safety plan is developed, including setting up a follow-up appointment with either Intermountain Healthcare or a Healthy U. Behavioral Network clinician. The Summit County Behavioral Health Division is notified of individuals seen in the emergency department and coordinates follow-up as needed from school-based services.

#### **Intermountain Healthcare-Round Valley Clinic:**

Child and Youth Crisis services are provided Monday-Saturday, 9am-8pm for both walk-in crisis care and crisis appointment scheduling (Spanish Provider Available).

**Local Education Authorities:**

School counselors work closely with assigned school-based service clinicians to address crises during school hours. Monthly meetings between Local Education Authorities’ councilors, principals, superintendents, University of Utah Health Plan, and school-based clinicians allow for early identification of concerns and corresponding intervention to reduce the risk of future crisis intervention. Meetings currently take place within all school districts.

**Healthy U. Behavioral Network Clinicians:**

The majority of clinicians provide 24/7 on-call services for clients in crisis and coordinate with either the Huntsman Mental Health Institute – Park City or the University of Utah Health Plan’s Clinical Director on post care (Spanish Provider Available).

**Mobile Crisis Outreach Team (MCOT):**

Summit and Wasatch Counties have entered into an interlocal agreement to contract with Wasatch Behavioral Health for operations of a joint Mobile Crisis Outreach Team (MCOT) serving both counties. Per the agreement, psychiatric services are provided by Summit County along with 911 Dispatching, office space, and law enforcement coordination. Currently, one team provides coverage six days a week during business hours.

**Latino Behavioral Health:**

Summit County and University of Utah Health Plans contracted with Latino Behavioral Health to provide Spanish language crisis care as needed through an on-call clinician who is able to coordinate with local law enforcement and the Mobile Crisis Outreach Team (MCOT). This is in addition to their expanded clinical and peer support services now offered in Summit County. It is the goal of Summit County to have at least one member of each Mobile Crisis Outreach Team (MCOT) be a native and/or clinical Spanish speaker.

**Describe your current and planned evaluation procedures for children and youth crisis intervention services that objectively measure access and measurable outcomes for persons with both mental health and substance use disorders using data. Technical assistance with data specifications and key performance indicators are available if needed, please describe any areas for help that are required.**

When a youth is identified who needs a service or a clinician requests a service that cannot be provided, the Huntsman Mental Health Institute – Park City and University of Utah Health Plans collectively review the case to determine the most appropriate level of care and service(s) to provide to the client.

Daily crisis walk-in appointments are available at the Huntsman Mental Health Institute – Park City and the Intermountain Round Valley Clinic. Additionally, the Mobile Crisis Outreach Team (MCOT) can be accessed through the crisis line or 911/988. The Mobile Crisis Outreach Team (MCOT) will create a follow-up plan, depending on the needs of clients, and either coordinate with the Huntsman Mental Health Institute – Park City or handle the care of the individuals with Wasatch Behavioral Health clinicians, who operates the Mobile Crisis Outreach Team. Those receiving services are tracked using Treatment Episode Data Sets

(TEDS), Youth Outcomes Questionnaire/ Outcomes Questionnaire Assessments (OQ/YOQ), and Mental Health Statistical Improvement (MHSI) surveys.

There are many ways for children and youth to access crisis intervention services. Clinicians in the schools are able to make referrals, parents can engage the crisis line/ Mobile Crisis Outreach Team (MCOT), and Huntsman Mental Health Institute – Park City can provide direct services or make appropriate referrals to services in Salt Lake as needed.

## 5) Psychotropic Medication Management

### *Adult Services*

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. *Please list any specific procedures related to continuity of medication management during transitions between from or between providers/agencies/level of care settings.***

Medication management is provided by the overall Summit County Network, which includes Huntsman Mental Health Institute – Park City, Intermountain Healthcare, and clinicians overseen by University of Utah Health Plans in the Healthy U. Behavioral Network.

#### **Huntsman Mental Health Institute – Park City:**

Serving as the backbone provider for Office of Substance Use and Mental Health funded clients, Huntsman Mental Health Institute – Park City provides the majority of medication management. Huntsman Mental Health Institute – Park City is staffed by two psychiatrists and a psychiatric APRN (Advanced Practice Registered Nurse), who provides medication management. *The Healthy U. Behavioral Network, in partnership with the University of Utah College of Psychiatry, has established Summit County as a priority psychiatric rotation site for any Spanish-speaking psychiatrist, averaging three Spanish-speaking psychiatrists.* Work also includes access to clinicians in Salt Lake who manage psychotropic medications.

#### **Intermountain Round Valley Clinic:**

Through an ongoing donation, medication management is provided at the clinic, free of charge, for those in need or on SelectHealth insurance.

#### **Network Clinicians:**

Additional Advanced Practice Registered Nurses (APRN) and Medical Doctors (MD) provide medication management through the Network within Summit and surrounding counties, allowing for expanded access to psychotropic medication management. Four non-profits in Summit County share a psychiatric APRN (Advanced Practice Registered Nurse) specifically for providing medication management to their clients. Referrals are made to this service when appropriate, traditionally based on funding availability.

*To ensure continuity of care for psychotropic medication management within the Healthy U. Behavioral Network, providers are able to coordinate transitioning of care through case managers and the University of Utah Health Plans' care management team. Care managers*

work with case managers to coordinate a person's behavioral and physical healthcare, allowing for physical healthcare physicians to participate in the continued management of psychotropic medication.

When transitioning to a provider outside of the Healthy U. Behavioral Network, the case manager works with the new provider to ensure records are accessible to help justify the current psychotropic medication treatment. When the individual requires a higher level of care, the case manager, now former case manager, will reach out to the client after four weeks to ensure access to prescribed psychotropic medications remains.

### *Children's Services*

*Leah Colburn*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding. *Please list any specific procedures related to continuity of medication management during transitions between providers/agencies/level of care settings.***

Medication management is provided by the overall Summit County Network, which includes Huntsman Mental Health Institute – Park City, Intermountain Healthcare, non-profits, and clinicians overseen by University of Utah Health Plans in the Healthy U. Behavioral Network.

#### **Huntsman Mental Health Institute – Park City:**

Serving as the backbone provider for Office of Substance Use and Mental Health funded clients, Huntsman Mental Health Institute – Park City provides the majority of medication management to youth through school-based programs. Huntsman Mental Health Institute – Park City is staffed by two psychiatrists and a psychiatric APRN (Advanced Practice Registered Nurse), who provides medication management. [The Healthy U. Behavioral Network, in partnership with the University of Utah College of Psychiatry, has established Summit County as a priority psychiatric rotation site for any Spanish-speaking psychiatrist, averaging three Spanish-speaking psychiatrists.](#) Work also includes access to clinicians in Salt Lake who manage psychotropic medications.

#### **Intermountain Round Valley Clinic:**

Through an ongoing donation, medication management is provided at the clinic, free of charge, for those in need or on SelectHealth insurance.

#### **Network Clinicians:**

Additional Advanced Practice Registered Nurses (APRN) and Medical Doctors (MD) provide medication management through the Healthy U. Behavioral Network within Summit and surrounding counties, allowing for expanded access to psychotropic medication management. Four non-profits in Summit County share a psychiatric APRN (Advanced Practice Registered Nurse) specifically for providing medication management to their clients. Referrals are made to this service when appropriate, traditionally based on funding availability.

[To ensure continuity of care for psychotropic medication management within the Healthy U.](#)

Behavioral Network, providers are able to coordinate transitioning of care through case managers and the University of Utah Health Plans' care management team. Care managers work with case managers to coordinate a youth's behavioral and physical healthcare, allowing for physical healthcare physicians to participate in the continued management of psychotropic medication.

When transitioning to a provider outside of the Network, the case manager works with the new provider to ensure records are accessible to help justify the current psychotropic medication treatment. When the individual requires a higher level of care, the case manager, now former case manager, will reach out to the client after four weeks to ensure access to prescribed psychotropic medications remains.

## 6) Psychoeducation Services & Psychosocial Rehabilitation

### *Adult Services*

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

Psychoeducational Services and Psychosocial Rehabilitation services are provided through the Summit County Clubhouse which is in its **fourth** year of operations.

Individuals in need of these services are additionally referred to community clinicians as needed, often being referred through the Huntsman Mental Health Institute – Park City, case management team or University of Utah Health Plans.

**Describe how clients are identified for Psychoeducation and Psychosocial Rehabilitation services. How is the effectiveness of the services measured?**

The Summit County Clubhouse is a local 501c3 which provides psychoeducational and psychosocial rehabilitation to individuals referred by local clinicians who have a history of mental health and substance abuse disorder. Upon referral, the prospective member is invited to Summit County Clubhouse for a tour and to see if the program is something they would like to be involved in. Effectiveness is measured in decreased hospital stays, decreased engagement with law enforcement, increased employment, engagement in positive social activities, and daily participation in the program.

### *Children's Services*

*Leah Colburn*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

Summit County Behavioral Health Division provides Psychoeducational Rehabilitation for children and families in the community in conjunction with the Local Education Authority through parenting classes (Guiding Good Choices & Primed For Life in English and Spanish)

and School-based organizations (Hope Squads in all three high schools, and Peer Leadership Programs in each middle school.) In addition, Summit County Behavioral Health Division, along with the public and charter schools, have partnered with the Live Like Sam Foundation to implement THRIVE for the youth of Summit County. Comprising both clinical and preventative components, THRIVE delivers an evidence-based curriculum from the fields of positive and clinical psychology that promotes well-being, happiness, and resilience in students beginning in 6<sup>th</sup> Grade. Thrive provides one-on-one cognitive behavioral therapy with a clinician and student-led peer groups.

University of Utah Health Plans serves to coordinate with clinicians and case managers, prevention teams, respite clinicians, and Familial Risk Factors work to help youth develop coping skills, friendships, social functioning, and parenting effectiveness. Individual, family, and group classes help children and their families obtain skills to better function within the community.

**Describe how clients are identified for Psychoeducation and Psychosocial Rehabilitation services. How is the effectiveness of the services measured?**

Effectiveness is measured by decreased hospital stays, decreased engagement with law enforcement and school authorities, reduced demand on school-based services, increased social activities, and daily participation in the program.

The goal in Summit County is to ensure that there are multiple pathways for children to receive services. When a child participates in the school-based program, they are administered the Youth Outcomes Questionnaire (YOQ) to determine the need and level of psychoeducation and psychosocial rehabilitation services needed. When a child is referred from staff in the schools, they will be evaluated and reviewed during the weekly case staffing to determine the need for services and the most effective forms of treatment.

Referrals for Spanish-speaking children are made to the afterschool program run by Latino Behavioral Health through the parents or the schools. Additional support is provided by Live Like Sam through their THRIVE cohort for Latino youth.

**7) Case Management**  
*Adult Services*

*Pete Caldwell*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Please include how you ensure each case management provider is certified to provide these services. Include any planned changes in programming or funding.**

Case management services are provided through University of Utah Health Plans as a critical part of the service continuum. The purpose of case management is to assist individuals with diagnosed mental illness access to needed resources and coordinate care with clinicians to be successful in treatment with the goal of improving their overall quality of life in the least restrictive setting possible. Case management works with mental illness but also assists with psychosocial problems such as housing, transportation, application/attainment of benefits,

attainment of food, activities of daily living, medical appointments, education, employment, and other activities. In most cases, case managers work in conjunction with University of Utah Health Plans care managers, who oversee the full integration of behavioral healthcare with the client's physical healthcare.

All Case Managers are reviewed for current licensing and are registered for a service that monitors adverse actions or debarments with regard to the ability to bill Medicaid. If an adverse action appears on the record of a network provider, their file will be reviewed for action by University of Utah Health Plans provider relations.

**Please describe how eligibility is determined for case management services. How is the effectiveness of the services measured?**

Eligibility for case management services is determined by clinicians at Huntsman Mental Health Institute – Park City with the DLA 20 (Daily Living Activities) and Social Determinants of Health screening tools. Additionally, a complete biopsychosocial assessment is performed. Areas assessed which tend to determine the overall client's success in treatment are:

- Access to medical care,
- Access to nutritious foods,
- Access to clean water and functioning utilities,
- Early childhood social and physical environment, including child care,
- Education and health literacy,
- Ethnicity and cultural orientation,
- Familial and other social support,
- Gender,
- Housing and transportation resources,
- Linguistic and other communication capabilities,
- Neighborhood safety and recreational facilities,
- Occupation and job security,
- Other social stressors, such as exposure to violence and other adverse factors in the home environment,
- Sexual identification,
- Social status (degree of integration vs. isolation),
- Socioeconomic status,
- Spiritual/religious values.

Clinicians make recommendations to case management services as part of all treatment plans. Effectiveness is measured in follow-up case management services by reassessing with the same screening tools and evaluating outcome improvements.

*Children's Services  
Caldwell*

*Pete*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide**

**services directly or through a contracted provider. Please include how you ensure each case management provider is certified to provide these services. Include any planned changes in programming or funding.**

Child and Youth Case management services are provided through Huntsman Mental Health Institute – Park City. Case management is an important part of the service continuum. The purpose of case management is to assist individuals with serious mental illness to access needed resources and coordinate care with other clinicians to be successful and improve their quality of life in the least restrictive setting possible. Case management works with mental illness but also assists with psychosocial problems such as family needs relating to housing, transportation, application/attainment of benefits, attainment of food, activities of daily living, medical appointments, education, school engagement, and other activities.

The Huntsman Mental Health Institute – Park City, as part of its compliance process, checks certifications when someone is a new hire and then rechecks continuously throughout employment. Certification must be kept current by all staff to work in a capacity that requires licensure.

**Please describe how eligibility is determined for case management services. How is the effectiveness of the service measured?**

Eligibility for case management services is determined by clinicians at Huntsman Mental Health Institute – Park City through the use of the DLA 20 (Daily Living Activities) and Social Determinants of Health screening tools, along with a complete biopsychosocial assessment. Areas assessed which tend to determine overall client's success in treatment are:

- Access to medical care,
- Access to nutritious foods,
- Access to clean water and functioning utilities,
- Early childhood social and physical environment, including child care,
- Education and health literacy,
- Ethnicity and cultural orientation,
- Familial and other social support,
- Gender,
- Housing and transportation resources,
- Linguistic and other communication capabilities,
- Neighborhood safety and recreational facilities,
- Occupation and job security,
- Other social stressors, such as exposure to violence and other adverse, factors in the home environment,
- Sexual identification,
- Social status (degree of integration vs. isolation),
- Socioeconomic status,
- Spiritual/religious values.

Clinicians make recommendations to case management services as part of all treatment plans. Effectiveness is measured in follow-up case management services by reassessing with the same screening tools and finding improved outcomes.

**8) Community Supports (housing services)**

**Adult Services**

*Pete Caldwell*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans, through Healthy U. Behavioral, has a community partnership with Mountainlands Community Housing Trust in Park City to provide affordable housing options to qualified residents of Summit County. Huntsman Mental Health Institute – Park City case managers, Family Peer Support Specialists, and clinicians assist clients in applying and working toward low-income and independent housing as appropriate. All placements are done through coordination with case managers and Mountainlands Community Housing Trust. Evaluations are done on an ad hoc basis, to prioritize the clinical need for placement in each program. Program has not been used for several years, as such, should a resident be in need of this service, funding will be redirected as needed.

Housing is a growing concern and priority in Summit County. As such, it has been identified within the 2023 Summit County Mental Wellness Strategic Plan. Over the next four years, a coordinated effort will be taking place to address the breadth of housing issues. Specific to the Area Plan, the following Strategic Plan objectives have been identified.

- Working with community partners, conduct a needs assessment focused on housing for individuals living with a mental health or substance use diagnosis.
- Develop a community-based housing plan focused on providing sustainable housing for individuals living with a mental health and/or substance use diagnosis.
- Expand housing opportunities for Drug Court participants transitioning from treatment to independence.

**Indicate what assessment tools are used to determine criteria, level of care and outcomes for placement in treatment-based and/or supportive housing? [Technical assistance is available through Pete Caldwell: pgcaldwell@utah.gov](mailto:pgcaldwell@utah.gov)**

Appropriateness for referral for housing services (if available through community resources) is determined by clinicians at Huntsman Mental Health Institute – Park City through the DLA 20 (Daily Living Activities) and Social Determinants of Health screening tools. Additionally, a complete biopsychosocial assessment may be performed. Outcomes are determined by the case manager and the client’s ability to reintegrate after supportive housing. Referrals made to Mountainlands and are based on a lottery system.

It should be noted that due to the extreme cost of housing in Summit County, and the majority of low-income housing being reserved for ski resort employees on a seasonal basis, the Park City Community Foundation determined in their FY22 study of housing that the minimum income for a one-bedroom apartment, allowing for only 1/3rd of a person’s income to go towards a mortgage, a minimum income of \$200,000. [As of March 2023, the medium price of](#)

a single-family home in the Park City area was \$1,920,000 and the medium price for a condo was \$1,250,000.

**Children's Services (respite services)**

**Leah Colburn**

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Please identify how this fits within your continuum of care. Include any planned changes in programming or funding.**

Summit County is continuing to search for a youth respite provider. An active Request For Proposals was released in February 2023, with no qualified applicants. We will continue to work with the Office of Substance Use and Mental Health to find a qualified respite provider.

**Please describe how you determine eligibility for respite services. How is the effectiveness of the service measured?**

Case management services performed at Huntsman Mental Health Institute – Park City will make referrals to respite as needed.

**9) Peer Support Services**

**Adult Services**

**Heather Rydalch**

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

Certified Peer Support Specialists (PSSs) provide peer support services through a broad range of support services such as Social Security, Dept. of Workforce Services, housing, and job search. All Peer Support Specialists are certified by the Office of Substance Use and Mental Health. When Certified, Peer Support Specialists work closely with case managers, clinicians, and clients have the best chance for a sustained recovery. Psychosocial Rehabilitation Services can also be provided by Certified Peer Support Specialists to aid clients in building new skills or enhancing former skills. Peer Support Specialists offer services in-house, in the jail, and throughout the community. Peer Support Specialists work closely with the courts, including Drug Court, for additional support with high-risk, high-need clients.

Huntsman Mental Health Institute – Park City provides the majority of peer support services for behavioral health with a full-time Peer Support Specialist who also serves as a peer support.

University of Utah Health Plans employs a Family Resource Facilitator (FRF) **who works primarily with Spanish Speaking clients**. The University of Utah Health Plans Family Resource Facilitator helps families struggling with mental health issues and helps families navigate systems that can be difficult for Latino families, including coordination of behavioral and physical healthcare.

A community fund has been established to support individuals, especially graduates of the Summit County Drug Court program, as they undergo their Peer Support Specialist training and certification. It is the intent of the program to encourage the development of more local Certified Peer Support Specialists to serve in Summit County.

**Describe how clients are identified for Peer Support Specialist services. How is the effectiveness of the services measured?**

Clients are identified for Certified Peer Support Specialists services after initial biopsychosocial screening and assessment as part of their treatment plan at the Huntsman Mental Health Institute – Park City. Clients may also be referred to Peer Support Specialists through Healthy U. Behavioral Network clinicians if a client is not being seen through Huntsman Mental Health Institute – Park City clinic.

**Children’s Services**

**Leah Colburn**

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Describe how Family Peer Support Specialists will partner with other Department of Health & Human Services child serving agencies, including DCFS, DJJYS, DSPD, and HFW. Include any planned changes in programming or funding.**

Children and Youth Peer Support Services are provided by a Family Resource Facilitator (FRF). The Family Resource Facilitator is contracted through University of Utah Health Plans and acts as an advocate for families and their children. The Family Resource Facilitator is trained in wraparound and executes plans to fidelity. These services are available to the community and do not require that they be opened as a University of Utah Health Plans client. The Family Resource Facilitator participates as necessary in the staffing meetings and coordination of care with University of Utah Health Plans and Huntsman Mental Health Institute – Park City. In addition, Healthy U. Behavioral Network clinicians work with wraparound programs like Systems of Care and Families First.

**Describe how clients are identified for Family Peer Support Specialist services. How is the effectiveness of the services measured?**

Clients are identified for Certified Peer Support Specialists services after initial biopsychosocial screening and assessment as part of their treatment plan at the Huntsman Mental Health Institute – Park City.

Clients may also be referred to Peer Support Specialists through clinicians in the Healthy U. Behavioral Network if a client is not being seen through the Huntsman Mental Health Institute – Park City clinic. Clients are also able to be could also be referred to Peer Support Specialists through the school-based services which are provided by Huntsman Mental Health Institute – Park City.

## 10) Consultation & Education Services

### *Adult Services*

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans provides an array of consultation and education services. Huntsman Mental Health Institute – Park City staff and Summit County Network clinicians are asked to present at various community events, including community-wide issues conferences, school groups, health fairs, and other settings. Staff provide information on how to access services and information on how to access services, and information on prevention of behavioral health problems. The Summit County Behavioral Health Division has regular spots on both Park City TV and KPCW in which network clinicians are highlighted in accordance with the behavioral health topic being discussed.

Additionally, the Summit County Mental Wellness Alliance, CONNECT Summit County, Live Like Sam Foundation, Park City Community Foundation, the Summit County Health Department, Park City Municipal Corporation, partner non-profits, University of Utah Health Plans, school districts, and Summit County share Facebook and Twitter posts related to behavioral healthcare programs and services. Social media posts are developed in both English and Spanish.

Information and education on services provided are conducted by the non-profit CONNECT via their navigation services and provider database. <https://summit.ut.networkofcare.org/mh/>

Twice a year, the Latino Behavioral Health Committee hosts a Latino Behavioral Health Fair for all services within Summit County provided in Spanish. The event includes panel discussions and Question Persuade Reefer (QPR) trainings.

### *Children's Services*

*Leah Colburn*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans provides consultation and education services in various ways. Huntsman Mental Health Institute – Park City staff and Healthy U. Behavioral Network clinicians are asked to present at community events, including community-wide issues conferences, school groups, health fairs, and other settings. Staff provide information on how to access services and information on preventing behavioral health problems. The Summit County Behavioral Health Division has regular spots on both Park City TV and KPCW, in which various network clinicians are highlighted per the discussed behavioral health topic. University of Utah Health Plans has been utilizing written media, in addition to KPCW and Park City TV, to provide information to children and youth. Additional focus has been on “swag” for school districts provided by the Behavioral Health Division, such as book bags, water bottles, and t-shirts with information about SafeUT, QPR, and school-based services. University of Utah Health Plans and local school districts have worked to increase awareness about school-based services through trainings for faculty and general information sent to

parents.

University of Utah Health Plans participates in the Children’s Justice Center’s monthly meetings and consults on the activities of Children’s Justice Center cases.

Additionally, the Summit County Mental Wellness Alliance, CONNECT Summit County, the Summit County Health Department, Park City Municipal, partner non-profits, Healthy U. Behavioral, school districts, and Summit County share Facebook and Twitter posts on behavioral healthcare programs and services. Social media posts are developed in both English and Spanish. Additional information and education on services provided is conducted by the non-profit CONNECT via their navigation services and provider database.  
<https://summit.ut.networkofcare.org/mh/>

### 11) Services to Incarcerated Persons

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider, and how you will coordinate with the jail to ensure service delivery is adequate. Include any planned changes in programming or funding.**

The Huntsman Mental Health Institute-Park City provides weekly consultation with a psychiatrist, evaluations, appointments with a social worker, groups, Peer Support Services, and active case management to manage mental illness during incarceration with the goal of lowering the risk of recidivism and provide for successful reintegration into the community. [Beginning in FY24, the Summit County Behavioral Health Division will be conducting Primed For Life classes in the Summit County Jail.](#)

[Effective April 2023, the Summit County Council authorized the usage of Opioid Settlement Funds to provide Subutex Vivitrol treatments in the Summit County Jail. Upon entrance into the Summit County Jail, individuals abusing Heroin and/or opioids will be treated with Subutex to facilitate a controlled withdrawal through the use of Subutex strips. Prior to release, it is proposed that individuals who have successfully undergone detoxification while in jail related to Heroin and/or opioids receive one dosage of Vivitrol.](#)

**Describe how clients are identified for services while incarcerated. How is the effectiveness of the services measured?**

Clients are assessed while incarcerated by request of Summit County Jail staff, courts, and representing attorneys. Clinical staff from Huntsman Mental Health Institute – Park City or the Mobile Crisis Outreach Team (MCOT) see individuals in the Summit County Jail either in person or via tele-health to perform assessments, develop treatment recommendations, and report to the courts and referral sources accordingly. Clients may be released to inpatient and outpatient treatment through a court order and referral.

The Mobile Crisis Outreach Team (MCOT), provides these same types of services in the jail and utilizes a similar assessment process and possible transfer to treatment services. Effectiveness is measured by adherence to and completion of recommended treatment

reported by the Huntsman Mental Health Institute – Park City team and communicated to the courts. In addition, effectiveness is measured by follow-up therapy when released from incarceration. Huntsman Mental Health Institute – Park City facilitates that transition in advance of a release date. Huntsman Mental Health Institute – Park City employs a therapist dedicated to group and individual therapy in the Summit County Jail, 6-10 hours per week.

Over the next three years, the newly formed Criminal Justice Coordinating Committee (CJCC) will be working on an early diversion program for individuals with a behavioral health diagnosis to direct them to care while keeping them out of the Summit County Jail. A similar program, called 24/7, is in place for individuals with a substance use charge.

**Describe the process used to engage clients who are transitioning out of incarceration.**

Individuals transitioning from care while incarcerated are transferred into treatment programs, either through Huntsman Mental Health Institute – Park City’s outpatient services or referred to inpatient care. Clients are engaged throughout the assessment, treatment planning, goal setting, and the use of supports such as Peer Support Specialists, case management services, and community non-profits. The services are initiated by either the Mobile Crisis Outreach Team (Wasatch Behavioral Health) or the Huntsman Mental Health Institute – Park City. When appropriate, the Summit County Probation Deputies coordinate with the Huntsman Mental Health Institute – Park City team to ensure a successful transition.

**12) Outplacement**

**Adult Services**

*Pam Bennett*

**Describe the activities you propose to undertake over the three year period with outplacement funding, and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans utilizes outplacement funds to provide services to individuals transitioning from the Utah State Hospital back into the community. Outplacement funds, along with community non-profit scholarships, are utilized for services, supplies, and needed support not covered by Medicaid to facilitate a successful community placement. Examples of fund utilization include coverage of housing costs, non-covered treatment costs, or other community resources needed for success in the transition to a lower level of care.

**Children’s Services**

*Leah Colburn*

**Describe the activities you propose to undertake over the three year period with outplacement funding, and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans utilizes County outplacement funds to provide services to individuals transitioning from the Utah State Hospital back into the community. These funds are utilized to purchase services, supplies, and additional support for youth not covered by

Medicaid to transition slower than adults to a less restrictive home or school setting and help the family during this reintegration process.

### 13) Unfunded Clients

#### Adult Services

Pam Bennett

**Describe the activities you propose to undertake over the three year period and identify specific populations where services are and are not provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans provides services to individuals residing in Summit County who are uninsured or underinsured. We require verification of income and then fees are set according to a sliding scale. Services include psychiatric evaluation, medication management, individual and group therapy, case management, and skills services.

For residents dealing with concerns related to immigration, Jewish Family Services, Christian Center of Park City, Holy Cross Ministries, and Latino Behavioral Health provide services in Spanish for uninsured or underinsured residents as part of the overall Summit County Network.

**Describe agency efforts to help unfunded adults become funded and address barriers to maintaining funding coverage.**

When individuals apply for free or reduced-cost services, they are encouraged by the intake team to apply for Medicaid if there is reason to believe that they will be successful in their application. Intake coordinators ask *"is there a reason to believe you would not be eligible for Medicaid,"* in place of a referral. This has been found to be more effective for enrolling Spanish-speaking clients. We do not track the number of individuals referred to Take Care Utah or who are advised to enroll in private insurance plans other than those that are participating in drug court. The referrals are simply made through the clinic as the resident is seeking services.

The primary barrier faced in Summit County is a reluctance of Spanish-speaking individuals to apply for Medicaid out of fear of receiving services outside of the non-profit system. There is a belief that once enrolled in Medicaid, services at non-profits such as the People's Health Clinic and the Christian Center of Park City will be closed to them. This includes services such as the food pantry and housing assistance, despite this not being the case.

**Describe the activities you propose to undertake over the three year period and identify specific populations where services are and are not provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

University of Utah Health Plans provides services to individuals residing in Summit County who are uninsured or underinsured. We require a parent's or guardian's verification of income and then fees are set according to a sliding scale. Services include psychiatric evaluation, medication management, individual and group therapy, case management, and skills services.

Children and Youth who are unable to have services paid from non-state sources qualify for state unfunded service dollars and are eligible for the school-based program run through the Huntsman Mental Health Institute – Park City in every public and charter school in Summit County. Individual and group therapy is offered through school-based programs.

For families dealing with concerns related to immigration, Jewish Family Services, Christian Center of Park City, Holy Cross Ministries, and Latino Behavioral Health provide services in Spanish for uninsured or underinsured residents in need of care as part of the overall Summit County Network.

In several cases, the new scholarship program offered by CONNECT Summit County has served a critical role in the continuation of care for youth. The Summit County Behavioral Health Division would like to thank CONNECT for developing this critical resource within our community.

**Describe agency efforts to help unfunded youth and families become funded and address barriers to maintaining funding coverage.**

When individuals or families apply for free or reduced-cost services they are encouraged by the intake team to apply for Medicaid if there is reason to believe that they will be successful in their application.

Vail Epic Care program provides behavioral health services for employees as well as people living with employees, including non-family members.

CONNECT Summit County, along with the Summit County Behavioral Health Division, the Katz Amsterdam Foundation, the Park City Community Foundation, and local donors have established a scholarship fund designed to individuals and families in maintaining their behavioral health treatment when the cost of covering ongoing treatment is no longer financially feasible. Additionally, the majority of non-profit behavioral healthcare providers in Summit County offer some form of scholarship program to cover the costs of treatment.

**14) First Episode Psychosis (FEP) Services**

*Jessica Makin*

**Describe the activities you propose to undertake over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in programming or funding.**

All First Episode Psychosis Services are provided by the Huntsman Mental Health Institute – Park City in coordination with Huntsman Mental Health Institute – Salt Lake. First-episode psychosis clients are reviewed in staffing meetings and treatment is tailored to reducing the trajectory and acuity over the course of the client’s lifetime as well as preparing the client for managing their condition to reduce the impact on their life.

**Describe how clients are identified for FEP services. How is the effectiveness of the services measured?**

During the intake process, clients are screened and tracked during the first onset of psychotic symptoms as young as thirteen years old. Clients are monitored for the first onset of psychosis so services can be determined prior to onset. Initial screenings are administered using the PRIME screening tool developed at the Yale Medical School. PRIME is specialized in identifying early signs of psychosis allowing for a, if indicated, trained clinicians to administer the Structured Interview for Psychosis-Risk Syndromes (SIPS) by a SIPS trained clinician.

**Describe plans to ensure sustainability of FEP services. This includes: financial sustainability plans(e.g. billing and making changes to CMS to support billing) and sustainable practices to ensure fidelity to the CSC PREP treatment model. Describe process for tracking treatment outcomes. [Technical assistance is available through Jessica Makin at jmakin@utah.gov](mailto:jmakin@utah.gov)**

Summit County does not receive first-episode psychosis funding from the Office of Substance Use and Mental Health. In the event that it is needed, clients are referred for first-episode psychosis treatment to Huntsman Mental Health Institute – Salt Lake City and care will be coordinated with Huntsman Mental Health Institute – Park City. These services are paid out of the mental health block grant if Medicaid does not cover the client.

**15) Client Employment**

*Sharon Cook*

**Increasing evidence exists to support the claim that competitive, integrated and meaningful employment is an essential part of the recovery process and is a key factor in supporting mental wellness. In the following spaces, please describe your efforts to increase client employment in accordance with Employment First 62A-15-105.2. Include any planned changes in programming or funding.**

**Competitive, integrated and meaningful employment in the community (including both adults and transition-aged youth).**

Assigned Case managers help with employment placement services. It should be noted that given the highly seasonal jobs environment in Summit County, it is common for individuals to be without work for upwards of two months during “shoulder seasons” (October, November,

April, May) when the resorts, galleries, restaurants, and outfitters are often closed.

Clients, upon recommendation, have access to year-round employment due to support from Home Depot, Park City Municipal, Summit County, Red Banjo Pizza, and Squatters Roadhouse.

The Summit County High Valley Transit District will provide training to any individual with a mental health or substance use diagnosis, with the offer of employment upon completion. This program is currently being offered to members of the Summit County Clubhouse and to participants of the Drug Court Program, with future expansion planned.

**The referral process for employment services and how clients who are referred to receive employment services are identified.**

Case Managers at Huntsman Mental Health Institute – Park City following the screening process reported in Form A (case management screening/assessment tools) above, and work with the Department of Workforce Services as well as our community partner, the Summit County Clubhouse, to support employment services for clients.

**Collaborative employment efforts involving other community partners.**

University of Utah Health Plans works in collaboration with Vocational Rehabilitation and the Department of Workforce Services to access supports and services for clients that desire gainful employment but have barriers due to mental health or substance use issues. The Summit County Behavioral Health Division works with local resorts and ancillary businesses to establish relationships for referred employment. Summit County CONNECT, Jewish Family Service, the Summit County Clubhouse, and the Christian Center of Park City additionally provide access to employment opportunities through case management.

**Employment of people with lived experience as staff through the Local Authority or subcontractors.**

Employment throughout the University of Utah Health Plans system cannot track lived experience due to employment law and HR regulations. However, some community partners such as CONNECT Summit County and Summit County Clubhouse do hire partly based on lived experience criteria. Currently, there are **four** individuals working in Peer Support Specialists roles who have lived experience as part of their work requirements.

**Evidence-Based Supported Employment.**

Not applicable with the network model.

## 16) Quality & Access Improvements

Identify process improvement activities over the next three years. Include any planned changes in programming or funding.

**Please describe policies for improving cultural responsiveness across agency staff and in services, including “Eliminating Health Disparity Strategic Plan” goals with progress. Include efforts to document cultural background and linguistic preferences, incorporate cultural practice into treatment plans and service delivery, and the provision of services in preferred language (bilingual therapist or interpreter).**

Serving as the guiding document for behavioral health services in Summit County, including the Healthy U. Behavioral Network, non-profits, Local Education Authorities, and private clinicians, the Summit County Mental Wellness Strategic Plan established Goal V as ensuring “*equity of mental health & substance use programs and services for Latino and underserved community members.*” As a means to achieve this Goal, the following objectives have been assigned to this goal:

1. Address barriers facing Latino community members in accessing and receiving linguistically competent mental health & substance use programs and services.
2. Enhance online means and resources to connect Latinos and other underserved residents with services and programs within the community.
3. Working with key stakeholders, address barriers to licensure within the state of Utah for non-native English speakers.
4. Establish a high school to licensure program for native Spanish-speaking residents in Summit County to cover the costs of education (including bachelors) and licensure, along with providing internships and job placement within Summit County.
5. Increase opportunities for Latino youth to engage in programs focused on mental, physical, and emotional health.
6. Provide Latino Families who may be or have a member in their household identifying as LGBTQ+ have access to information or supportive resources specific to the Latino LGBTQ+ communities.
7. Establish a Healthy Minds program through Latino Behavioral Health in Summit County.
8. Establish a Spanish-language Telehealth service network with clinicians outside of Utah to expand service access to increase the number of sessions in Spanish from clinicians in other states with reciprocity.
9. Ensure the Latino community’s voice is represented on all committees and programs outlined within this Strategic Plan.

**Service Capacity: Systemic approaches to increase access in programs for clients, workforce recruitment and retention, Medicaid and Non-Medicaid funded individuals, client flow through programming. Please describe how the end of the Public Health**

**Emergency and subsequent unwinding is expected to impact the agency's services and funding.**

Currently Healthy U. Behavioral receives lists of individuals who are termed from Medicaid due to the "unwinding." When Healthy U. behavioral receives these lists they share them with the Huntsman Mental Health Institute – Park City so that any active clients can be identified. If there are any active clients who are scheduled to be termed from Medicaid the case management team at the clinic will work with the client to reinstate their Medicaid policy or to move them onto grant funding for continued necessary services. Both the Summit County Network and the Healthy U. Network have the capacity to absorb additional unfunded clients through Huntsman Mental Health Institute – Park City. Should the number of people removed from Medicaid-funded behavioral healthcare into either the Summit County Network or the Healthy U. Network exceeds capacity or funding, a policy for triage will need to be established and implemented.

**Describe how mental health needs and specialized services for people in Nursing Facilities are being met in your area.**

NA

**Telehealth: How do you measure the quality of services provided by telehealth? Describe what programming telehealth is used in.**

University of Utah Health Plans providers utilize a hybrid model for care. Patients are offered telehealth and in person services and clinical staff will see patients in their preferred method. The Huntsman Mental Health Institute has specific policies for telehealth platforms and confidentiality and oversight for quality that providers adhere to. Policies have been added to the Area Plan folder.

**Describe how you are addressing maternal mental health in your community. Describe how you are addressing early childhood (0-5 years) mental health needs within your community. Describe how you are coordinating between maternal and early childhood mental health services. Technical assistance is available through Codie Thurgood: [cthurgood@utah.gov](mailto:cthurgood@utah.gov)**

In partnership with the Summit and Wasatch County Early Intervention program (Utah Department of Health's funded Early Intervention, not to be confused with the Utah Office of Substance Use and Mental Health funded Early Intervention program, both of which are referred to as EI.) are run out of the Summit County Health Department, Early Intervention clients have both telehealth and in-home access to a contracted psychologist and Licensed Clinical Social Worker. This program is funded jointly by the Summit County Health Department and the Katz-Amsterdam Foundation, and where possible, Medicaid is billed. In cases where Medicaid is unable to be billed for these services, community donations support a scholarship fund to continue these services until such time as State funding is approved by the legislature. Early Intervention includes pre-natal mental health services to support maternal mental health. For program participants located within Wasatch County, Wasatch Behavioral Health serves as the agency of referral.

Describe how you are addressing services for transition-age youth (TAY) (age 16-25) in your community. Describe how you are coordinating between child and adult serving programs to ensure continuity of care for TAY. Describe how you are incorporating meaningful feedback from TAY to improve services. **Technical assistance is available through Jessica Makin, [jmakin@utah.gov](mailto:jmakin@utah.gov), and Theo Schwartz, [aschwartz@utah.gov](mailto:aschwartz@utah.gov)**

Transition age services generally start in the school-based program. Students are identified for services early in their academic career and as they near graduation clinicians work to put in place an ongoing behavioral healthcare plan, especially those that will not be living with family or those that may not have access to mental healthcare. School-based clinicians are able to arranged for ongoing care that is been funded through the block grant or through CONNECT Summit County's scholarship program. Additionally, school-based clinicians help students arrange counseling at the colleges they attend post high school.

**Other Quality and Access Improvement [Projects](#) (not included above)**

[Healthy U. Behavioral](#) is working on a Performance Improvement Plan (PIP) around services following inpatient stays measured by outpatient services performed within 7 and 30 days after discharge.

**17) Integrated Care**

*Pete Caldwell*

**Describe your partnerships with local Health Departments, accountable care organizations (ACOs), federally qualified health centers (FQHCs) and other physical health providers.**

University of Utah Health Plans is an Accountable Care Organization (ACO) providing both behavioral health and physical health Medicaid clients with an integrated Medicaid plan. University of Utah Health Plans also has a good relationship with the other three Accountable Care Organizations (ACO) providing physical health Medicaid. We are working on the integrated pilot program along the Wasatch Front, and taking those lessons learned to improve in Summit County.

University of Utah Health Plans and the Summit County Division of Behavioral Health, which is a part of the Summit County Health Department, have a strong working relationship. Through weekly meetings with the Director of Behavioral Health and participation in the Summit County Mental Wellness Alliance committees, Healthy U. Behavioral is a well-regarded partner for the Summit County community.

**Describe your efforts to integrate care and ensure that children, youth and adults have [both their physical and behavioral health](#) needs met, including training, screening and treatment and recovery support (see Office Directives Section E.viii). [Identify what you see as the primary barriers to implementing integrated care at your agency and your efforts to overcome those barriers. Please also describe how you will provide education and referrals to individuals regarding physical health concerns \(i.e., HIV, TB, Hep-C, Diabetes, Pregnancy\).](#)**

University of Utah Health Plans oversees both Mental Health and Substance Use Disorder treatments within the Healthy U. Behavioral Network. It also includes care managers who work with individuals on coordinating physical and behavioral health services to integrate care and prevent redundancy or holes in care. University of Utah Health Plans has the advantage of being an Accountable Care Organization (ACO), so we have a large nursing care management team that excels in behavioral and physical care management.

**Describe your efforts to incorporate wellness and wellness education into treatment plans for children, youth and adults. Please consider social determinants of health in your response.**

The Huntsman Mental Health Institute – Park City clinic offers engagement in programs like Fit to Recover (recovery-based wellness), trauma-informed yoga through PC Yoga Collective and Tall Mountain Wellness, care management services through the University of Utah Health network, and case management and Psycho-Social Support services used to consistently assess client needs over the course of their engagement in treatment.

**Quality Improvement: What education does your staff receive regarding health and wellness for client care including children, youth and adults?**

University of Utah Health Plans provides both behavioral and physical healthcare as the Accountable Care Organization (ACO) arm of the University of Utah. As an arm of the University of Utah, opportunities for continued education are offered by the College of Psychiatry and other colleges and departments from Healthy U. in the University of Utah system.

**Describe your plan to reduce tobacco and nicotine use in SFY 2023, and how you will maintain a *nicotine free environment* as a direct service or subcontracting agency. For ongoing engagement, it is recommended to use an evidence-based nicotine dependence tool such as the Fagerstrom scale. SUD Target= reduce tobacco and nicotine use by 4.8%.**

University of Utah Health Plans Clinicians do not allow the use of tobacco products within 25 feet of the facilities, and individuals who wish to stop using tobacco products are referred to the National Jewish Health Quitline for one-on-one coaching, support services, and nicotine replacement therapy. We coordinate prevention work with the Summit County Health Department.

**Describe your efforts to provide mental health services for individuals with co-occurring mental health and intellectual/developmental disabilities. Please identify an agency liaison for OSUMH to contact for IDD/MH program work.**

University of Utah Health Plans provides mental health services for children and coordinates with the waiver services, and for adults, we provide mental health services and refer to the Summit County Clubhouse, National Ability Center, or Bridge 21 for additional support services.

**18) Mental Health Early Intervention (EIM) Funds**

**Please complete each section as it pertains to MHEI funding utilization.**

**School Based Behavioral Health: Describe the School-Based Behavioral Health activities or other OSUMH approved activity your agency proposes to undertake with MHEI funding over the three year period. Please describe how you intend to support family involvement in treatment. For each service, identify whether you will provide services directly or through a contracted provider. Please include: any partnerships related to 2019 HB373 funding and any telehealth related services provided in school settings. Include any planned changes in programming or funding. Please email Leah Colburn [lacolburn@utah.gov](mailto:lacolburn@utah.gov) a list of your FY24 school locations.**

Huntsman Mental Health Institute – Park City staffs the school-based mental health program in Summit County, and in cooperation with the University of Utah School of Psychology, has clinicians and psychology student interns placed in all 19 schools in Summit County. Each school has, at minimum, one clinician. Some schools with higher needs and volume will have additional clinicians each week. The schools initiate student referrals and contact families. Once family support is engaged, the school will alert the Huntsman Mental Health Institute – Park City school-based clinician and begin an intake process with students and families. Students see clinicians based on need. The school-based program also has access to referrals for psychological consultations conducted by psychiatrists from Huntsman Mental Health Institute – Park City and Salt Lake City. These are referred by the clinician seeing the child for school-based therapy when further inquiry and assessment are indicated. When clinical staff identifies the need for families to be involved in the therapeutic process, clinicians will refer families to Huntsman Mental Health Institute – Park City where opportunities for funding are available and there is increased availability for services.

**Please describe how your agency plans to collect data including MHEI required data points and YOQ outcomes in your school programs. Identify who the MHEI Quarterly Reporting should be sent to, including their email.**

Mental Health Early Intervention (MHEI) requests should be sent to Kristin McHugh and Cristie Frey at [Huntsman Mental Health Institute – Park City](http://Huntsman Mental Health Institute – Park City) [kristin.mchugh@hsc.utah.edu](mailto:kristin.mchugh@hsc.utah.edu) [Cristie.Frey@hsc.utah.edu](mailto:Cristie.Frey@hsc.utah.edu)

The school therapists collect Youth Outcomes Questionary (YOQ) surveys for each client monthly and do so through the Outcomes Questionary system so they should be visible to the Office of Substance Use and Mental Health personnel. Similarly the youth services collect Mental Health Early Intervention (MHEI) required data points at intake and during each session, via smart sheet and the EPIC Electronic Health Records System (EHR), and that data is turn into the Office of Substance Use and Mental Health through University of Utah Health Plans.

**Family Peer Support: Describe the Family Peer Support activities your agency proposes to undertake with MHEI funding over the three year period and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider. Include any planned changes in**

programming or funding. For those not using MHEI funding for this service, please indicate “N/A” in the box below.

University of Utah Health Plans contracts with Allies with Families to provide a Family Resource Facilitator (FRF) with wraparound services. In addition of office treatment, services are able to be provided in the family’s home or in a community setting. University of Utah Health Plans also participates in the Multidisciplinary Task Force and collaborates with [Division of Child and Family Services and Children’s Justice Center](#), [Division of Services for People with Disabilities \(DSPD\)](#), and other social services.

**Mobile Crisis Team: Describe the *Mobile Crisis Team* activities your agency proposes to undertake with MHEI funding over the three year period and identify where services are provided. Include any planned changes in programming or funding. For those not using MHEI funding for this service, please indicate “N/A” in the box below.**

N/A–Wasatch runs the [Mobile Crisis Outreach Team \(MCOT\)](#).

### 19) Suicide Prevention, Intervention & Postvention

**Carol Ruddell**

**Identify, define and describe all current strategies, programs and activities in place in suicide prevention, intervention and postvention. Strategies and programs should be evidence-based and align with the Utah State Suicide Prevention Plan. For intervention/treatment, describe your policies and procedures for suicide screening, risk assessment, and safety planning as well as suicide specific treatment and follow up/care transition services. Describe how clients are identified for suicide specific services. How is the effectiveness of the services measured? Include the evaluation of the activities and their effectiveness on a program and community level. If available, please attach the localized agency suicide prevention plan or link to plan.**

#### **Prevention:**

Suicide prevention programs are run through the Summit County Behavioral Health Division’s Prevention Team with the Latino Behavioral Health Committee, CONNECT, and the Summit County Mental Wellness Alliance.

The Summit County Council approved an update to the Summit County Mental Wellness Strategic Plan. In this, a new suicide prevention plan will be developed during FY24 for implementation in the community through the Summit County Mental Wellness Alliance.

For FY23-26, Summit County was awarded \$125,000 from the Office of Substance Use and Mental Health for the purchase and distribution of gun safes as part of an effort of the Utah Legislature to address the rate of suicides when a firearm is present within the home. Safes are being provided as part of QPR Trainings and with the future help of the Summit County Sheriff’s Office and the Park City Police Department.

#### **Suicide Prevention Programs:**

- o **Question Persuade Refer (QPR):**

Summit County Behavioral Health Division has partnered with community members and non-profit groups to provide ongoing suicide prevention trainings. We continue to offer Question Persuade Reefer (QPR) trainings both in-person and virtually in both English and Spanish.

o **Working Minds:**

Summit County Behavioral Health Division has two staff trained in Working Minds Suicide Prevention.

o **THRIVE:**

THRIVE is a life skills and prevention program that utilizes evidence-based practices from positive and clinical psychology that help youth cultivate mental, emotional, and physical well-being. The program avails participants with the necessary preventative skills to thrive as individuals while preparing them to feel resilient, strong, hopeful, and with a sense of self-awareness that will help them succeed in life. The THRIVE program works with small groups of students in cohorts of 10-15 students. Students learn, practice, and apply evidence-based well-being skills. Program outcomes include:

- Helping youth be proactive in boosting their overall well-being.
- Decrease symptoms of depression, anxiety, and suicidality.
- Increase self-awareness, problem-solving, coping and relationship skills.
- Develop a sense of belonging and connectedness.
- Increase levels of overall joy.

**Priorities:**

- In conjunction with other Katz Amsterdam Communities (a coalition of 17 ski resort communities which conduct the same assessments focused on behavioral health indicators to provide a better comparison to peer communities.), conduct and publish a needs assessment during FY25 to improve our understanding of the data relating to suicide, identify any trends and understand what interventions and suicide prevention programs have been proven effective within the environment unique to ski resort communities.
- Continue to deliver training in the suite of programs which address mental health, wellbeing, and suicide awareness and prevention with community partners such as CONNECT, Local Education Authorities, University of Utah Health Plans, Holy Cross Ministries, the Latino Affairs Committee, etc. Examples include QPR (Question Persuade Reefer in English & Spanish), Mental Health First Aid, SafeUT, U of U Health Suicide training for clinicians, film screenings, and STORM suicide prevention program.
- Promote a broader awareness around the importance of listening and talking both in relation to mental wellbeing and suicide prevention by using social

media to support campaigns such as Mental Health Awareness Month (CONNECT) and Suicide Prevention Week (Local Education Authorities) which attract a local press and social media presence.

- Ensure all programs and materials are available in both English and Spanish. Continue the targeted and culturally based approach in connecting and educating the Spanish speaking community.
- **In conjunction with THRIVE**, expand HOPE Squads from high schools to junior and middle schools.

**Intervention:**

All Huntsman Mental Health Institute clinicians have been trained in U of U Health Suicide recognition and utilize the Stanly Brown Safety Plan as needed. When determined to be needed, a safety plan is developed that supports and guides individuals when they are experiencing thoughts of suicide to avoid a state of intense suicidal crisis. The Stanly Brown Safety Plan is viewed as one of the standards for safety plans. The Summit County Behavioral Health Division is notified in most cases of suicide attempts seen by the Park City Hospital, the Mobile Crisis Outreach Team (Wasatch Behavioral Health), Healthy U. Behavioral Network clinicians, and local non-profits. This information is shared with Healthy U. Behavioral which assigns a network Clinicians, generally Huntsman Mental Health Institute – Park City, for follow-up.

With the addition of a Mobile Crisis Outreach Team, Summit County still prefers to dispatch members of the Summit County Sheriff's Office Probation Department to respond to all suicide related calls to 911. (This is due to the plain clothes and unmarked vehicle used.) All Summit County Sheriff's Department members are trained in Crisis Intervention Teams (CIT), Question Persuade Refer (QPR), and are provided additional behavioral education opportunities yearly. Individuals transported to the Summit County Jail due to reasons on immediate physical harm are placed in a specific suicide watch cell and seen by the Huntsman Mental Health Institute – Park City on-call staff.

**Postvention:**

Follow-ups with adults released from the Park City Hospital are contacted within 24 hours and released to a Network Provider, generally Huntsman Mental Health Institute – Park City. For children and youth, this is conducted by the corresponding school-based clinician. If a safety plan has not been established, Huntsman Mental Health Institute – Park City staff will work with the individual to establish a Stanly Brown Safety Plan. (A safety plan is a document that supports and guides someone when they are experiencing thoughts of suicide to avoid a state of intense suicidal crisis. The Stanly Brown Safety Plan is viewed as one of the standards for safety plans.)

**School Counseling in the event of a Death by Suicide:**

The Summit County School-based program has plans in place to shift clinical

resources, including calling in Summit County Network clinicians, towards a school in the event of an emergency, including a death by suicide. This protocol has been used once in the past five years.

Community based postvention follows the programs as outlined in the “After A Suicide...” response plan established by the Scottish Association for Mental Health, which is included within the Area Plan folder.

**Identify at least one staff member with suicide prevention responsibilities trained in the following OSUMH Suicide Prevention programs. If a staff member has not yet been identified, describe the plan to ensure a staff member is trained in the following:**

- 1. Suicide Prevention 101 Training**
- 2. Safe & Effective Messaging for Suicide Prevention**
- 3. Suicide Prevention Gatekeeper training, such as Question-Persuade-Refer (QPR), Mental Health First Aid (MHFA), Talk Saves Lives or Applied Suicide Intervention Skills Training (ASIST)**

Chantal Guadarrama, Behavioral Health Division

**Describe all current strategies in place in suicide postvention including any grief supports. Describe your plan to coordinate with Local Health Departments and local school districts to develop a plan that identifies roles and responsibilities for a community postvention plan aligned with the Utah Suicide Coalition for Suicide Prevention Community Postvention Toolkit. Identify existing partners and intended partners for postvention planning. If available, please attach a localized suicide postvention plan for the agency and/or broader local community or link to plan.**

For postvention responses deemed at a high level, Summit County has a postvention response plan in place. The plan is modeled off of and consulted on, by the National Health Service – Scotland and incorporates public, private, and non-profit roles. Additionally, the Summit County Behavioral Health Division maintains an emergency response corps. to respond to community emergencies, similar to the Emergency Medical Corps. run through the Emergency Service Coordinator.

For lower-level postvention, Huntsman Mental Health Institute – Park City oversees efforts to ensure other contracted clinicians have plans in place. Huntsman Mental Health Institute – Park City provides screening assessment to all patients with the Columbia-Suicide Severity Rating Scale (C-SSRS). Treatment is provided based on screening and assessment with all patients completing a Stanley Brown safety plan. In addition, clinicians are trained in CALM (Counseling on Legal Means), allowing clinicians to ask further crucial screening questions to identify risks and increase safety in reducing access to means of harm. Patients are hospitalized when a higher level of care is indicated, and Huntsman Mental Health Institute – Park City will track patients while inpatient and follow through with treatment upon release. Resources from the community are provided to support safety. All Huntsman Mental Health

Institute– Park City patients are provided crisis resources noted in each progress note when they are seen at the clinic.

Effectiveness is measured by reduced hospitalizations and treatment outcomes, continued assessment, and screening to evaluate progress, and reduced reports of suicidal ideation. Efforts are made to increase support and access to treatment for each high-acuity patients through case management services and monitoring, medication management, and clinical staff who provide individualized treatment plans per patient.

**For Local Authorities participating in the Garrett Lee Smith State Youth Suicide Prevention and Early Intervention Grant Program or the Project AWARE grant, summarize your implementation plans for implementing skill based programming, gatekeeper training, community or school based screening activities, and crisis follow-up services after inpatient or emergency department visits. (note: this can be done in the box below, or by linking/attaching your most current report).**

**For those not participating in either of these grant programs, please indicate “N/A” in the box below.**

NA

**For Local Authorities participating in the Comprehensive Suicide Prevention grants describe your implementation plans for primary prevention programs, suicide intervention supports including gatekeeper training, and community postvention planning. (note: this can be done in the box below, or by linking/attaching your most current report).**

**If any of the following project deliverables are currently available, please link them here or attach them to your submission.**

1. **By year 2, funding recipients shall submit a written comprehensive suicide prevention plan that is in alignment with the Utah Suicide Prevention State Plan and by year 2, funding recipients shall submit a written postvention response plan and communication protocol for their organization.**
2. **By year 3 funding recipients shall submit a written community postvention response plan.**

**For those not participating in this project, please indicate, “N/A” below.**

NA

## **20) Justice Treatment Services (Justice Involved)**

*Thom Dunford*

**What is the continuum of services you offer for justice-involved clients and how do you address reducing criminal risk factors?**

Services include Prime For Life (offered online via Huntsman Mental Health Institute – Park City), Supportive Outpatient (SOP), Intensive Outpatient Program (IOP), Drug Court,

Medication Assisted Treatment (MAT), Urine Analysis testing, Peer Support, individual therapy, and case management. Criminal risk factors are monitored for reduction through treatment planning, successful completion of recommended programs and negative Urine Analysis results.

**Describe how clients are identified as justice involved clients**

Individuals are traditionally identified through their justice involvement but may also be identified by their attorneys or clinicians who are aware of pending judicial involvement. Additional referrals may be received from the jail for “known flyers” with a behavioral health history of involvement with local law enforcement.

**How do you measure effectiveness and outcomes for justice involved clients?**

Negative Urine Analysis (Drug Test) results are an immediate indicator of the effectiveness of justice involved treatment services. Successful completion of the treatment recommendations is also a way to measure the effectiveness of Justice Treatment Services. Huntsman Mental Health Institute – Park City serves primarily substance use related justice involved clients. Huntsman Mental Health Institute – Park City also serves Domestic Violence (DV) related cases for which effectiveness is measured by the completion of Moral Recognition Therapy (MRT) and associated treatment recommendations.

**Identify training and/or technical assistance needs.**

We would like more clinicians in the Healthy U. Behavioral Network trained in domestic violence treatment and Moral Recognition Therapy (MRT).

**Identify a quality improvement goal to better serve justice-involved clients.**

Summit County is working on increased use of the Level of Service/Risk Need Responsivity (LS RNR), a tool that assesses the client's criminogenic risk.

Currently, the Criminal Justice Coordinating Committee is developing a strategic plan focused on improving services to justice-involved clients. It is anticipated that the plan will be completed by the Fall of 2023.

**Identify the efforts that are being taken to work as a community stakeholder partner with local jails, AP&P offices, Justice Certified agencies, and others that were identified in your original implementation committee plan.**

Huntsman Mental Health Institute – Park City provides individual therapy, assessment, and crisis treatment services in the jail weekly. Huntsman Mental Health Institute – Park City coordinates with probation and AP&P, justice and district court judges, to track compliance with treatment recommendations and Urine Analysis (Drug Test) testing results weekly.

Identify efforts being taken to work as a community stakeholder for children and youth who are justice involved with local DCFS, JJYS, Juvenile Courts, and other agencies.

Due to the low volume of youth engaged with the above agencies, direct contract is made with Huntsman Mental Health Institute – Park City. Through expanded usage of school-based services, early identification and intervention within schools is able to take place.

**21) Specialty Services**

*Pete Caldwell*

If you receive funding for a speciality service outlined in the Division Directives (Operation Rio Grande, SafetyNet, PATH, Behavioral Health Home, Autism Preschools), please list your approach to services, how individuals are identified for the services and how you will measure the effectiveness of the services. Include any planned changes in programming or funding. If not applicable, enter NA.

NA

**22) Disaster Preparedness and Response**

*Nichole Cunha*

Outline your plans for the next three years to:  
 Identify a staff person responsible for disaster preparedness and response coordination. This individual shall coordinate with DHHS staff on disaster preparedness and recovery planning, attending to community disaster preparedness and response coalitions such as Regional Healthcare Coordinating Councils, Local Emergency Preparedness Committees (ESF8), and engage with DHHS in a basic needs assessment of unmet behavioral health disaster needs in their communities.

In addition, please detail plans for community engagement, to include partnership with local councils and preparedness committees as well as plans for the next three years for staff and leadership on disaster preparedness (to include training on both internal disaster planning and external disaster preparedness and response training). Please detail what areas your agency intends to focus on with training efforts and timeline for completing training.

Chris Crowley, Summit County Health Department Emergency Services Manager, currently services in the capacity and has previously coordinated with the Utah Department of Health prior to the merger and continues to do so.

# Summit County Mental Health Authority: FY24 Area Plan

*Form B: Substance Use Disorder Narrative*

*Note: All changes and new additions are highlighted in **BLUE***

# Summit County FORM B - SUBSTANCE USE DISORDER TREATMENT BUDGET NARRATIVE 3 Year Plan (2024-2026)

**Local Authority:** Summit County

**Instructions:**

In the cells below, please provide an answer/description for each question. **PLEASE CHANGE THE COLOR TO BLUE, OF SUBSTANTIVE NEW LANGUAGE INCLUDED IN YOUR PLAN THIS YEAR!**

**1) Early Intervention**

**Holly Watson**

**Describe local authority efforts you propose to undertake over the three year period to provide for individuals convicted of driving under the influence, a screening; an assessment; an educational series; and substance abuse treatment as required in Utah Code § 17-43-201(5)(m).**

Individuals requiring care related to driving under the influence charges must complete the Substance Abuse Subtle Screening Inventories (SASSI) tool and a biopsychosocial substance use/mental health assessment before receiving treatment. Anyone scoring a high probability of having a Substance Use Disorder (SUD) will be referred for a complete Substance Use Assessment, along with those court-ordered to complete a substance use evaluation. Individuals meeting the criteria for treatment after an assessment will be referred to a clinician at the Huntsman Mental Health Institute – Park City.

**Identify evidenced-based strategies designed to intervene with youth and adults who are misusing alcohol and other drugs.**

The Huntsman Mental Health Institute – Park City uses biopsychosocial substance use/mental health assessment, including the Substance Abuse Subtle Screening Inventories (SASSI), University of Rhode Island Change Assessment (URICA), American Society of Addiction Medicine (ASAM), [Substance Use Recovery Evaluator \(SURE\)](#), Outcome Questioner/Youth Outcomes Questionnaire (OQ/YOQ), all of which are evidence-based tools used to determine necessary interventions for youth and adults. For individuals who request services and are assessed as appropriate for early intervention such as Alcohol & Drug Intervention (ADI), they are directed to a limited course of outpatient substance use treatment that focuses on psychoeducation. Evidence-based psychoeducation is primarily provided through the Change Company Interactive Journaling Series for the limited outpatient services.

**Describe work with community partners to implement brief motivational interventions and/or supportive monitoring in healthcare, schools and other settings.**

For additional information related to school prevention programs, see Form C. For information related to identification, please see Form A.

Substance Used Disorder (SUD) intervention takes place at Huntsman Mental Health Institute – Park City through referral of network clinicians to access Medication Assisted Treatment (MAT). Treatment includes motivational interviewing skills to engage individuals in healthcare and behavioral health services. Summit County contracts with Wasatch Behavioral Health to provide Mobile Crisis Outreach Teams (MCOTs) and crisis services in the community, which facilitates treatment, assessment, and referral. Individuals involved in driving under the influence charge or other probation services are referred as needed. Summit County and University of Utah Health Plans interact with all Local Education Authorities (LEAs) in the area and provide services to all students in Summit County. Schools refer students for therapy and early intervention services through school-based services.

**Describe any outreach and engagement efforts designed to reach individuals who are actively using alcohol and other drugs.**

**Courts:**

Clients court-mandated to have a behavioral health assessment are referred within the Healthy U. Behavioral Network for assessment. Treatment recommendations are determined and sent to the court. Treatment for the majority of court ordered treatment are provided at the Huntsman Mental Health Institute – Park City and are tracked through the courts and case management services.

**Education:**

Community education and identification efforts are provided by the Summit County Behavioral Health Prevention Team, Summit County Health Promotions Team, and partner non-profits such as CONNECT Summit County. The largest of these includes the annual training of Sundance Volunteers and local ski resort employees for the winter season.

**Local Education Authorities:**

The school-based program in Summit County is robust, and students who are referred to counseling services are assessed and given a treatment plan. This assessment includes a risk of substance abuse, which will be addressed in the treatment plan. Many students, particularly in higher grades, are referred to school-based services for substance abuse in tandem with behavioral health issues.

**Describe effort to assist individuals with enrollment in public or private health insurance directly or through collaboration with community partners (healthcare navigators or the Department of Workforce Services) to increase the number of people who have public or private health insurance.**

Summit County residents are provided three options to help navigate behavioral healthcare in Summit County.

**Summit County Network:**

The term Summit County Network refers to the overall umbrella of services

coordinated by the Behavioral Health Division, which includes the services contracted to the University of Utah Health Plans, their behavioral health department known as Healthy U. Behavioral (HUB), local non-profits which provide low to no cost care to residents, Intermountain Healthcare (IHC), the Mental Wellness Alliance, Wasatch Behavioral Health (WBH), and private clinicians within Summit County. Where appropriate, private clinicians and non-profits refer to the Healthy U. Behavioral Network for enrollment.

**Healthy U. Behavioral Network:**

The term Healthy U. Behavioral Network refers to the network administered by University of Utah Health Plan’s behavioral health arm known as Healthy U. Behavioral (HUB). Through a network of clinicians, Healthy U. Behavioral is responsible for providing all the mandated services outlined in Utah Administrative Code. Additionally, University of Utah Health Plans holds the Medicaid Contract and is responsible for its administration and service delivery. Network clinicians operating within the Healthy U. Behavioral Network are not limited to taking Medicaid, state, or University of Utah Health Plans funds. Many have additional paneling and are able to be referred within the Network.

**CONNECT:**

A local non-profit, CONNECT Summit County, has established a peer navigator service free to residents of Summit County. Through the use of their service database, individuals and navigators are able to search for specific types of services and see what insurance a clinician takes. If an individual cannot pay for services and is not on Medicaid or state funding, the navigators can coordinate with non-profit clinicians for scholarship opportunities. The database can be found here: <https://summit.ut.networkofcare.org/mh/> A copy of their Resource Guide has been placed within the Summit Folder.

[New in FY24, CONNECT has developed a community scholarship program, funded by donations, to cover the cost of behavioral health services in Summit County.](#)

**Describe activities to reduce overdose.**

- 1. educate staff to identify overdose and to administer Naloxone;**
- 2. maintain Naloxone in facilities,**
- 3. Provide Naloxone kits, education and training about overdose risk factors to individuals with opioid use disorders and when possible to their families, friends, and significant others.**

The Summit County Health Department provides distribution and training for any agency, school, business, or individual wishing to receive free Naloxone kits.

**Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.**

[The success of efforts in reducing overdoses in Summit County is measured by the evaluation of county incident data from law enforcement, administration of Naloxone by law enforcement/ first responders, the annual provider survey, Huntsman Mental Health Institute](#)

– Park City reports, and emergency department reporting from the Park City Hospital. Additional metrics include tracking the number of Naloxone trainings and kits distributed within the community.

**2) Ambulatory Care and Withdrawal Management (Detox) ASAM IV-D, III.7-D, III.2-D, I-D or II-D) Shanel Long**

**Describe the activities you propose to undertake over the three year period to assist individuals prevent/alleviate medical complications related to no longer using, or decreasing the use of, a substance. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.**

University of Utah Health Plans has a contractual agreement with Volunteers of America to provide non-medical detoxification services for Summit County clients. Medical detoxification services are available through the Huntsman Mental Health Institute - Salt Lake City, and direct admission is available through the Huntsman Mental Health Institute – Park City. Huntsman Mental Health Institute's inpatient detoxification program ensures safe withdrawal and the beginning of the recovery process. Clients are detoxified under the care of a psychiatrist, nurses, social workers, and psychologists who provide medication, monitoring, and support during the withdrawal period. Additional treatment includes group therapies and activities throughout the day to address the disease of addiction. To ensure continued success when the patient leaves the hospital, Huntsman Mental Health Institute – Park City creates a discharge plan outlined with the patient and family for appropriate follow-up care coordination into the Healthy U. Behavioral Network.

**If this service is not provided by the Local Authority, where are individuals accessing this level of care when needed? Who in your community provides this service? How is the service paid for?**

When required, Huntsman Mental Health Institute - Salt Lake City provides these services, which is a Healthy U. Behavioral Network provider.

**3) Residential Treatment Services: (ASAM III.7, III.5, III.3, III.1) Shanel Long**

**Describe the activities you propose to undertake over the three year period and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and identify the population served (Men, Women, Youth).**

University of Utah Health Plans uses contracted clinicians, Odyssey House, First Step House, Wasatch Crest, House of Hope and others, for residential services. Consideration is given to funding sources and services available for placement. (February of 2023 saw the opening of Summit County's first sixteen bed residential treatment facilities, with Wasatch Crest expanding services from Wasatch County.) While in residential treatment, case managers and care managers coordinate and arrange aftercare through network clinicians. Services consist of evaluation and treatment planning, individual and group therapy, skills

development, case management, recovery support services, social detoxification, smoking cessation, and, when indicated, medication management and Medication Assisted Treatment (MAT). Clients receive assistance in transitioning to lower levels of care as indicated by the American Society of Addiction Medicine (ASAM) placement tool.

Please refer to the Healthy U. Behavioral Health Network clinician link for a full list of network clinicians available at <https://healthyubehavioral.com/>

#### 4) Treatment for Opioid Use Disorder (OTP-Methadone)

VaRonica Little

**Describe the activities you propose to undertake over the three year period and identify where services will be provided. Identify whether you will provide services directly or through a contracted provider. Please list all contracted providers and summarize the services they will provide for the local authority. If you plan to use SOR funding please identify how you will implement GPRA initial, 6-month and discharge requirements.**

Currently, methadone services are not provided in Summit County. Resources are provided through Project Reality in Salt Lake City. Project Reality serves adults with opioid use disorder diagnoses for recovery and wellness and offers buprenorphine, methadone, and naltrexone combined with physical and mental health services.

As services continue to grow in Summit County, it is planned for the Huntsman Mental Health Institute – Park City will be able to provide these services within the next three years.

Due to the reporting requirements and the low award amount, Summit County is not planning on using any SOR funding at this time.

**Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.**

Currently Methadone treatment is not provided in Summit County. Huntsman Mental Health Institute – Park City does provide Medication Assisted Treatment using Suboxone in the HMHI PC clinic. Methadone treatment is referred to Salt lake City providers.

#### 5) Medications for Opioid Use Disorder-(Vivitrol, Naltrexone, Buprenorphine)

VaRonica Little

**Describe activities you propose to undertake over the three year period to ensure community members have access to MOUD treatment, specific types of treatment and administration, and support services for each? If you plan to use SOR funding please identify how you will implement GPRA initial, 6-month and discharge requirements for these services.**

The Huntsman Mental Health Institute – Park City is the primary prescriber and provides Buprenorphine, Vivitrol and Naltrexone on-site. Services include medication evaluation and management for Medication Assisted Treatment (MAT) with supplemental treatment services and recovery supports to include group therapy, individual therapy, case management, Peer Support Specialist (PSS), and urine-drug screening. Services are determined by assessment

and screening for development of individualized treatment plans. Medication Assisted Treatment (MAT) services are offered by network clinician for inpatient and outpatient care through Odyssey House and First Step House who contract with Project Reality for overdose treatment.

The University of Utah School of Psychiatry and the Huntsman Mental Health Institute created a program to help people struggling with opioid addiction known as BRIDGE. Individuals experiencing opioid dependency or suffering from withdrawal symptoms, they can receive immediate treatment. Clients are given an initial buprenorphine dose as well as a prescription for the initial month of medication. After receiving prescribed the medication, individuals are referred to an outpatient clinic that will continue treatment via a custom-tailored long-term care program. There is no cost to the patient as the program is state funded by a grant that aimed at fighting the opioid epidemic in Utah. The goal is to get the patient's addiction stabilized and their head clear so they can focus on the other struggles in their life.

Due to the reporting requirements and the low award amount, Summit County is not planning on using any SOR funding at this time.

**Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.**

Access to Medication Assisted Treatment services through Huntsman Mental Health Institute – Park City is a measure of success. Clients are administered the Outcome Questionnaire at 30-day intervals, are staffed individually on a case-by-case basis and are tracked through episodes of treatment.

## 6) Outpatient (Non-methadone – ASAM I)

Shanel Long

**Describe the activities you propose to undertake over the three year period and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.**

Standard Outpatient services are provided via the American Society of Addiction Medicine (ASAM) 1.0 through the Huntsman Mental Health Institute – Park City, which is the primary provider of Substance Use Disorder (SUD) treatment in Summit County. Standard Outpatient group therapy is offered weekly from 4pm-5pm at Huntsman Mental Health Institute – Park City, with additional groups provided through CONNECT Summit County. Services include individual therapy, case management, peer support specialists, recovery support services, urine drug screening, and medication management when applicable. Services are determined through assessment and screening with individualized treatment recommendations/plans. Services are provided to men, women, and adolescents who seek treatment and those referred for treatment by the judicial system. American Society of Addiction Medicine (ASAM) placement criteria is utilized to determine the appropriate treatment level for the individual. Other groups available include process groups, psychoeducation, Moral Recognition Therapy (MRT), family interventions, gender-specific treatment, and skills-based groups. University of Utah Health Plans is partnered with the National Jewish Health online programs to offer smoking cessation groups.

A portion of outpatient services is offered through Healthy U. Behavioral clinicians outside of

Summit County when appropriate. These outpatient services are provided to increase treatment access and timeliness, ensuring effective integration into the community from more intensive treatment to less intensive outpatient services.

**Youth Outpatient Services:**

Outpatient youth services are offered with school-based programs and through the Healthy U. Behavioral Network. School-based clinicians work with Healthy U. Behavioral to ensure warm hand-offs when youth transition into new services.

Please refer to the University of Utah Health Plans Network Clinician link for a full list of network clinicians available at <https://healthyubehavioral.com/>

**7) Intensive Outpatient (ASAM II.5 or II.1)**

**Shanel Long**

**Describe the activities you propose to undertake over the three year period and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. Please list all contracted providers.**

Intensive Outpatient services are provided via the American Society of Addiction Medicine (ASAM) 2.1 standards through the Huntsman Mental Health Institute – Park City in Summit County. Intensive Outpatient (IOP) group therapy is offered five days a week from 8-10 am or 5-7 pm, depending on the day. Groups are at 1820 Sidewinder Drive Ste.100, PC, UT 84040. Services are provided to men, women, and adolescents who seek treatment and those referred for treatment by the judicial system. *In FY24, Wasatch Crest will be an additional Intensive Outpatient (IOP) provider in Summit County. Services are currently being negotiated and developed for implementation over the next three years.*

American Society of Addiction Medicine (ASAM) placement criteria are utilized to determine appropriate treatment levels. Other groups available include process groups, psychoeducation, Moral Recognition Therapy (MRT), family interventions, gender-specific treatment, and skills-based groups. Healthy U. Behavioral is partnered with the National Jewish Health online programs to offer smoking cessation groups, Services are determined through assessment and screening with individualized treatment recommendations/plans.

Recovery WORKS is an intensive outpatient program designed to offer structure and support for adults dealing with substance use disorder issues. Clients work in a group therapy setting four nights a week for eight weeks. To ensure success after the completion of treatment, continued lifetime aftercare support is available for participants. The treatment team includes a board-certified addiction psychiatrist, licensed clinical social workers, licensed substance abuse counselors, and expressive clinicians. Elements of the program include:

- Comprehensive Substance Use Disorder Treatment addressing individual, family, relationship, and environmental challenges.
- 
- Utilization of Cognitive Behavioral Therapy (CBT), Motivational Enhancement (formerly MI), Acceptance and Commitment Therapy (ACT), and other empirical techniques within the most up-to-date recovery treatment framework.

- Collaboration with our addiction psychiatry and addiction medicine doctors and senior residents/fellows and clinicians in our Recovery Clinic who incorporate the latest in recovery medications and recovery aides.
- Therapeutic and educational support for program participants, friends, and family members.
- Cognitive Behavior Therapy (CBT), and
- Experiential therapy, which includes art and music therapy and ropes challenge course activities, are integrated into the program weekly.

The Recovery Clinic is for adults seeking treatment for substance use disorders and dual diagnosis treatment. Staffing includes board-certified psychiatrists, Licensed Clinical Social Workers, and Mental Health Counselors specializing in individual addiction treatment. As a teaching academy, the University Recovery Clinic is also staffed with senior residents and addiction-trained fellows.

Services include:

- Medication Addiction Treatment Group (MAT Group),
- Medication Assisted Treatment (MAT) is used in conjunction with counseling and behavioral therapies, for a whole-patient approach to the treatment of substance use disorders,
- Education and practical skills for achieving recovery,
- Process group to discuss recent struggles and/or upcoming challenges,
- Consultation and evaluation,
- Group and individual therapy,
- Medication management,
- Suboxone Maintenance Therapy (SMT),
- Outpatient detoxification, if medically appropriate.

American Society of Addiction Medicine (ASAM) 2.5 level of care, which requires partial hospitalization, is serviced through the Healthy U. Behavioral Network in Salt Lake City and day treatment clinicians (Odyssey House, Steps Recovery).

**Youth Outpatient Services:**

Outpatient youth services are offered through school-based programs and contracted Healthy U. Behavioral Network clinicians. Huntsman Mental Health Institute – Park City school-based clinicians work with the Healthy U. Behavioral Network to ensure warm hand-offs when youth transition into higher levels of care. American Society of Addiction Medicine (ASAM) level of care 2.5, Day treatment is provided for adolescents through Odyssey House and TeenScope (a treatment program for teens ages 12–18 that helps teens and their parents) programs in

SLC.

Please refer to the Healthy U Behavioral Health Network Clinician link for a full list of network clinicians available at <https://healthybehavioral.com/>

## 8) Recovery Support Services

Thom Dunford

**Describe the activities you propose to undertake over the three year period and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider. For a list of RSS services, please refer to the following link: <https://sumh.utah.gov/services/recovery-supports/recovery-resources>**

Recovery support services target current clients, non-treatment-seeking individuals, and post-treatment clients through assistance in creating and implementing recovery lifestyle plans/aftercare. Recovery support services are available to clients along with community referrals; University of Utah Health Plans doesn't require that an individual be in treatment to access recovery support services.

Examples of services offered to Clients include;

- Fit To Recover (four pillars: Nutrition, Community Service, Creative Arts, and Fitness through group cooking classes, artistic endeavors, service outreach, and sports & exercise),
- 
- Peer Support Specialists (PSS) through Huntsman Mental Health Institute – Park City,
- Alcoholics Anonymous,
- Narcotics Anonymous,
- Trauma-informed yoga instruction through Tall Mountain Wellness PC,
- Case Management (Many clients face challenges with housing, employment, access to healthcare along with a variety of other needs. Where possible, University of Utah Health Plans provides emergency/temporary housing assistance and funding for medical services and medications) through Huntsman Mental Health Institute – Park City,
- Psychoeducation and life skills groups offered by Huntsman Mental Health Institute – Park City (both men and women-specific groups-Prime for Life, Building Resilience and Seeking Safety) as well as other contracted clinicians in the network. Clients can be linked with educational opportunities and have the opportunity to obtain their GED or Adult High School Diploma.

Our Drug Court program emphasizes leadership roles in the higher phases of the program. Individuals are mentors to others in the program. Further programming is being developed to

enhance alumni support through regular check-ins with a Peer Support Specialist (PSS), up to 90 days post-active treatment. Additionally, community resources are invaluable. Clinicians initiated collaboration with Utah Recovery Support Services (USARA) to enhance peer mentoring in the county. Peer Support Specialists (PSS) and case managers currently contact clients who have completed treatment post-discharge to offer peer support services if needed. Case management offers transition-out support services used to assess unmet basic needs to overcome barriers that interfere with long-term recovery like funding, housing, and job placement services.

**Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve.**

Currently, the recovery support offered in Summit County exists primarily outside of the Office of Substance Use and Mental Health framework because of the difficulty in reporting out the required data. Over the next three years, the way to evaluate Summit County's effectiveness in this area will be if we are able to pull down the available funding from the office because that will indicate that the data reporting has become more complete and effective. This will allow the Summit County Recovery Foundation to extend its scope of services provided because much of what they are currently doing can be funded through office funding.

**9) Peer Support Services-Substance Use Disorder**

**Thom Dunford**

**Describe the activities you propose to undertake over the three year period to undertake and identify where services are provided. For each service, identify whether you will provide services directly or through a contracted provider.**

Clients have access through the Healthy U. Behavioral Network to Peer Support Specialists (PSS) provided by the Huntsman Mental Health Institute – Park City and behavioral health non-profits. Additionally, the Huntsman Mental Health Institute – Park City provides peer support service groups and individual sessions within the Summit County Jail. Peer Support Specialist also run groups for all Substance Use Disorder (SUD) programming, including Drug Court. Case managers are trained in Community Reinforcement and Family Training (CRAFT) and extend group offerings throughout the year as well as connect with the Utah Recovery Support Services (USARA) to include offerings through their agency. Please see the above section on “Recovery Support Services” for full details of the peer support offered.

**Describe how clients are identified for Peer Support Specialist services. How is the effectiveness of the services measured?**

Clients are identified for peer support services after initial biopsychosocial screening and assessment as part of the development of their treatment plan at the Huntsman Mental Health Institute – Park City clinic.

Clients may also be referred to a Peer Support Specialist (PSS) through University of Utah Health Plans if a client is not being seen through the HMHIPC clinic. In the past, clients could also be referred to peer support services through school-based services.

## 10) Quality & Access Improvements

Shanel Long

**Describe how you will increase access to treatment services. Is there a waiting list for certain levels of care? What interim or contingency services are available to individuals who may be on a wait list?**

The change from a staff model, with limited clinicians available, to a network model has greatly expanded access to Summit County residents. Huntsman Mental Health Institute – Park City is the backbone network clinician and remains a resource for both Medicaid members and the primary provider of services funded by the Office of Substance Use and Mental Health funding. The network has expanded both geographically and with specialty options for residents.

Quality efforts have focused on expanding access and allowing residents a greater choice in how they receive care. University of Utah Health Plans works with an External Quality Review Organization (EQRO), Health Services Advisory Group (HSAG), to conduct on-site and desk reviews to ensure the integrity of the Performance Measure Validation (PMV), alignment of policies and procedures with the state contract and federal regulations, and the Performance Improvement Project (PIP).

University of Utah Health Plans utilizes State and County funding, making services affordable to Summit County residents. University of Utah Health Plans offers interpreter services through the Healthy U. Behavioral Network, primarily through Huntsman Mental Health Institute – Park City, for Spanish-speaking Clients and other language needs. With the addition of Latino Behavioral Health, Spanish language services have increased with both clinical sessions and Peer Support Services. Currently, there are 18 Spanish Speaking clinicians in Summit County. University of Utah Health Plans contracts with the Summit County jail and Huntsman Mental Health Institute – Park City is the contracted treatment clinician. This partnership allows for increased services in the jail, including medication evaluation and management, crisis support, assessment and group psychoeducation, and Moral Recognition Therapy (MRT). Additionally, follow-up care is coordinated with Huntsman Mental Health Institute – Park City. Doctors, clinicians, case managers, and peer specialist work to make transitions seamless for individuals.

University of Utah Health Plans care managers provide care management nurses to help with healthcare and community service needs. Care management is conscious of the cultural and linguistic preferences of members and their support. The care management program offers individual attention to meet healthcare goals. Services include education, advocacy, and coordination of needed services. This program is no-cost for University of Utah Health Plans members and unfunded residents who want nursing services.

We do not have a waiting list for services as the Healthy U. Behavioral Network for mental health services, however, due to the reduction in clinicians willing to see individuals with a substance use diagnosis, Huntsman Mental Health Institute – Park City has developed a three-week waiting list for substance use disorder services.

**Please describe policies for improving cultural responsiveness across agency staff and in services, including “Eliminating Health Disparity Strategic Plan” goals with progress. Include efforts to document cultural background and linguistic preferences, incorporate cultural practice into treatment plans and service delivery, and the provision of services in preferred language (bilingual therapist or interpreter).**

Serving as the guiding document for behavioral health services in Summit County, including the Healthy U. Behavioral Network, non-profits, Local Education Authorities, and private clinicians, the Summit County Mental Wellness Strategic Plan established Goal V as ensuring “*equity of mental health & substance use programs and services for Latino and underserved community members.*” As means to achieve this Goal, the following objectives have been assigned to this goal:

1. Address barriers facing Latino community members in accessing and receiving linguistically competent mental health & substance use programs and services.
2. Enhance online means and resources to connect Latinos and other underserved residents with services and programs within the community.
3. Working with key stakeholders, address barriers to licensure within the state of Utah for non-native English speakers.
4. Establish a high school to licensure program for native Spanish-speaking residents in Summit County to cover the costs of education (including bachelors) and licensure, along with providing internships and job placement within Summit County.
5. Increase opportunities for Latino youth to engage in programs focused on mental, physical, and emotional health
6. Provide Latino Families who may be or have a member in their household identifying as LGBTQ+ have access to information or supportive resources specific to the Latino LGBTQ+ communities.
7. Establish a Healthy Minds program through Latino Behavioral Health in Summit County.
8. Establish a Spanish-language Telehealth service network with clinicians outside of Utah to expand service access to increase the number of sessions in Spanish from clinicians in other states with reciprocity.
9. Ensure the Latino community’s voice is represented on all committees and programs outlined within this Strategic Plan.

**Service Capacity: Systemic approaches to increase access in programs for clients, workforce recruitment and retention, Medicaid and Non-Medicaid funded individuals, client flow through programming. Please describe how the end of the Public Health Emergency and subsequent unwinding is expected to impact the agency's services and funding.**

The future impacts of the Medicaid unwinding remain unknown. Currently, both the Summit County Network and the Healthy U. Network have the capacity to absorb additional unfunded clients through the Huntsman Mental Health Institute – Park City. We anticipate that the majority of clients removed from Medicaid will have found employment and possibly have insurance. Healthy U. Behavioral will work with individuals if they appear to have been improperly dropped from the Medicaid rolls. Should the number of people removed from Medicaid-funded behavioral healthcare into either the Summit County Network or the Healthy U. Network exceed capacity or funding, a policy for triage will need to be established and implemented.

**Describe efforts to respond to community feedback or needs. Describe your participation with key community partners (e.g.: Multi-Agency Coordinating Committees, Regional Advisory Councils, High Fidelity Wraparound teams, Local Interagency Councils, Local Recovery Community, Local Homeless Coordinating Committees, Peer Advocacy Groups, County Attorney, Law Enforcement, Local Education Agencies, Courts, Regional Healthcare Coalitions, and other partnership groups relevant in individual communities) shall occur consistently.**

University of Utah Health Plans works closely with community agencies including the Summit County Behavioral Health Division, CONNECT Summit County, Vail Resorts Wellness Management, Summit County Recovery Foundation, Peace House, Summit County Mental Wellness Alliance, Jewish Family Services, Holy Cross Ministries, Children's Justice Center, Summit County Courts, probation and local law enforcement, North Summit School District, South Summit School District, and the Summit County School District. These relationships provide important means to both promote and evaluate services. In addition, the University of Utah Health Plans website refers potential clients to the network clinicians and has additional information about services available. University of Utah Health Plans outreach workers and those employees working in the community offer education to outside agencies. Recovery Support Specialists (RSS) network with other recovery supports to broaden the array of opportunities for clients.

Healthy U. Behavioral meets monthly with the Summit County Behavioral Health Advisory Committee, which serves as the Local Authority advisory group to the Summit County Council on issues related to behavioral health. Membership includes local elected leadership, Intermountain Healthcare, the Latinx community, non-profits, network clinicians, the Park City Mayor, members of the Summit County Council, Summit County Sheriff's Office, Summit County Attorney's Office, and the Summit County Health Department. This Committee reviews metrics established within the contract to identify areas to be improved upon and provide support. Healthy U. Behavioral also serves on several Summit County Mental Wellness Alliance committees such as:

- Latinx Behavioral Affairs Committee

- Behavioral Health Fundraising Committee
- Behavioral Health Access and Capacity Committee
- Community Behavioral Health Assessment Committee
- Superintendents Committee for Behavioral Health (School Districts)
- Aging and Advocacy Coalition
- First Responder Committee (Expanded JRI Committee)
- Hope Elevated (Suicide Prevention Committee)

Participation in these committees provides direct feedback from community partners related to behavioral health.

Twice a year, the Division of Behavioral Health, along with CONNECT, conducts a Network Clinician meeting to ensure terms of the contract are being met and that clinicians are receiving the support and resources needed to provide the highest level of care for residents. Issues brought up are discussed with solutions being developed and improvement plans implemented with Healthy U. Behavioral. Clients are also able to give feedback through the Mental Health Statistical Improvement survey.

**What evidence-based practices do you provide (you may attach a list if needed)? Describe the process you use to ensure fidelity?**

University of Utah Health Plans offers and supports professional training to ensure competency and fidelity. Clinicians in the network have certifications in evidence-based programs (EBP). The following is a list of some of the evidence-based programs provided in the network:

- Motivational Interviewing,
- Cognitive Behavioral Therapy (CBT) for Substance Abuse and Co-Occurring Disorders (Hazelden Curriculum),
- Moral Recognition Therapy (MRT) and Domestic Violence Moral Recognition Therapy (MRT),
- Dialectical behavioral Therapy (DBT),
- Post-traumatic Stress Disorder (PTSD) Treatments: Seeking Safety & Beyond Trauma & Building Resilience,
- Matrix Model for Intensive Outpatient Treatment (IOP),
- Substance Abuse and Criminal Behavior,
- The Change Companies Curriculum,

- Thinking Errors,
- Anger Management,
- Behavioral Therapy,
- Family Therapy/Multi-Family Group Therapy/CRAFT,
- Criminal Risk Assessments and Treatment (RANT),
- Eye Movement Desensitization and Reprocessing (EMDR),
- Trauma Recovery Empowered Model (TERM),
- Men's Trauma Recovery Empowered Model (M-TERM).

Staff meetings occur weekly between University of Utah Health Plans and the Huntsman Mental Health Institute – Park City Clinic to incorporate opportunities to discuss cases, in addition to one-on-one clinical supervision. Case consultation meetings are held monthly through Huntsman Mental Health Institute – Park City. Clinical staff participates in consultation groups that meet to review case progress with senior clinicians through Huntsman Mental Health Institute – Salt Lake City, providing opportunities for learning and growth, burnout reduction, and increased clinical support. Huntsman Mental Health Institute – Park City staff training and staff meetings enhance coordination of care within the network and greater utilization of community resources.

**Describe your plan and priorities to improve the quality of care.**

The Summit County Mental Health Strategic Plan serves as the overall guide for improving not only the quality of care for residents of Summit County, but also access and breadth of services provided by the Healthy U. Behavioral Network, non-profits, Local Education Authorities, and private clinicians. A copy of the Strategic Plan has been included in the Area Plan folder.

**Describe your agency plan in utilizing telehealth services. How will you measure the quality of services provided by telehealth?**

University of Utah Health Plans providers utilize a hybrid model for care. Clients are offered telehealth and in person services and clinical staff will see clients in their preferred method. Huntsman has specific policies for telehealth platforms, confidentiality, and oversight for quality that providers adhere to. Policies have been added to Area Plan folder.

**What outcome measures does your agency use to address substance use services? How often does your agency review data and outcome measures? How do you identify if services are effective, efficient and improving lives? I.e., How much did we do? (Quality), How well did we do? (Quality) and Is anyone better off? (Impact).**

Network Clinicians use the following metrics to evaluate outcomes and quality;

- Outcome Questioner/Youth Outcomes Questionnaire (OQ/YOQ) measures at intake

and at 30-day intervals,

- Medication Assisted Treatment (MAT),
- Abstinence (via Urine Analysis),
- Patient Retention,
- Improved housing and employment,
- Rapid Accessing treatment after treatment completion or relapse,
- Outpatient / Intensive Outpatient: Client outcomes at the time of completion of services in a discharge summary,
- Goal / Objective attainment,
- Patient progress and continuing care plan,
- PSS follow-up measures and check-in reports,
- Discharge Referrals to Recovery Support activities, identified and reviewed,
- Annual questionnaires and surveys,
- The Daily Living Activities-20 (DLA-20) is used as an outcome measure. Given at admission, every 90 days, and at discharge,
- Youth Substance Use Disorder Services: Treatment completion/client retention,
- Abstinence/decreased rates of substance use,
- Engagement in school and other prosocial supports and activities,
- Legal involvement/Recidivism.

Additionally, the youth/adolescent program, through Huntsman Mental Health Institute – Park City, is working with the University of Utah’s Social Research Institute to identify how to increase support in Summit County. Case managers use the Daily Living Activities-20 (DLA-20) to identify client needs, assess areas where improved functioning is needed, and identify areas of strength that can be used to build recovery capital and develop a recovery plan. Progress is evaluated through ratings on objectives, as well as overall change scores.

## 11) Services to Persons Incarcerated in a County Jail or Correctional Facility

Thomas Dunford

Describe the activities **you propose to undertake over the three year period** and identify where services will be provided. For each service, identify whether you will provide services directly or through a contracted provider, and how you will coordinate with the jail to ensure service delivery is adequate.

University of Utah Health Plans, through Huntsman Mental Health Institute – Park City, provide behavioral health treatment directly in the Summit County Jail. With Justice Reinvestment Initiative (JRI) and other funding, Huntsman Mental Health Institute – Park City provides crisis services, case management, peer support services, medication evaluation, individual and group services weekly. There are seven gender-specific groups offered per week including Moral Recognition Therapy (MRT), trauma-informed yoga, and life skills. The clinical manager of Huntsman Mental Health Institute – Park City along with a team of clinicians is assembled to focus on the needs of the jail and meets on a monthly basis. These meetings address service delivery and workflow and complete any necessary patient staffing. A Huntsman Mental Health Institute – Park City clinical program manager is available by mobile phone to the jail staff and is contacted when needed. Huntsman Mental Health Institute – Park City provides three hours of Psychiatry, six hours of clinical care, and four hours of case management per week at minimum for this population.

**Describe any significant programmatic changes from the previous year.**

Medication Assisted Treatment is now provided in the Summit County Jail.

**Describe current and planned activities to assist individuals who may be experiencing withdrawal (including distribution of Naloxone) while incarcerated or any efforts to use Medication-assisted treatment within a county jail or Prison. Identify all FDA approved medications currently provided within the jail(s).**

Huntsman Mental Health Institute – Park City offers Moral Recognition Therapy (MRT), Anger Management, life skills, wellness classes, and crisis therapy to individuals who are incarcerated. Attendees include individuals who are experiencing withdrawal and can be supported through these forms of intervention. Huntsman Mental Health Institute – Park City prescriber, Dr. Jason Hunziker, Medical Director, University of Utah Health Plans provides consult with the jail staff when necessary. Medication Assisted Treatment (MAT) services through the Huntsman Mental Health Institute – Park City are available upon release and the team coordinates care for clients after their release to ensure ongoing treatment and follow-up care.

Beginning in FY23, the Summit County Council has authorized the funding of Subutex upon entry into the Summit County Jail and Vivitrol upon release to be funded by the County's Opioid Settlement Funds

**The SAPT block grant regulations limit SAPT expenditures for the purpose of providing treatment services in penal or correctional institutions of the State. Please identify whether your County plans to expand SAPT block grant dollars in penal or correctional institutions of the State.**

No

## 12) Integrated Care

Shanel Long

**Describe your partnerships with local Health Departments, accountable care organizations (ACOs), federally qualified health centers (FQHCs) and other physical health providers. Please include a list of community agencies you partner with to provide integrated services.**

University of Utah Health Plans is an Accountable Care Organization (ACO) providing both behavioral health and physical health Medicaid clients with an integrated Medicaid plan. University of Utah Health Plans also has a good relationship with the other three Accountable Care Organizations (ACO) providing physical health Medicaid. We are working on the integrated pilot program along the Wasatch Front, and taking those lessons learned to improve in Summit County.

University of Utah Health Plans and the Summit County Division of Behavioral Health, which is a part of the Summit County Health Department, have a strong working relationship. Through weekly meetings with the Director of Behavioral Health and participation in the Summit County Mental Wellness Alliance committees, Healthy U. Behavioral is a well regarded partner for the Summit County community.

**Describe your efforts to integrate care and ensure that children, youth and adults have both their physical and behavioral health needs met, including screening and treatment and recovery support. Identify what you see are the primary barriers to implementing integrated care at your agency and your efforts to overcome those barriers. Please also describe how you will provide education and referrals to individuals regarding physical health concerns (i.e., HIV, TB, Hep-C, Diabetes, Pregnancy).**

University of Utah Health Plans oversees both Mental Health and Substance Use Disorder treatments within the Healthy U. Behavioral Network. It also includes Care Managers who work with individuals on coordinating physical and behavioral health services to integrate care and prevent redundancy or holes in care. University of Utah Health Plans has the advantage of being an Accountable Care Organization (ACO), so we have a large nursing care management team that excels in behavioral and physical care management.

**Describe your efforts to incorporate wellness and wellness education into treatment plans for children, youth and adults. Please consider social determinants of health in your response.**

The Huntsman Mental Health Institute – Park City clinic offers engagement in programs like Fit to Recover (recovery-based wellness), trauma-informed yoga through PC Yoga Collective and Tall Mountain Wellness, care management services through the University of Utah Health network, and case management and Psycho-Social Support services used to consistently assess client needs over the course of their engagement in treatment.

**Describe your plan to reduce tobacco and nicotine use in SFY 2024, and how you will maintain a *nicotine free environment* at direct service agencies and subcontracting agencies. For ongoing engagement, it is recommended to use an evidence-based nicotine dependence tool such as the Fagerstrom scale. SUD Target= reduce nicotine**

**use to 4.8 in 2021 in TEDs.**

University of Utah Health Plans Clinicians do not allow the use of tobacco products within 25 feet of the facilities, and individuals who wish to stop using tobacco products are referred to the National Jewish Health Quitline for one-on-one coaching, support services, and nicotine replacement therapy. We coordinate prevention work with the Summit County Health Department.

**Quality Improvement: What education does your staff receive regarding health and wellness for client care including children, youth and adults?**

University of Utah Health Plans provides both behavioral and physical healthcare as the Accountable Care Organization (ACO) arm of the University of Utah. As an arm of the University of Utah, opportunities for continued education are offered by the College of Psychiatry and other colleges and departments from Healthy U. in the University of Utah system.

**Describe how you measure or determine success of these programs or services? Please identify and define measures and benchmarks you are working to achieve**

Integration of care is central to the goals of University of Utah Health Plans and is a core tenant of our treatment philosophy. Huntsman Mental Health Institute – Park City works closely with our care management team when a client is identified as having a comorbid condition that would benefit from physical healthcare in addition to behavioral healthcare. Members who have chosen Healthy U. as their physical healthcare Medicaid plan have an integrated plan with a care management team using the “whole client” philosophy. Unfunded clients are still referred to low-cost and free services when available and encouraged to sign up for Medicaid if they meet the requirements. The effectiveness of the team-oriented approach is measured on a case-by-case basis based on individual client needs and our ability to help them achieve their health goals.

**13) Women's Treatment Services**

**Rebecca King**

**Describe the evidence-based services provided for women including gender-specific substance use disorder treatment and other therapeutic interventions that address issues of trauma, relationships, sexual and physical abuse, vocational skills, networking, and parenting.**

Services for women are provided on-site at the Huntsman Mental Health Institute – Park City and Peace House. Services include individual treatment, group therapy, and case management. Upon admissions, women are screened for other factors, including pregnancy, and provided immediate access to behavioral health services while being connected with appropriate community resources. University of Utah Health Plans is contracted with the House of Hope for residential services specific to this population. A gender-specific Seeking Safety Trauma and a Dialectical Behavior Therapy (DBT) group has been established for women and is run one evening per week. Case management services are provided which

assist with housing needs, access to physical healthcare, and guidance in obtaining appropriate benefits.

**Describe the therapeutic interventions for children of clients in treatment that addresses their developmental needs, their potential for substance use disorders, and their issues of sexual and physical abuse and neglect. Describe collaborative efforts with DCFS for women with children at risk of, or in state custody.**

As part of the assessment process, children are evaluated and provided treatment as needed. Services can be provided on-site with specific Healthy U. Behavioral Network Clinicians and/or clinicians who see children/youth and adolescents in school-based settings. These clinicians work closely with the Utah Division of Child and Family Services (DCFS), the Juvenile Court, and community partners like Peace House and the Children's Justice Center, to support at-risk youth and their mothers. Like Huntsman Mental Health Institute – Park City, clinicians in the network collaborate with the Children's Justice Center (CJC) to support youth and families. Clinicians participate in a System of Care model which identifies and provides services to dysfunctional family systems and seeks to meet treatment needs by connecting and coordinating family involvement with several community and network supports with the goal of rehabilitation.

Network clinicians who focus on youth and women prioritize care for families. Families involved with the Utah Division of Child and Family Services (DCFS) may have children in state custody or are at risk of losing custody. For women in residential treatment and other extenuating circumstances, contracted clinicians work with DCFS caseworkers to support and facilitate visitation schedules. The Huntsman Mental Health Institute – Park City clinical team stays connected to the Utah Division of Child and Family Services (DCFS) to develop relationships and communication about families in services and works closely with treatment courts to facilitate case information and services for women and children in this process.

**Describe the case management, child care and transportation services available for women to ensure they have access to the services you provide.**

University of Utah Health Plans provides these services through the contracted network clinician model. Case management services are provided to children and parents in homes, schools, and Huntsman Mental Health Institute – Park City. A Family Resource Facilitator (FRF) is also available to work with families in the network. The Family Resource Facilitator (FRF) coordinates care by attending staff meetings at Huntsman Mental Health Institute – Park City weekly. [Individuals in need of transportation are able to coordinate with High Valley Transit, which provides free pick-up and drop-off to address in Summit and Wasatch Counties.](#) Additionally, the case manager and Family Resource Facilitator (FRF) are able to travel to clients' homes to provide services.

Clients in treatment have access to recovery support services through case management and peer support. Coordination of childcare is provided through community resources and natural supports by connecting clients to community and vocational resources, often working with the Peace House for domestic violence situations. To assist clients with transportation issues, Recovery support services assess for need and offer training in public transportation use, utilizing natural and community supports, and occasionally providing transportation to

treatment appointments.
<b>Describe any significant programmatic changes from the previous year.</b>
NA

**Residential Women & Children’s Treatment (WTX) (Salt Lake, Weber, Utah Co & Southwest Only)**

**Rebecca King**

<b>Identify the need for continued WTX funding in light of Medicaid expansion and Targeted Adult Medicaid.</b>
NA
<b>Please describe the proposed use of the WTX funds</b>
NA
<b>Describe the strategy to ensure that services provided meet a statewide need, including access from other substance abuse authorities</b>
NA
<b>Submit a comprehensive budget that identifies all projected revenue and expense for this program by email to: <a href="mailto:bkelsey@utah.gov">bkelsey@utah.gov</a></b>
NA
<b>Please demonstrate out of county utilization of the Women and Children’s Residential Programs in your local area. Please provide the total number of women and children that you served from other catchment areas and which county they came from during the last fiscal year.</b>
NA

#### 14) Adolescent (Youth) Treatment

Shanin Rapp

**Describe services provided for adolescents and families. Please identify the ASAM levels of care available for youth.**

University of Utah Health Plans has contracted clinicians in the network to provide outpatient-level services to youth with diagnosed substance use disorders. In Summit County, Huntsman Mental Health Institute – Park City offers standard youth outpatient services on-site. Teen Substance Use Disorder (SUD) groups are scheduled to begin the fall of 2023 at Huntsman Mental Health Institute – Park City, which will provide Teen Moral Recognition Therapy (MRT) and other Substance Use Disorder (SUD) groups. Teen group therapy is available through contracted clinicians and school-based services. Youth placement for treatment is determined by the American Society of Addiction Medicine (ASAM) levels of care and assessment through contracted network clinicians. For court-mandated youth Substance Use Disorder (SUD) assessment and urine drug testing, Huntsman Mental Health Institute – Park City supports assessments and provides or refers treatment within the Healthy U. Behavioral Network. The Substance Abuse Subtle Screening Inventory (SASSI), University of Rhode Island Change Assessment (URICA), Youth Outcomes Questionnaire (for parent and child), and Adverse Childhood Experience (ACE) assessments are used to measure treatment needs. Clinicians evaluate for co-occurring mental health disorders. Treatment is provided based on individual and developmentally appropriate needs. Families are encouraged to participate in treatment. All clinicians are Master level and receive treatment training for mental health and substance use disorders. In addition, clinicians have opportunities throughout the year for additional training. Staff complete required Continuing Education Units (CEUs) for their licensure. Huntsman Mental Health Institute – Park City clinicians have been trained in Seeking Safety, an evidence-based treatment for substance use, and Post-traumatic Stress Disorder (PTSD). Staff have also been involved in ongoing training on trauma-informed care. Clinicians have weekly individual supervision and staffing. Co-occurring assessments and treatment are standard.

Huntsman Mental Health Institute – Park City clinicians are trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and trauma-informed care. Clients may participate in mental health therapy groups and can be referred for medication management. Recovery support services, through case managers, have been implemented in youth substance abuse, with a significant focus on outreach to both engage clients in treatment and retain them once they are in. Clinicians are trained in motivational interviewing to engage clients and motivational incentives are used to retain clients. When needed, direct outreach is used to contact clients who have disengaged, and may include the sending of the Mobile Crisis Outreach Team to perform a welfare check. Adolescent clients are involved in developing their treatment plans. Youth are referred for day treatment and residential programs to contracted clinicians like Odyssey House, Huntsman Mental Health Institute TeenScope and various other programs. Program evaluation is done quarterly using Treatment Episode Data Sets (TEDS) collected at admission vs discharge. Point-in-time evaluations are completed annually via the MHSIP.

**Describe efforts to engage, educate, screen, recruit, and refer youth. Identify gaps in the youth treatment referral system within your community and how you plan to address the gaps.**

Network clinician search, University Redstone Health Center, youth mental health clinicians, juvenile probation and court, school-based programs, and parents/other family members provide primary referrals for youth Substance Use Disorder (SUD) treatment needs in Summit County. Youth are referred for assessment to clinicians in the Healthy U. Behavioral Network and recommendations are made for treatment. Clinicians work with community partners such as CONNECT to provide navigation resources to meet the needs of youth in the county. The Huntsman Mental Health Institute – Park City works with the Children’s Justice Center (CJC) and juvenile probation officers, school-based clinicians, and non-profits to identify youth at risk with substances but do not have any related legal charges. When youth are identified, contracted clinicians work together to initiate services and encourage treatment. Case managers and Peer Support Specialists (PSSs) provide outreach to families to discuss concerns and offer an evaluation.

**Describe collaborative efforts with mental health services and other state child serving agencies (DCFS, DJJS, SOC, DSPD, Juvenile Court) and any significant programmatic changes from the previous year.**

As part of the assessment process, children are evaluated for treatment. Services can be provided on-site with specific Healthy U. Behavioral Network clinicians who see children/youth and adolescents in school-based settings. These clinicians work closely with the Utah Division of Child and Family Services (DCFS), the Juvenile Court, and community partners like Peace House to support at-risk children and their mothers. Clinicians in the Healthy U. Behavioral Network collaborate with the Children’s Justice Center (CJC), to support youth and families. Clinicians participate in the System of Care model, which identifies and provides services to dysfunctional family systems and seeks to meet needs by connecting and coordinating family involvement with several community and network supports with the goal of rehabilitation.

Healthy U. Behavioral Network clinicians who focus on youth and women prioritize care for families. Families involved with the Utah Division of Child and Family Services (DCFS) may have children in state custody or are at risk of losing custody. For women in residential treatment and other extenuating circumstances, contracted clinicians work with Utah Division of Child and Family Services (DCFS) caseworkers to support and facilitate visitation schedules. At the Huntsman Mental Health Institute – Park City, clinical management stays connected to the Utah Division of Child and Family Services (DCFS) to develop relationships and communication about families in services and, in addition, works closely with treatment courts to facilitate case information and services for women and children in this process.

Significant coordination occurs between program staff and the juvenile court, including weekly staffing meetings (with the appropriate releases of information in place). If clients are involved with the Utah Division of Child and Family Services (DCFS), frequent coordination also occurs between the appropriate parties, which may include the biological family, the foster family, the caseworker, and the guardian ad litem.

## 15) Drug Court

Shanel Long

**Describe the Drug Court eligibility criteria for each type of specialty court (Adult, Family, Juvenile Drug Courts, etc). Please provide an estimate of how many individuals will be served in each certified drug court in your area.**

Summit County provides the 3rd District Adult Felony Drug Court that serves about 20-30 people at any given time. Participants are screened for eligibility by court order, using the Risk and Needs Triage (RANT) Assessment. Once the Risk and Needs Triage (RANT) Assessment determines the risk level and qualification for Drug Court, a clinical assessment follows to determine and diagnose a substance use disorder. High Need/High Risk individuals with a substance use diagnosis qualify for Drug Court as long as they are also aligned with the following eligibility requirements. Violent offenders are screened out.

### Adult Drug Court Eligibility Criteria:

1. Participants must reside in Summit County and must be a legal resident of the United States (unless exempted by Transfer Policy #10). Additionally, with the approval of the Behavioral Health Division, participants who participate in the Summit County Drug Court but have to relocate to Wasatch County due to the cost of housing are allowed to remain within the program.
2. Participants must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-V) diagnosis of current drug dependence as determined by a clinical assessment.
3. Participants must demonstrate high risk/high needs as determined by a standardized Risk and Needs Triage (RANT) Assessment completed prior to admission into the program.
4. Participants must have a felony charge and must plead to a felony or must be on felony probation. The County Attorney's Office will make the determination of whether the defendant receives a "plea in abeyance" or "condition of probation" offer.
5. Participants will be assessed for treatment needs by the Summit County Contracted treatment provided through Huntsman Mental Health Institute – Park City, using a standardized assessment/test.
6. Participants cannot be currently on parole.
7. Participants must be willing and able to terminate use of lawfully prescribed controlled substances, prescriptions, and over-the-counter medications that affect the integrity and accuracy of drug screening.
8. The County Attorney, after reviewing the findings of the Huntsman Mental Health Institute – Park City treatment team, has final approval for inclusion or acceptance in the Drug Court program.

Effective FY24, so long as an individual is classified as high-risk, high-need, individuals with a Class A misdemeanor will be allowed into the Summit County Drug Court program.

**Describe Specialty Court treatment services. Identify the services you will provide directly or through a contracted provider for each type of court (Adult, Family, Juvenile Specialty Courts, DUI). Describe your efforts to have Certified Peer Support Specialists working with Drug Courts? How will you engage and assist individuals with Medicaid enrollment throughout their episode of care.**

Summit County offers the 3rd District Adult Felony Drug Court. Services are designated to the Huntsman Mental Health Institute – Park City as the contracted treatment provider for the Drug Court. Services provided include;

- Screening and assessment,
- Individual therapy,
- Group Intensive Outpatient Therapy,
- Recovery Support Services through case management and Peer Support Specialists (PSS)
- Urine drug screening is located at Huntsman Mental Health Institute – Park City through the Averhealth forensic lab. Clients call the test line daily and tests are assigned randomly with a unique PIN ID. Results are provided the next day in most cases.
- Residential treatment programs and detoxification services are arranged through contracted clinicians (Volunteers of America, Huntsman Mental Health Institute, Odyssey House, First Step House, House of Hope, etc..) when indicated. Case managers and Huntsman Mental Health Institute – Park City staff work with University of Utah Health Plans to determine funding support and work with participants for eligibility and enrollment in Medicaid and state funds.

The Summit County Drug Court program has had a Certified Peer Support Specialist as part of the treatment team from its founding and will continue to ensure this key role remains with the program.

**Describe the MAT services available to Specialty Court participants. Please describe policies or procedures regarding use of MAT while in specialty court or for the completion of specialty court. Will services be provided directly or by a contracted provider (list contracted providers).**

Medication Assisted Treatment (MAT) is available to Drug Court participants along with prescriptions and treatment through Huntsman Mental Health Institute – Park City, the contracted Drug Court agency. The Huntsman Mental Health Institute – Park City has a medical staff including a psychiatrist and Advance Practice Registered Nurse (APRN) who prescribe medications directly. Funding is also available to assist in purchasing needed medications. Medications are not distributed at the Huntsman Mental Health Institute – Park City, but medications are monitored and assessed on-site. All Drug Court participants are able to participate in all forms of FDA-approved Medication Assisted Treatments (MAT), except

methadone which is provided through Project Reality if needed. Urine drug screening occurs onsite through the Averhealth forensic lab and results are returned the next day in most cases. The Medication Assisted Treatment (MAT) protocol requires clients to be in treatment with Medication Assisted Treatment (MAT) medications and are given specific information regarding policies when services begin. Once clients complete a specialty court program they are still eligible to participate in Medication Assisted Treatment (MAT) and treatment programs including access to funding.

**Describe your drug testing services for each type of court including testing on weekends and holidays for each court. Identify whether these services will be provided directly or through a contracted provider. (Adult, Family, Juvenile Specialty Courts, etc).**

Urine Drug Screening is done in accordance with Office of Substance Use and Mental Health directives. University of Utah Health Plans uses contracted clinicians at Huntsman Mental Health Institute – Park City’s onsite Averhealth forensic lab for urine drug screening. A random schedule for testing is created weekly through Averhealth and monitored closely by staff.

**List all drug court fees assessed to the client in addition to treatment sliding scale fees for each type of court (Adult, Family, Juvenile Specialty Courts, etc).**

Drug Court Clients pay fees based on ability and payment plan eligibility. Drug Court members use state funds, county funds, or Medicaid for all clinical services, including Urine Analysis tests. When the costs of participating in Drug Court become a barrier, the Summit County Recovery Foundation, a 501c3, provides support to ensure continued engagement in the program through donor funded support.

**16) Justice Services**

**Thomas Dunford**

**Describe screening to identify criminal risk factors.**

	Low	————— Prognostic Risk —————>	High
Criminogenic Need	Low	<p><b>REPORTING CENTRE, ADMINISTRATIVE PROBATION, or DIVERSION</b></p> <p>Monthly or no check-ins; Monthly or no psycho-educational groups.</p>	<p><b>NEIGHBOURHOOD PROBATION</b></p> <p>Home, employment and community supervisory checks; Probation appointments; Drug &amp; alcohol testing, as needed; Treatment &amp; social services, as needed; Sanctions &amp; incentives.</p>
	High	<p><b>TRADITIONAL PROBATION</b></p> <p>Probation appointments; Drug &amp; alcohol testing, as needed; Treatment &amp; social services, as needed; Home or work visits, as needed; Sanctions &amp; incentives.</p>	<p><b>DRUG COURT</b></p> <p>Status hearings in court; Probation appointments; Regular drug &amp; alcohol testing; Intensive treatment; Restorative justice programming; Graduated sanctions &amp; incentives.</p>

The Risk and Needs Triage (RANT) Assessment is an evidence-based tool which yields immediate and easily understandable report that classifies offenders into one of four risk/needs quadrants, each with different implications for selecting suitable correctional decisions by judges, probation and parole officers, attorneys, and other decision-makers. The Risk and Needs Triage (RANT) Assessment is administered by the Huntsman Mental Health Institute – Park City case managers by order of the court. The 19-item instrument is completed in less than fifteen minutes, and reports enable real-time placement. This assessment tool is used most often to identify prospective Summit County Drug Court Participants (high risk /high need). According to the Risk and Needs Triage

(RANT) Assessment, individuals who score high risk/high need are best suited for intensive supervision and clinical services. Those scoring low risk/high need may be best suited for a lower level of criminal justice supervision but more intensive clinical services. A high-risk/low-need score may require more intensive supervision and less intensive clinical services. A low risk/low need score may be best suited to less intensive supervision and less intensive clinical prevention-based intervention. Risk and Needs Triage (RANT) Assessment risk/need domains measured include the age of onset of criminal activity and substance use, deviant peer affiliations, prior failure in drug/alcohol rehabilitation and diversion programs, prior felony or serious misdemeanors, unstable living arrangements, unemployment, physical addiction to drugs/alcohol, and chronic medical and mental health conditions.

**Identify the continuum of services for individuals involved in the justice system. Identify strategies used with low risk offenders. Identify strategies used with high risk offenders to reduce criminogenic risk factors.**

University of Utah Health Plans contracts Huntsman Mental Health Institute – Park City and the Summit County District court to administer the Risk and Needs Triage (RANT) Assessment screening instrument to coordinate other information from law enforcement or jail services. The Substance Abuse Subtle Screening Inventories (SASSI) and University of Rhode Island Change Assessment (URICA) are also utilized for substance use disorders screening prior to intake appointments. Services include case management, skills development, individual, family and group therapy, psychiatric evaluations, and medication management. Treatment modalities include:

- Moral Recognition Therapy (MRT),
- Cognitive Behavioral Therapy (CBT),
- Motivational Interviewing,
- Seeking Safety,
- Medication Assisted Treatment (MAT),

Clients seeking services complete clinical assessment incorporating the assessment requirements from Rule and Treatment Planning pertaining to criminal risk factors such as Moral Recognition Therapy (MRT) and other evidenced-based programs that address criminal risk, substance use and mental illness. Clients are also evaluated using the Columbia Suicide Severity Rating Scale (CSSR-S) and Stanley Brown Safety Plan for suicide risk assessment and safety planning.

Recovery support services, Peer Support Specialists (PSSs), and case managers aim to reduce criminal risk factors and recidivism by supporting clients in meaningful recovery engagement. Recovery support services are provided to help clients remove barriers to their recovery by connecting them with individually engaging recovery activities, vocational support, stable housing search, and accessing possible assistance programs. Recovery support services also focuses on keeping clients engaged in recovery through outreach of clients deemed high-risk and follow-up contact with clients who successfully complete treatment.

**Identify a quality improvement goal to better serve individuals involved in the criminal justice system. Your goal may be based on the recommendations provided by the University of Utah Criminal Justice Center in SFY 2020.**

The new Criminal Justice Coordinating Committee has begun development of a strategic plan focused on providing improvements to individuals involved in the criminal justice system. Areas of focus include housing, pretrial services, services for Spanish-speaking individuals, youth services for justice involved, aftercare, and indigent defense. A strategic plan outlining these objectives and step is currently being developed.

**Identify coalitions, planning groups or councils (or other efforts) at the county level working to improve coordination and outcomes for adults involved in the justice system.**

In addition to the Community Justice Reinvestment Initiative Committee and the Criminal Justice Coordinating Committee, the Summit County Mental Wellness Alliance and Summit County Behavioral Health Division host a community Law Enforcement and Judicial Affairs Coalition comprised of key stakeholders representing the Behavioral Health Division, Public Defenders, County Attorney’s Office, Summit County Sheriff’s Department, Park City Police Department, Summit County Council, Park City Council, Summit County Recovery Foundation, Huntsman Mental Health Institute – Park City, and University of Utah Health Plans.

**Identify efforts as a community stakeholder for children and youth involved with the juvenile justice system, local DCFS, DJJS, Juvenile Courts, and other agencies.**

Huntsman Mental Health Institute – Park City coordinates with the Summit County Children’s Justice Center multidisciplinary team weekly to provide crisis services, assessments, and individual and group therapy. The multidisciplinary team consists of law enforcement, Children’s Justice Center staff, treatment staff from the Huntsman Mental Health Institute – Park City), contracted community clinicians, medical staff, Utah Division of Child and Family Services (DCFS), and The County Attorney's office.

**Describe how you measure or determine success of these programs or services? Provide data and outcomes used to evaluate Justice Services. Please identify and define measures and benchmarks you are working to achieve**

Mental Health Statistical Improvement Program (MHSIP) data, Treatment Episodes Data Sets (TEDs), arrests, successful completion of treatment and Risk and Needs Triage (RANT) Assessment are completed upon admission to determine eligibility for services. Outcome Questionnaire evaluations are used for ongoing assessment of clients.

**17)Suicide Prevention, Intervention & Postvention (ONLY COMPLETE IF NOT COMPLETED ON FORM A)**

<p><b>Describe all current activities in place in suicide prevention, including evaluation of the activities and their effectiveness on a program and community level. Please include a link or attach your localized suicide prevention plan for the agency.</b></p>
<p>See Form A</p>
<p><b>Describe all currently suicide intervention/treatment services and activities including the use of evidence based tools and strategies. Describe your policies and procedures for suicide screening, risk assessment, and safety planning as well as suicide specific treatment and follow up/care transition services. Describe how clients are identified for suicide specific services. How is the effectiveness of the services measured?</b></p>
<p>See Form A</p>
<p><b>Describe all current strategies in place in suicide postvention including any grief supports. Please describe your current postvention response plan, or include a link or attach your localized suicide postvention plan for the agency and/or broader local community.</b></p>
<p>See Form A</p>
<p><b>Describe your plan for coordination with Local Health Departments and local school districts to identify roles and support implementation of a community postvention plan in alignment with the state Community Postvention Toolkit.</b></p>
<p>See Form A</p>
<p><b>For Local Authorities participating in the Garrett Lee Smith State Youth Suicide Prevention and Early Intervention Grant Program summarize your implementation plans for implementing skill based programming, gatekeeper training, community or school based screening activities, and crisis follow up services after inpatient or emergency department visits. (note: this can be done in the box below, or by linking/attaching your most current report).</b></p> <p><b>For those not participating in this grant program, please indicate "N/A" in the box below.</b></p>
<p>See Form A</p>
<p><b>For Local Authorities participating in the Comprehensive Suicide Prevention grants describe your implementation plans for primary prevention programs, suicide intervention supports including gatekeeper training, and community postvention</b></p>

planning. (note: this can be done in the box below, or by linking/attaching your most current report).

If any of the following project deliverables are currently available, please link them here or attach them to your submission.

1. By year 2, funding recipients shall submit a written comprehensive suicide prevention plan that is in alignment with the Utah Suicide Prevention State Plan and by year 2, funding recipients shall submit a written postvention response plan and communication protocol for their organization.
2. By year 3 funding recipients shall submit a written community postvention response plan.

For those not participating in this project, please indicate, "N/A" below.

See Form A

For Local Authorities receiving mini grant funding for the Live On Utah statewide suicide prevention campaign, summarize your implementation and sustainability plans for the implementation of culturally appropriate suicide prevention messaging in your area.

For those not participating in this project, please indicate, "N/A" below.

See Form A

**Summit County Mental Health Authority:  
FY24 Area Plan**

*Form C: Prevention Programs Narrative & Logic Model*

<b>Summit County</b>						
<b>FORM C - SUBSTANCE USE PREVENTION NARRATIVE</b>				<b>3 Year Plan (2024-2026)</b>		
With the intention of helping every community in Utah to establish sustainable <a href="#">Community Centered Evidence Based Prevention</a> efforts, fill in the following table per the instructions below.						
Not every community will be at optimal readiness nor hold highest priority. This chart is designed to help you articulate current prevention activities and successes as well as current barriers and challenges. Please work with your Regional Director if you have questions about how to best report on your communities. For instructions on how to complete this table, please see the <a href="#">Community Coalition Status Tool</a> here.						
List every community in your area defined by one of the following:						
1. serving one of the <a href="#">99 Small Areas</a> within Utah						
2. serving the communities that feed into a common high school						
3. any other definition of community with OSUMH approval.						
*All "zero" or "no priority" communities may be listed in one row						
<b>CCEBP Community</b>	<b>CCEBP Community Coalition Status (<a href="#">see tool here</a>)</b>	<b>Priority High Medium Low</b>	<b>Notes/ Justification of Priority</b>	<b>List of Programs Provided (if applicable)</b>	<b>Evidence Based Operating System (e.g. CTC, CADCA Coalition Academy, PROSPER)</b>	<b>Links to community strategic plan</b>
Park City	E	High	The Summit County Mental Wellness Alliance/Prevention Committee has been meeting for the last year and has worked on some projects together.	Guiding Good Choices Spanish and English, Botvin Prescription drug curriculum, Parents Empowered, presentations in schools, and community events and presentations.	The Alliance is not using an Evidence-Based System.	<a href="https://summitcountyhealth.org/wp-content/uploads/2022/12/Strategic-Plan-2022-Ratified-copy.pdf">https://summitcountyhealth.org/wp-content/uploads/2022/12/Strategic-Plan-2022-Ratified-copy.pdf</a>

South Summit	A5	Medium		Guiding Good Choices Spanish and English, Botvin Prescription drug curriculum, Parents Empowered, presentations in schools, and community events and presentations.		
North Summit	A5	Medium		Guiding Good Choices Spanish and English, Botvin Prescription drug curriculum, Parents Empowered, presentations in schools, and community events and presentations.		

**Area Narrative:** Over the next three years, what will the LSAA do to support/enhance community-driven evidence-based prevention? What are the goals or expected outcomes for the LSAA, and how will they be reached? Area Narrative

The Summit County Prevention team is working to put together a youth coalition to work on prevention topics and bring information to parents and youth in Summit County. Working with the youth will help us understand their needs and interests in prevention. This way, we can reach them with messaging they will understand and be interested in. The goal is to have the youth coalition established by the end of 2023. The Prevention Director is working with the Summit County Mental Wellness Alliance and is running the Prevention Committee. They have been meeting for the last year and have worked on projects like the SHARP Survey Campaign. Our messaging aims to build capacity and reach more community members.

**North Summit:**

Summit County Health Department Prevention Team has been working on building capacity, community readiness, and involving leaders in starting a coalition in their area. We have conducted a Readiness Assessment, and the results show they are in stage 3, a vague awareness of prevention. Key leaders like the mayor have been working with the prevention team to bring services and awareness to their community. We will continue our work in the community to engage more citizens and leaders to help them understand prevention science and see the need for a coalition.

**South Summit:**

Summit County Health Department Prevention Team has been working on building capacity and community readiness and activating leaders in the planning process for a coalition in their area. The team has been contacting key leaders to involve them in their work. We have conducted a Readiness Assessment, and the results show they are in stage 3, which is a vague awareness of prevention. We will continue our work in the community to engage more citizens and community leaders.

<b>Summit County</b>					
<b>FORM C - SUBSTANCE USE PREVENTION NARRATIVE</b>				<b>3 Year Plan (2024-2026)</b>	

With the intention of helping every community in Utah to establish sustainable [Community Centered Evidence Based Prevention](#) efforts, fill in the following table per the instructions below.

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- |  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
| List every community in your area defined by one of the following: |  |  |  |  |  |
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CCEBP Community	CCEBP Community Coalition Status (see tool here)	Priority High Medium Low	Notes/ Justification of Priority	List of Programs Provided (if applicable)	Evidence Based Operating System (e.g. CTC, CADCA Coalition Academy, PROSPER)	Links to community strategic plan
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**- END OF AREA PLAN -**



# FY24 BEHAVIORAL HEALTH AREA PLAN

May 10th, 2023

Summit County Health Department,  
Behavioral Health Division

# BEHAVIORAL HEALTH TEAM



**AARON W. NEWMAN**

Director of Behavioral Health  
Summit County Health Department



**PAMELLA BELLO**

Director of Behavioral Health  
Prevention Programs  
Summit County Health Department



**NELSON CLAYTON**

Behavioral Health Program Manager  
*(Summit County Clinical Director)*  
Healthy U. Behavioral

# SUMMIT COUNTY IS REQUIRED TO PROVIDE THE FOLLOWING SERVICES

## MANDATED MENTAL HEALTH SERVICES

- Adult and Youth Inpatient Care,
- Adult and Youth Residential Care,
- Adult and Youth Outpatient Care,
- Children/Youth Outpatient Care
- 24-Hour Crisis Care, – **CASE CONTRACT**
- Adult and Youth Psychotropic Medication Management
- Adult and Youth Psychoeducation Services & Psychosocial Rehabilitation
- Adult and Youth Case-Management
- Adult Community Support Services (Housing Services) – **CASE CONTRACT**
- Children/Youth Community Supports (Respite Services)
- Adult and Youth Peer Support Services
- Adult and Youth Consultation & Education Services
- Services to Incarcerated Persons
- Adult and Youth Outplacement
- Adult and Youth Unfunded Services
- Youth Mental Health Early Intervention
- Family Resource Facilitation
- School-Based Mental Health Intervention
- Suicide Prevention, Intervention, and Postvention
- Justice Reinvestment Instructive Services



## MANDATED SUD SERVICES

- Screening & Assessment
- Detoxification Services (ASAM IV-D, III.7-D, III.2-D, I-D or II-D) – **CASE CONTRACT**
- Residential Treatment Services (ASAM III.7, III.5, III.3, III.1) – **CASE CONTRACT**
- Opioid Treatment Programs (OTP-Methadone) – **CASE CONTRACT**
- Office-Based Opioid Treatment-Vivitrol, Naltrexone, Buprenorphine
- Outpatient – Non-Methadone, ASAM I
- Intensive Outpatient – ASAM II.5 or II.1
- Recovery Support Services
- Adult and Youth Peer Support Services
- Services to Incarcerated Persons
- Women’s Treatment
- Adolescent Treatment
- Drug Court Program & Justice Reinvestment Initiatives

All Services Provided Through the  
Healthy U. Behavioral Network and  
Community Partners

**EDUCATION PARTNERS**



**"BACKBONE" PROVIDER**



**SPANISH CRISIS SERVICES**



**HUB NETWORK**

92 Clinicians in Summit & Wasatch County, with an additional 2,700 Statewide available to residents of Summit County



Round Valley Clinic  
Park City Hospital



Jewish Family Service



**NON-PROFIT PROVIDERS**

**PRIVATE PRACTICE CLINICIANS**



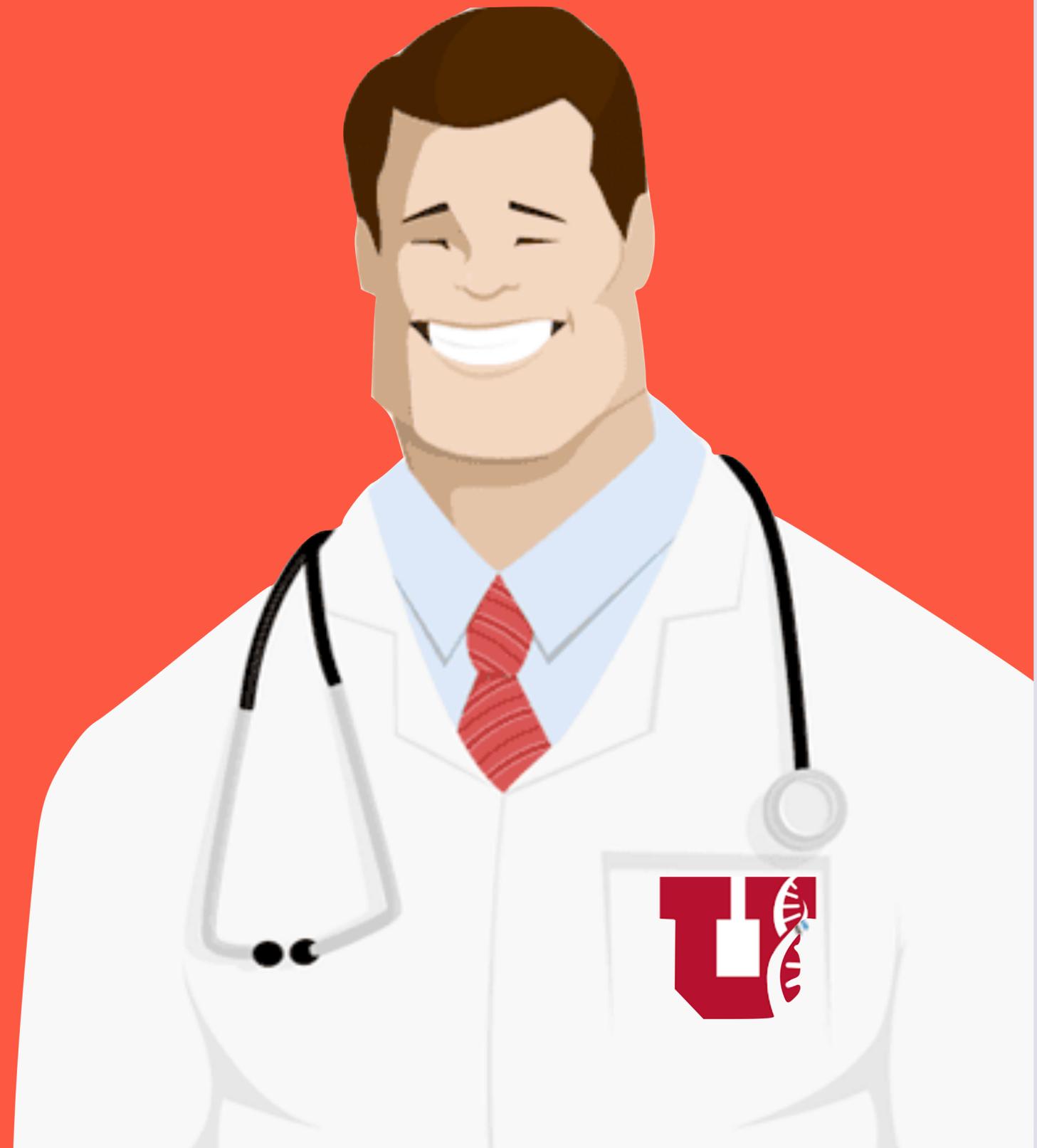
**LAW ENFORCEMENT & UTAH COURTS**

**MANDATED SERVICES ARE PROVIDED BY THE SUMMIT COUNTY BEHAVIORAL HEALTH NETWORK**

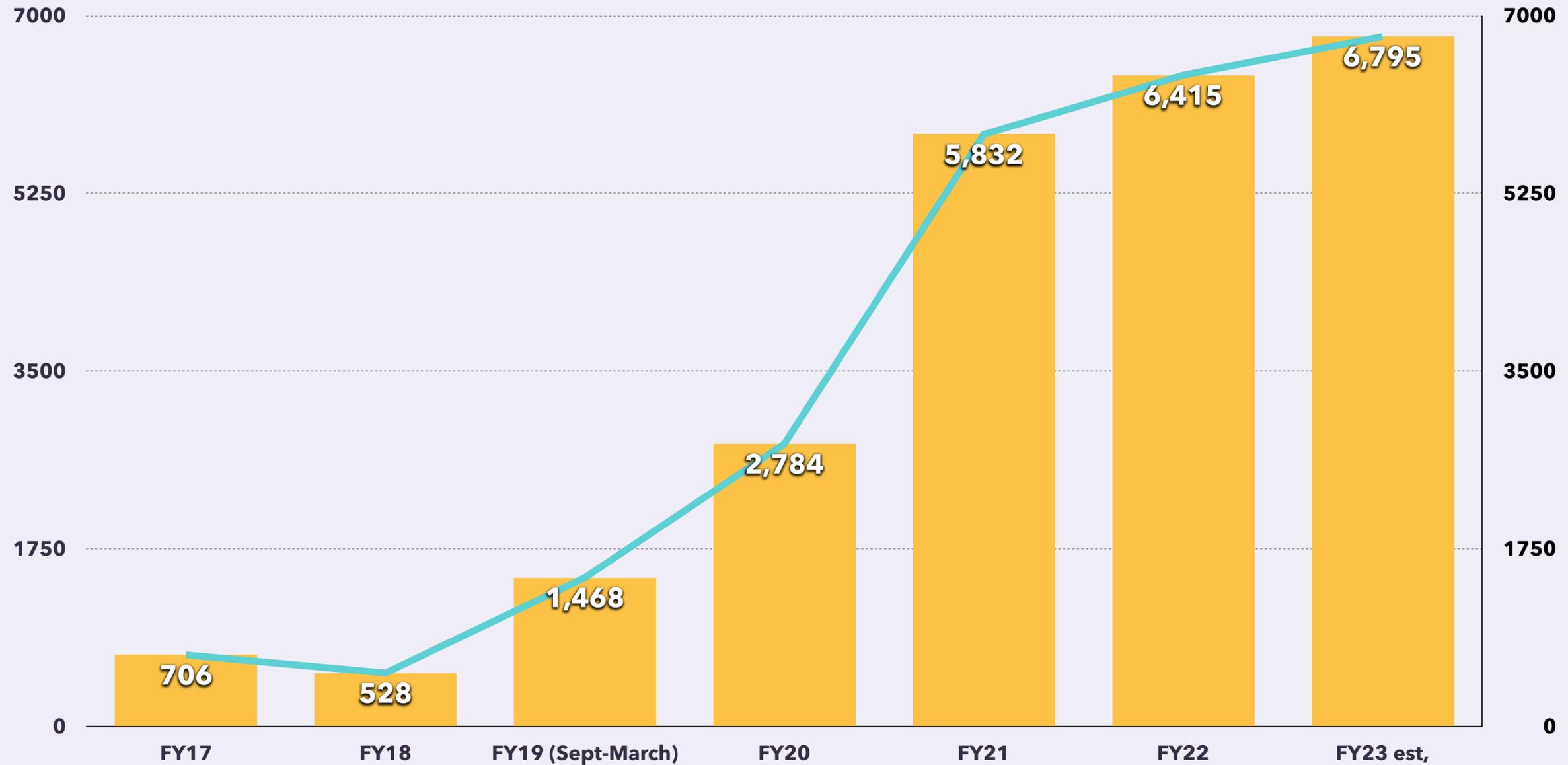
# ROLE OF HUB

## (HEALTH U. BEHAVIORAL)

- ✓ Serve as the Local Contracted Provider under the direction of the Local Mental Health & Substance Abuse Authority outlined in Utah Administrative Code.
- ✓ Administer a network of providers to meet and exceed the minimal services mandated by the State of Utah and OSUMH.
- ✓ Serve as the Behavioral Health Prepaid Mental Health Plan (PMHP) Medicaid Provider for residents of Summit County.
- ✓ Integrate Behavioral And Physical Healthcare.  
*(Case & Care Managers)*



# INCREASED SERVICES PROVIDED *MEDICAID & STATE FUNDED*



# FY24 FUNDING

<b>FY24 REVENUES</b> <i>(CURRENT ESTIMATES, 5/3/23)</i>	<b>FY23</b>	<b>FY23</b>	<b>DIFFERENCE</b>
<b>FEDERAL MEDICAID FUNDS</b>	\$4,000,000	\$3,600,000	\$400,000
<b>STATE CONTRACTS</b>	\$4,060,954	\$3,825,729	\$235,225
<b>SUMMIT COUNTY MEDICAID MATCH</b> <i>(FEDERAL)</i>	\$375,788	\$293,493	\$82,295
<b>SUMMIT COUNTY STATE MATCH</b> <i>(OSUMH)</i>	\$143,206	\$182,400	-\$39,194
<b>SUMMIT COUNTY FUNDING</b>	\$160,000	\$140,000	\$20,000
<b>MCOT ALLOCATION</b>	\$500,000	\$500,000	-
<b>ESTIMATED TOTAL:</b>	<b>\$9,239,948</b>	<b>\$8,541,622</b>	<b>\$698,326</b>

# TRENDS IN FY23

- Non-Profit providers continue to maintain an increase of approximately 40% following post-COVID operations
- Increase in the number of clinicians specializing in LGBTQ+ services
- The number of clinicians taking commercial insurance down 42%
- Average self-pay increased to \$175 from \$125 in 2021
- 17% of clinicians in Summit County retired or left the field between 2022-2023
- Reduction of clinicians willing to see Substance Use clients
- Based on the annual Provider Survey, Severe Mental Illness (SMI) clients left due to the reported cost of living
- Continued high levels of Telehealth services utilized
- MCOT callouts average 26 per month\*

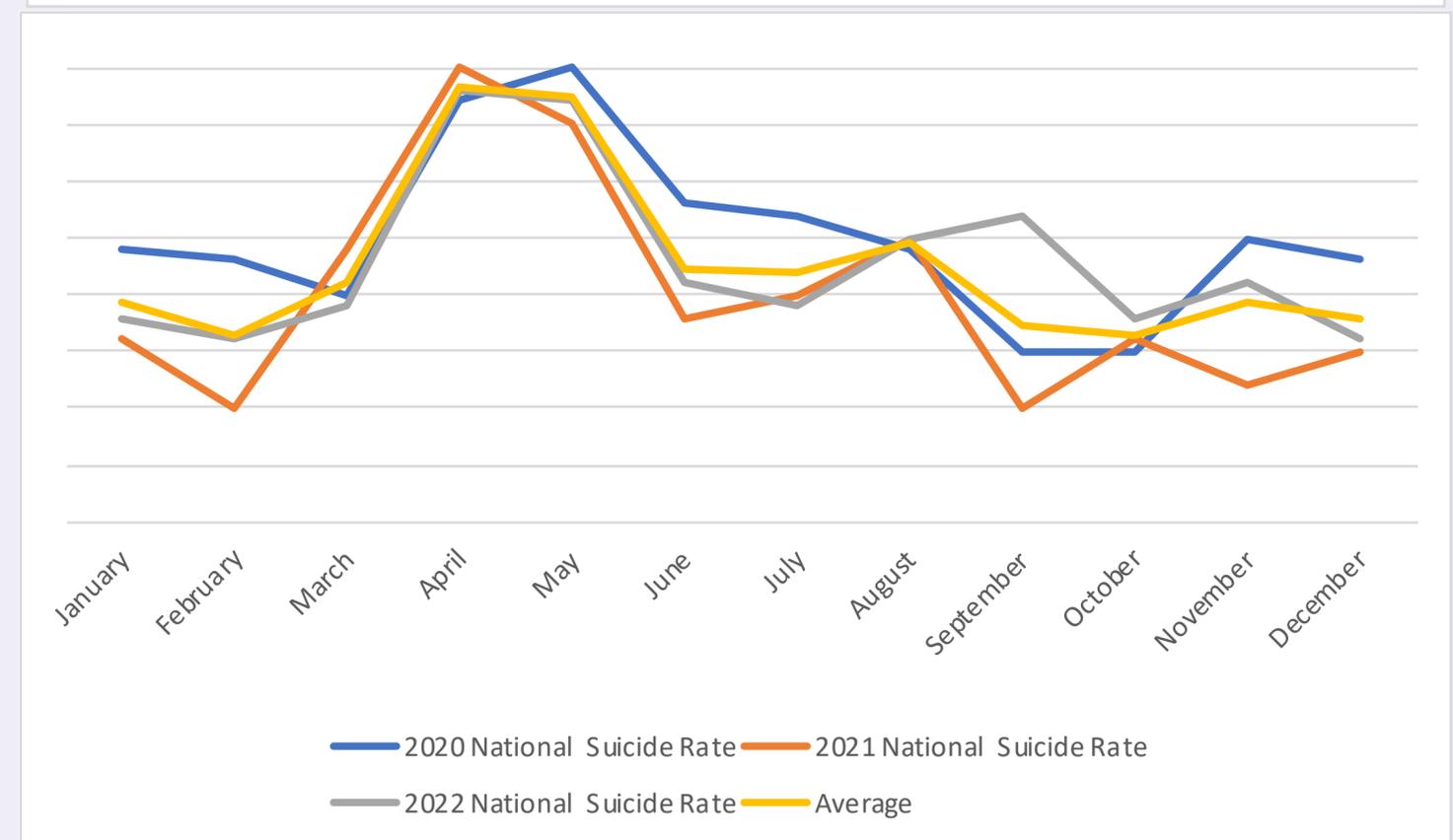
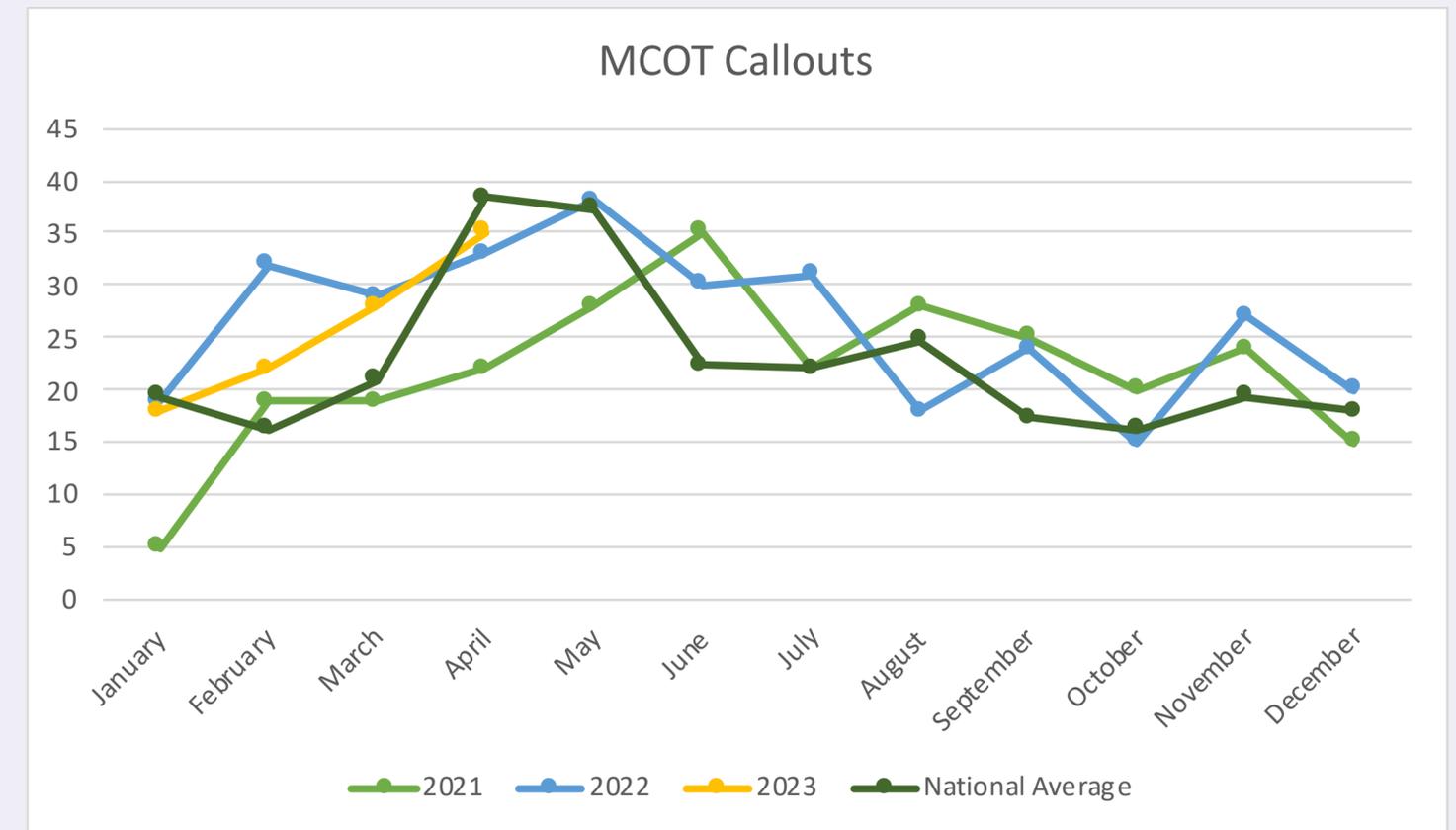
# TRENDS IN FY23

## TOP THREE DIAGNOSES FOR ADULTS

1. Generalized Anxiety Disorder
2. Depression (*General and Seasonal Affective Disorder*)
3. Relationship Counseling (*Family and Coworkers*)

## TOP THREE DIAGNOSES FOR YOUTH

1. Attention Deficit Hyperactivity Disorder (*ADHD*)
2. Depression (*Major Depressive Disorder*)
3. Suicidal Ideation



# BEHAVIORAL HEALTH PREVENTION

## INDIVIDUALS IMPACTED

Individuals Engaged with Prevention Programs: ~45,000

Number of Training Conducted: 22

Number of Events Hosted/Partnered: 35

## PROGRAMS

- Parents Empowered Messaging Installations in North and South Summit Schools
- Presentations at High School Basketball Games
- Family Movie Nights in Spanish and English
- Readiness Assessment in North and South Summit
- Student Roundtables
- SHARP Survey Campaign
- Partnered with Law Enforcement and County Attorney's Office to bring in Speakers

## Game Time Quiz

Answer the quiz using attached Parents Empowered flyer. Submit quiz to boxes located in the hall before the 4th quarter for a chance to win one of the following items.



 WHAT ARE THE THREE SKILLS TO PREVENT UNDERAGE DRINKING?

 WHAT PERCENTAGE OF KIDS THAT START DRINKING BEFORE THE AGE OF 15 WILL BECOME ALCOHOL DEPENDENT?

 AT WHAT AGE SHOULD YOU START TALKING TO YOUR KIDS ABOUT UNDERAGE DRINKING?

 PARENTAL INVOLVEMENT DROPS SIGNIFICANTLY BETWEEN THE 6TH AND 12TH GRADE TRUE OR FALSE?

 WHAT IS THE MINIMUM AMOUNT OF TIME YOU SHOULD SPEND WITH YOUR CHILD ONE ON ONE EVERYDAY?

 FULL NAME  EMAIL

TAKE THE QUIZ AND DROP IT IN ONE OF THE THREE RAFFLE BOXES IN THE HALL FOR A CHANCE TO WIN THE PRIZE OF YOUR CHOICE.



THANK YOU!  
SUMMIT COUNTY  
PREVENTION TEAM





## WELL-BEING

The THRIVE program, launched by Live Like Sam and Well-being Elevated, is a preventative mental health initiative that empowers and strengthens youth well-being. Our dynamic organizations have partnered to help address the growing nationwide mental health crisis.



**The mental health crisis is particularly acute among Utah youth.** The most recent Student Health and Risk Prevention Survey found that **70% of Summit County youth**, grades 6-12, have **moderate to high symptoms of depression**, and **47% have moderate to high mental health treatment needs** (2021).

We can no longer wait to take action until a person is in a time of crisis. Prevention is imperative. We need to proactively cultivate youth mental health and well-being skills as part of their education. THRIVE is a solution.

THRIVE delivers evidence-based skills from positive and clinical psychology that promote resilience, thriving, and well-being. The THRIVE program is developed and delivered by Well-being Elevated.

### THE THRIVE PROGRAM TEACHES YOUTH TO:



IDENTIFY STRENGTHS AND VALUES AND SET CONGRUENT GOALS TO BUILD A FLOURISHING LIFE



CULTIVATE POSITIVE THOUGHTS, EMOTIONS, BEHAVIORS AND HABITS



LEARN EVIDENCE-BASED STRESS-REDUCTION TECHNIQUES



NURTURE HEALTHY RELATIONSHIPS AND HABITS

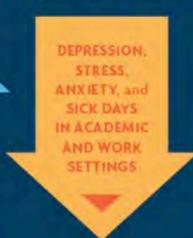
THRIVE delivers its program to youth via an app and in Zoom support groups. Students learn about skills on our app, then meet weekly with peers to connect and complete specific exercises. In our sessions, participants discuss techniques that promote well-being, learn relevant coping strategies, and share their challenges and successes. A select team of trained facilitators leads these groups, overseen by licensed clinicians.

*Well-being Elevated's curriculum has been tested using randomized controlled trials with college-age students, which show significant results, including:*

INCREASES      DECREASES



HAPPINESS, GRATITUDE, USES OF CHARACTER STRENGTHS, PHYSICAL ACTIVITY, MEMORY, and ATTENTION



DEPRESSION, STRESS, ANXIETY, and SICK DAYS IN ACADEMIC AND WORK SETTINGS

# WE NEED YOUR SUPPORT TO EMPOWER OUR YOUTH TO THRIVE



LIVE LIKE SAM.ORG



WELL-BEING ELEVATED

Live Like Sam is a Utah-based foundation that honors the extraordinary life and legacy of Sam Jackenthal. Sam was a US Junior National Freestyle Ski Champion at the age of 15 in 2015, for men under 18. Our passion is to inspire youth to develop self-awareness, courage, leadership, kindness and joy, as Sam did, in his exemplary sixteen years of life. We help cultivate these attributes through life-skills training and by recognizing young people—of all backgrounds—who live by these principles.

Well-being Elevated is a social enterprise that delivers preventive mental health interventions to youth, via an app and in psychoeducational support groups. These interventions are simple exercises drawn from positive and clinical psychology that promote resilience, thriving, and wellness. Our content was developed and tested by world-renowned psychologists and an interdisciplinary team of students, clinicians, scientists, and entrepreneurs.

WE ARE COMMITTED TO STRENGTHENING YOUTH WITH OUR PROGRAMS AND SCHOLARSHIPS TO FOSTER A DEDICATION OF SERVICE TO OTHERS...LIKE SAM LIVED.

## FREE FOR STUDENTS!

**Our Summit County youth need mental health solutions now more than ever.** The THRIVE program **cost is \$295** but is currently being **fully scholarshiped**, and is **FREE for students, for a limited time**. Additionally, students who complete a minimum of five out of six weekly sessions will receive an \$80 stipend. The Well-being Elevated team is conducting research on the program, with approval from the Institutional Review Board at the University of Utah.



Visit [livelikesam.org/thrive](https://livelikesam.org/thrive) or **scan the code to register a student**, age 15-18. In Summer 2022 we will be serving younger populations, with age-appropriate programming. Program availability is on a first-come basis. **Thank you for your support and remember to always Live Like Sam!**

### LIVE LIKE SAM FOUNDATION

[livelikesam.org/donate](https://livelikesam.org/donate) | [www.livelikesam.org](https://www.livelikesam.org) | 435-901-0078 | [Facebook](#) Live Like Sam | [Instagram](#) @just.jackenthal.it

### WELL-BEING ELEVATED

[www.webewell.co](https://www.webewell.co) | 435-901-7230 | [Instagram](#) @wellbeingelevated

## **TERMS OF THE CONTRACT**

- **Contract Ends on July 1, 2024**
- **This Agreement shall automatically terminate at the end date of the Term unless the Parties agree in writing to an extension of the Term.**
- **Healthy U. Behavioral has indicated its willingness to continue the contract with some amendments to better identify service roles based on funding sources.**



## **UNIVERSITY OF UTAH HEALTH PLANS CONTRACT**

For Mental Health and Substance Abuse Services

Effective September 1, 2019

# **RECOMMENDATION**

**The Behavioral Health Division recommends that the Summit County Council, in its capacity as the Local Substance Abuse and Mental Health Authority, through the statutory mandate of UCA §17-43-201 & 301 et. seq., approve the included Area Plan for FY24, and direct the Behavioral Health Division to submit the Area Plan to the Office of Substance Use and Mental Health for the continuation of funding for mental health, substance abuse, and prevention programs and services in Summit County.**



**To: Summit County Council**

**From: Andy Garland, General Manager**

**Date: April 14, 2023**

**Subject: Petition for Annexation of Parcel PCPRVR-1-AM**

Summit County Council,

The owner of Parcel PCPRVR-1-AM (Park City Private RV Park), located along Rasmussen Road and as illustrated below, wishes to annex into the District. This parcel is zoned Rural Residential; it is expected that the existing 35 RV pad sites will be improved on the parcel. This is only the rear, lower portion of the property by East Canyon Creek. There is an existing well that will continue to serve the existing upper lots, clubhouse and pool area.



**The District recommends the Summit County Council approve annexation of Parcel PCPRVR-1-AM into the Mountain Regional Water Special Service District boundaries.**

December 6, 2021

The Board of County Council  
Summit County, Utah  
60 N. Main Street  
Coalville, UT 84017

**PETITION FOR ANNEXATION TO THE MOUNTAIN REGIONAL WATER SPECIAL SERVICE DISTRICT**

1. Pursuant to the provisions of Utah Code Annotated (“UCA”) Section 17D-1-401, as amended, the undersigned petitioner requests that the Board of County Council (the “Council”), acting as the legislative body for Summit County, annex the property described in Exhibit A (“Property”), which is attached hereto and incorporated by reference, into the boundaries of Mountain Regional Water Special Service District (“District”).

2. By signing this petition, the undersigned petitioner affirms he owns the Property in its entirety. Therefore, the notice, hearing, and protest requirements of Sections 17D-1-205, 17D-1-206, and 17D-1-207 do not apply. UCA § 17D-1-402.

3. The undersigned petitioner desires to receive water service from the District for the Property and is willing to abide by all federal, state, and local laws as well as all lawful adopted rules and regulations of the District as a condition of receiving water service from the District.

The undersigned petitioner, who is sole owner of the Property, has read, understands, and agrees to abide by the foregoing Petition, and the facts set forth are true, accurate, and complete to the best of the undersigned petitioner’s knowledge and belief.

By: Scott A. Roberts

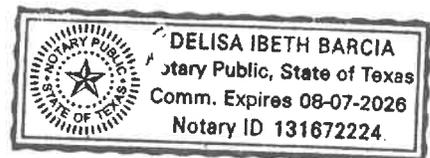
STATE OF )  
Texas ) ss.  
COUNTY OF )  
Travis

The foregoing instrument was acknowledged before me this 18 day of Jan. 2023, by Scott A. Roberts.

Witness my hand and official seal.

My commission expires: 08-07-2026

Delisa Ibarcia  
Notary Public

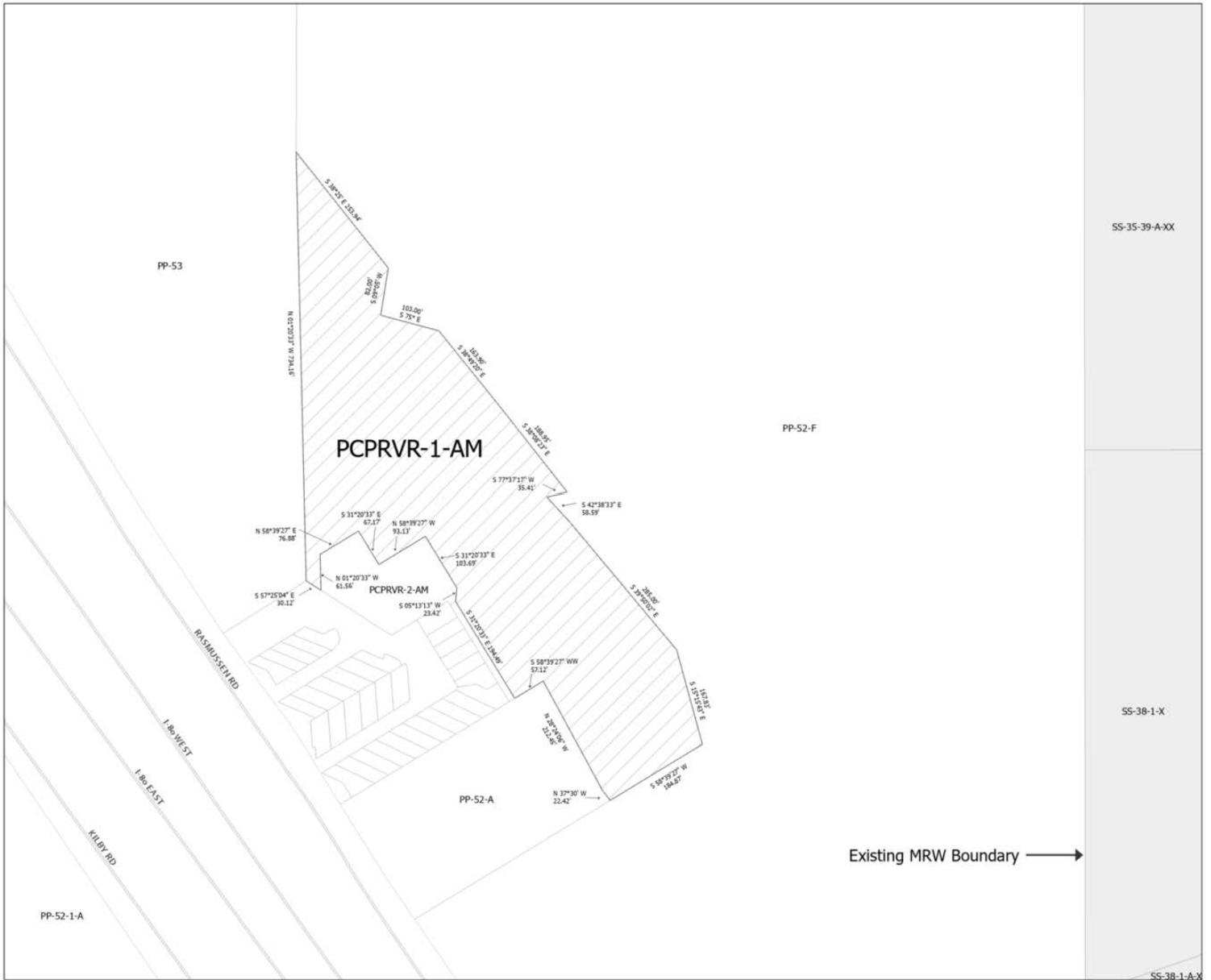


**Exhibit A:**

**All of Lot 1 of the Park City Private RV Resort Amended, on file and of record in the Office of the Summit County Recorder.**



# Exhibit B:





# ANNEXATION TO MOUNTAIN REGIONAL WATER SPECIAL SERVICE DISTRICT

## Parcel PCPRVR-1-AM

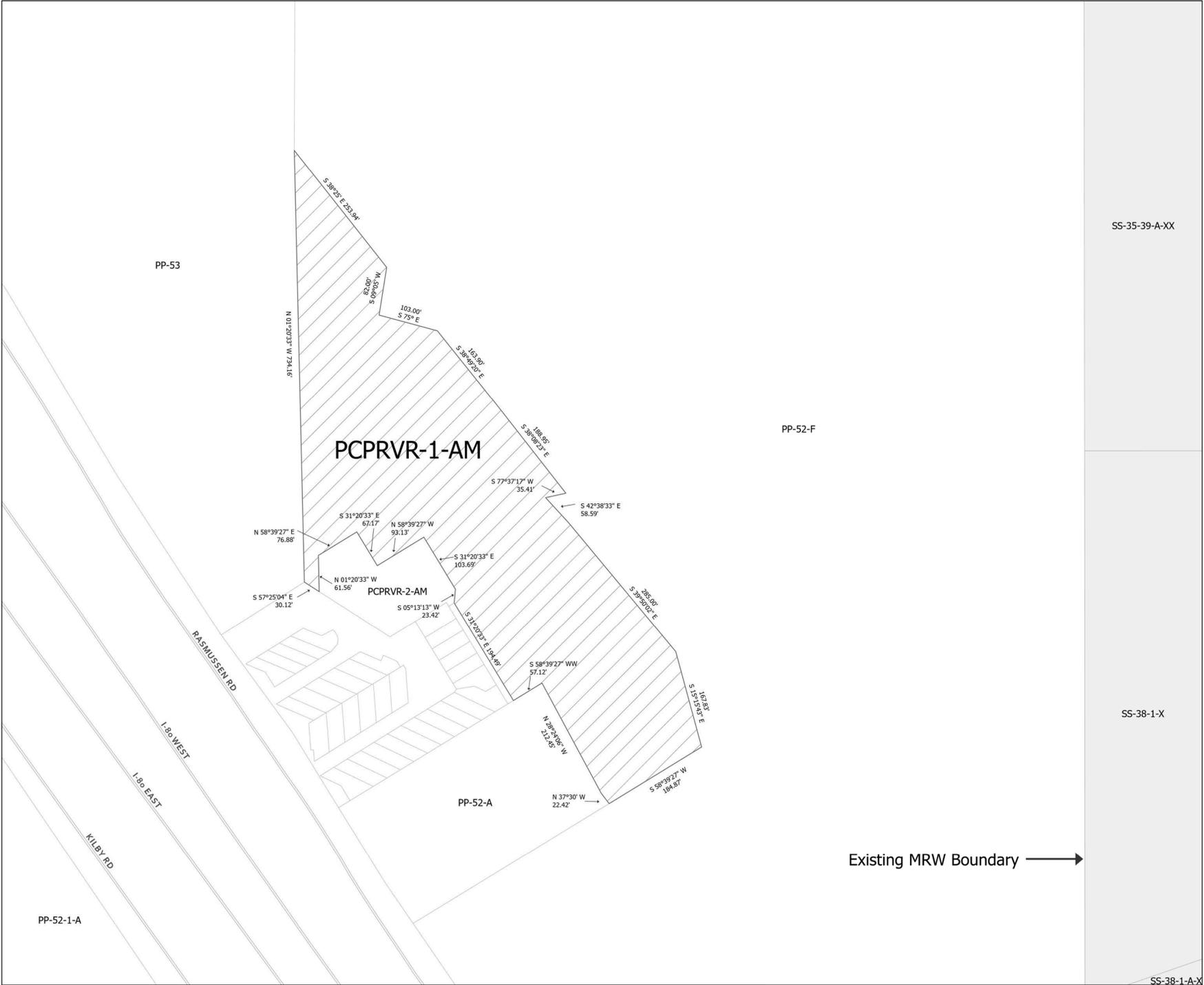
A Parcel of Land Located within the Northeast Quarter of Section 13,  
Township 1 South, Range 3 East, Salt Lake Base and Meridian

BY RESOLUTION NO. \_\_\_\_\_

Legal:

All of Lot 1 of Park City Private RV Resort Amended, on file and of record in the Office of the Summit County Recorder.

Tax ID: PCPRVR-1-AM

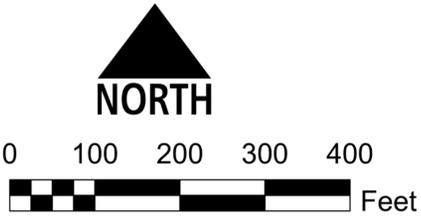


### SURVEYORS CERTIFICATE

I, Christopher Braun, do hereby certify that I am a licensed land surveyor and I hold license number 5152604 as prescribed under the laws of the State of Utah. I further certify that this plat has been made under my direction in compliance with Section 17A-2-1326(4) and that the annexation to Mountain Regional Water Special Service District is correctly shown hereon. No field survey was performed in the creation of this plat.

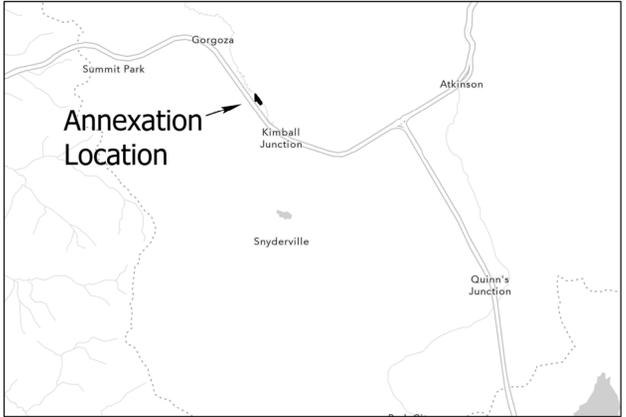


By K. Baird  
Date: 4/11/2023



APPROVED AS TO FORM SUMMIT COUNTY ATTORNEY	APPROVED AS TO FORM SUMMIT COUNTY SURVEYOR	SUMMIT COUNTY RECORDER
BY _____ DATE _____		

VICINITY MAP



**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION ANNEXING CERTAIN REAL PROPERTY TO THE MOUNTAIN  
REGIONAL WATER SPECIAL SERVICE DISTRICT  
(Parcel PCPRVR-1-AM)**

**WHEREAS**, the Summit County Council of Summit County, Utah (the “Council”), established a local district designated as the Mountain Regional Water Special Service District (the “District”), to provide water services within its boundaries; and

**WHEREAS**, Utah Code Ann. §17D-1-401 provides that additional land from that specified in the resolution establishing a local district may be annexed to the District in conformance with the applicable procedures; and

**WHEREAS**, §17D-1-203 and §17D-1-401(2) provide that the Council, may be petitioned to annex an area into the District; and

**WHEREAS**, there have been numerous annexations into the District since its establishment in 1987; and

**WHEREAS**, **Park City Private RV Resort**, has petitioned the Council to annex its land into the District (the “Petition”). In the Petition, **Park City Private RV Resort** represented that it is the sole owner of **Parcel PCPRVR-1-AM**; and

**WHEREAS**, the Summit County Clerk has certified the Petition; and

**WHEREAS**, §17D-1-402 provides that the notice, hearing, and protest period do not apply if a petition for annexation of additional area is filed with the signatures of all of the owners of taxable real property;

**WHEREAS**, **VC PARK CITY LLC** has signed the Petition for annexation.

**NOW, A THEREFOR, BE IT RESOLVED** by the Summit County Council as follows:

Section 1. **FINDINGS.** The Council finds and determines that public health, convenience, and necessity requires that certain land situated in Summit County, State of Utah, being generally described as parcel **PCPRVR-1-AM** located in Summit County, Utah (the “Property”) be annexed into the District.

Section 2. **ANNEXATION.** The Property is hereby annexed into the boundaries of Mountain Regional Water Special Service District. The property annexed shall be governed by and become an integral part of the District. Pursuant to this annexation, the owners of the Property shall be entitled, upon entering into a Water Service Agreement with the District, to receive the benefit of water services and facilities provided by the District, and shall be subject to the rights, powers and authority of the District, including, without limitation, the right, power and authority of the District to promulgate rules and regulations for the operation of the District, to levy ad valorem taxes on the Property, and to impose such fees and charges as shall be necessary to pay for all or part of the commodities, facilities and services to be provided by the District for the payment of the District’s bonds and other obligations.

Section 3. **Direction.** All officers and employees of the District are hereby directed to take such action as shall be necessary and appropriate to effectuate the provisions of this Resolution and the intent expressed herein.

Section 4. **Effective Date.** This Resolution shall take effect immediately upon its approval and adoption by the Summit County Council.

APPROVED AND ADOPTED this \_\_\_\_\_ day of \_\_\_\_\_, 2023

SUMMIT COUNTY COUNCIL  
SUMMIT COUNTY, UTAH

---

Roger Armstrong  
Chair

ATTEST:

---

Evelyn Furse  
County Clerk

APPROVED AS TO FORM:

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David L. Thomas  
Chief Civil Deputy



# Staff Report

**MEETING DATE:** May 10, 2023  
**TO:** Summit County Council  
**SUBJECT:** \$500,000 grant award to Utah Housing Preservation Fund LLC, to facilitate the preservation and rehabilitation of 96 units of affordable housing for property located at 2627 West Kilby Road.

**ISSUING DEPARTMENT:** Summit County Administration  
Economic Development and Housing

**STAFF:** Jeffrey B Jones, AICP  
Economic Development & Housing Director  
[jjones@summitcounty.org](mailto:jjones@summitcounty.org)

**ITEM:** Housing Deed Restrictions/Grant Agreement

<u>          </u>	DIRECTION
<u>      X      </u>	MOTION
<u>          </u>	ORDINANCE
<u>      X      </u>	DEED RESTRICTIONS
<u>          </u>	RESOLUTION
<u>      X      </u>	GRANT AGREEMENT

## **RECOMMENDED MOTION**

Staff recommends that the County Council:

1. Authorize the County Manager to commit funding in the amount of \$500,000 to the Utah Housing Preservation Fund LLC in support of the Victory at Summit (Elk Meadows) preservation and rehabilitation project.
2. Authorize the County Manager to execute the Deed Restrictions and Grant agreement as amended.

## **REQUEST/ISSUE & BACKGROUND INFORMATION**

County Council conducted a work session on May 03, 2023, to consider the merits of a \$500,000 grant award to the Utah Housing Preservation Fund (UHPF). The grant request by the UJHPF would be used to facilitate the preservation and rehabilitation of 96 units of affordable housing for property located at 2627 West Kilby Road.

Most of County Council's discussion regarding the UHPF application centered around the accompanying deed restrictions and grant agreement. In response, staff has amended the deed restrictions and circulated those changes to the Utah Housing Preservation Fund (UHPF) for their review and comment. Most of the amendments were focused on the mortgage subordination clauses.

Staff has attempted to resolve those issues by simply including the holder of the First Mortgage as a party to the agreement. The staff has not received a response back from the UHPF at the time this staff report was prepared but anticipate hearing back from the UHPF prior to the May 10<sup>th</sup> scheduled meeting.

The revised deed restrictions are included as **Attachment I**. No changes were made to the grant award which is included as **Attachment II**.

### **Staff Recommendation**

It is Staff's belief that using all available tools to prevent the loss of deed restricted units at 60% AMI or below is imperative to prevent further displacement and to allow the households most at risk of displacement and cost burden to stay in their homes.

### **Fiscal Impact**

Currently there is sufficient uncommitted balance in the Affordable Housing Fund account to support the County's participation in the UHPF project in the amount of \$500,000.

### **Timeline**

This funding commitment from the County would need to be utilized by UHPF prior to December 31, 2024. Any monies not expended during the term of the agreement period would be released back to the County.

## Policy

Providing grants to further the preservation of affordable housing stock within the Snyderville Basin satisfies Ordinance No. 950 (**Attachment III**), Strategies B and G.

*STRATEGY B: Identify and utilize county general fund subsidies or other sources of revenue to waive construction related fees that are otherwise generally imposed by the County for the construction or rehabilitation of moderate-income housing. (Utah Code § 17-27a-403(2)(b)ii(D))*

*STRATEGY G: Demonstrate implementation of any other program or strategy to address the housing needs of residents of the county who earn less than 80% of the area median income, including the dedication of a local funding source to moderate-income housing or the adoption of a land use ordinance that requires 10% or more of new residential development in a residential zone be dedicated to moderate-income housing. (Utah Code § 17-27a-403(2)(b)ii(W))*

## ATTACHMENTS

- i. Deed Restrictions – Exhibit B
- ii. Grant Agreement – Exhibit A
- iii. Ordinance 950 (Moderate Income Housing)

WHEN RECORDED, RETURN TO:  
Helen E. Strachan  
Deputy Summit County Attorney  
Summit County Courthouse  
60 North Main Street  
Coalville, Utah 84017

Summit County Tax ID: HIP-1

**RESTRICTIONS  
CONCERNING MODERATE INCOME / WORKFORCE HOUSING UNITS  
FOR ELK MEADOWS APARTMENTS LOCATED AT  
2627 WEST KILBY ROAD, PARK CITY, UT 84098**

THESE RESTRICTIONS CONCERNING MODERATE INCOME / WORKFORCE HOUSING UNITS FOR ELK MEADOWS APARTMENTS (hereinafter this "Deed Restriction") is made and entered into effective as of the \_\_\_\_\_ day of \_\_\_\_\_ 2023 (the "Effective Date"), by and among the Utah Housing Preservation Fund, LLC, a wholly owned subsidiary of Utah Non-Profit Housing Corporation, a 501(c)(3) nonprofit corporation ("UHPF"), SUMMIT COUNTY, a political subdivision of the State of Utah, by and through its County Manager (the "County"), and KEYBANK, a subsidiary of KeyCorp and the holder of the First Mortgage, as that term is defined herein ("KeyBank"). The County, UHPF or KeyBank are sometimes referred to herein individually as a "Party" and collectively as the "Parties."

Deleted: and

Deleted: and

**Recitals**

**WHEREAS**, the mission of UHPF is to preserve existing affordable housing stock through (a) the acquisition of such housing stock that may be otherwise acquired by private equity funds, and (b) the recordation of deed restrictions guaranteeing the continuing affordability of such housing; and,

**WHEREAS**, Elk Meadows, located at 2627 Kilby Road, Park City, Utah 84098 ("**Elk Meadows**"), is a "for rent" 100% deed restricted affordable housing project consisting of ninety-six (96) units (hereinafter the "**Apartments**" or "**Apartment Units**" when used together or "**Apartment Unit**" when used singularly) units financed through Low-Income Housing Tax Credits, which expired on December 31, 2022. The legal description for Elk Meadows is attached hereto and incorporated herein, as **Exhibit A** (the "**Property**"); and

**WHEREAS**, UHPF acquired Elk Meadows on May 31, 2022; and,

**WHEREAS**, in order to financially maintain Elk Meadows as affordable housing stock and impose new deed restrictions thereon, \$2,160,338 in capital improvements are needed; and

**WHEREAS**, UHPF has applied to the County for a grant to assist in funding a portion of the needed capital improvements; and,

**WHEREAS**, in accordance with Utah Code §17-27a-403, the County enacted Ordinance No.s ("**Ordinance**") 950 and 951, setting forth moderate income housing plans for the Snyderville Basin and Eastern Summit County, which have been approved by the Department of Workforce Services, Housing and Community Development Division; and,

**WHEREAS**, the preservation of existing affordable housing is more impactful than building new affordable housing stock; and,

**WHEREAS**, providing grants to further the preservation of affordable housing stock within the Snyderville Basin satisfies Ordinance No. 950, Strategies B and G; and,

**WHEREAS**, the County finds that it is in the best interests of the County to issue a monetary grant to UHPF in order to assist it in the funding of capital improvements for Elk Meadows, on the condition that these Deed Restrictions, approved by the County, are recorded against Elk Meadows; and,

**WHEREAS**, KeyBank, as holder of the First Mortgage on the Property, is a necessary Party to this Deed Restriction to ensure that, in the event of foreclosure of the Property, the County has the first right to purchase the Property to ensure that the Property maintains its status as deed restricted housing affordable to the residents of Summit County; and

**WHEREAS**, upon its recording in the public records of the County Recorder of Summit County, Utah, this Deed Restriction shall govern the terms and conditions of ownership, use, and occupancy of the units located within Elk Meadows by subsequent owners and their heirs, successors, executors, administrators, devisees and assigns as addressed herein.

#### **Covenants and Restrictions**

NOW, THEREFORE, in consideration of the foregoing recitals and the covenants set forth herein, the Parties agree as follows, and UHPF, as owner of the Property and KeyBank as holder of the First Mortgage, hereby submits the Property to the following covenants and restrictions:

#### **1. DEFINITIONS.**

- 1.1. **"Area Median Income" or "AMI"**: means the Summit County Area Median Income for a household of four (regardless of the actual household size of the purchaser), as determined by the County with reference to the U.S. Department of Housing and Urban Development calculation of AMI, or other AMI calculation adopted by the County.
- 1.2. **"County"** means Summit County, a political subdivision of the State of Utah. Actions to be taken or decisions to be made by the County hereunder are to be taken or made by

the Summit County Council or the department, employee or third-party designee selected by the County Council to carry out such responsibilities or to administer, generally, the affordable housing programs for the County.

- 1.3. **“Disability”** means a physical or mental impairment that substantially limits one or more of a person’s major life activities, including a person having a record of such an impairment or being regarded as having such an impairment.
- 1.4. **“First Mortgage”** means a Mortgage (as defined in Section 1.6) having priority as to all other Mortgages encumbering the Property or any part thereof or interest therein.
- 1.5. **“Household”** means all related and unrelated individuals occupying an Apartment Unit as a Tenant.
- 1.6. **“Mortgage”** means a mortgage, deed of trust or similar security instrument by which the Property or any part thereof or interest therein is encumbered.
- 1.7. **“Net Worth”** means the amount of total assets of the individuals or Household that exceed total liabilities, as determined by the County. Total assets do not include funds in retirement accounts that have an early withdrawal penalty.
- 1.8. **“Notice”** means correspondence complying with the provisions of Section 11.1.
- 1.9. **“Reasonable Efforts”** means good faith efforts to advertise an Apartment Unit for rent through appropriate local means, as determined by the County, including but not limited to advertising an Apartment Unit through local newspaper publications. The County may establish standards for what constitutes Reasonable Efforts under this Deed Restriction.
- 1.10. **“Tenant”** means an individual or Household that has been qualified under this Deed Restriction and is occupying an Apartment Unit under a valid lease agreement.

## 2. OCCUPANCY BY A QUALIFIED HOUSEHOLD

- 2.1. **Qualified Household:** Unless otherwise allowed in this Deed Restriction, each Apartment Unit shall at all times be occupied by a Household on a for-rent basis. Prior to entering into any lease agreement(s), the Household of each Apartment Unit shall be pre-qualified by UHPF or its third-party designee (and approved by the County), as meeting the Income Qualifications set forth in Section 2.2
- 2.2. **Income Qualifications.** Except as otherwise provided in this Section 2, each Apartment Unit shall at all times be occupied by a Household earning less than or equal to 60% of AMI based upon the table in Exhibit B (as amended annually by the Department of Housing and Urban Development and published by the Utah Housing Corporation). In addition, the Household may not have a Net Worth in excess of four (4) times the AMI at the time of reference.

- 2.3. "Over" income: UHPF shall follow the "next available Apartment Unit rule," which means that if an Apartment Unit's Household's income increases to more than 60% of the AMI, the next available Apartment Unit must be rented to a Household within the appropriate income level for admission (60% AMI or less). However, the Household with the increased income is still eligible to remain in the Apartment Unit if the Household Income is at or below 100% AMI.
- 2.4. Process. Income qualification shall adhere to the following process, which may be subject to additional policies or procedures adopted by the County.
- 2.4.1. Determine the number of adults and children (all Household members) to occupy the Apartment Unit.
- 2.4.2. Collect (a) 1040 Federal Tax Returns for the most recent year (or "transcript of tax returns" issued by the Internal Revenue Service) and (b) current pay stub(s) and/or projected income for all Household members generating income.
- 2.4.3. Add together the gross income for all Household members to determine the total Household income.
- 2.4.4. Review Exhibit B (as updated annually) to determine whether the total Household income is less than or equal to the income of a four-person Household earning 60% AMI.
- 2.5. Annual Qualification: Except as otherwise provided for in this Deed Restriction, Households shall meet the above Income Qualifications annually by UHPF or a third-party designee (approved by the County) and shall be required to submit to the Income Qualification process above prior to renewal of any lease. If a Tenant no longer qualifies for the Apartment Unit as provided in Section 2.3, they will be granted a one (1) year safe harbor period. Upon expiration of the safe harbor period their lease will not be renewed, and the Apartment Unit will then be made available to a qualifying Tenant.
- 2.6. Employment Priorities: It is the public policy of the County to house employees as close to the workplace as possible, thereby reducing traffic and congestion. UHPF shall offer the Apartment Units giving priority to Households as follows:
- 2.6.1. with at least one person employed full time at a business or businesses (if multiple part-time jobs) located in Summit County. "Full time" is defined as working for a business or businesses located in Summit County a minimum of 1,560 hours per year (or approximately 30 hours per week), or if self-employed, the person must be registered as a business entity in the State of Utah, have a current Summit County business license, and provide substantial goods and/or services within Summit County; OR

2.6.2. with at least one person being a retired person who was a full-time employee of a business located within Summit County for at least two continuous years immediately preceding his or her retirement; OR

2.6.3. with at least one person unable to work due to a Disability.

2.7. Rentals After “Reasonable Efforts” Made: At the time of initial occupancy, UHPF shall use Reasonable Efforts to advertise Apartment Units for rent to Households earning less than or equal to 60% of AMI based on Exhibit B (as updated annually) and to Households that meet the employment priorities in Section 2.6. If after thirty (30) days of using Reasonable Efforts, UHPF is unable to enter into a rental agreement with a Household earning less than or equal to 60% of AMI and a Household meeting the employment priorities in Section 2.6, UHPF shall use Reasonable Efforts to offer the Apartment Unit to a Household earning less than or equal to 80% of AMI based upon the table in Exhibit B (with no restrictions on employment). If after sixty (60) days of using Reasonable Efforts, UHPF is unable to enter into a rental agreement with a Household earning less than or equal to 80% of AMI, UHPF shall use Reasonable Efforts to offer the Apartment Unit to a Household earning less than or equal to 100% of AMI based upon the table in Exhibit B (with no restrictions on employment).

**The rental of an Apartment Unit to a Tenant who is not Income Qualified and/or who does not meet the Employment Qualifications above does not limit the applicability of this Deed Restriction in any way with respect to such Tenant’s use, occupancy and subsequent leases of the Apartment Unit.**

### 3. RENTING THE UNIT

3.1. Maximum Permitted Rents: The maximum permitted monthly rents for the Apartment Units shall not exceed rents for a one, two or three-bedroom apartment (as applicable) for a Household earning 60% AMI for Summit County, as published and updated by Utah Housing Corporation. The maximum allowed rents at the time of this Deed Restriction are set forth in Exhibit C and shall be updated annually.

3.2. The permitted rental amount includes the following:

3.2.1.1. Use and occupancy of the Apartment Unit and the associated land and facilities;

3.2.1.2. Any separately charged fees and service charges assessed by UHPF, which are required by all Tenants but is not to include security deposits;

3.2.1.3. Unless subject to Section 3.3 below, utilities including garbage collection, sewer, water, electricity, gas and other heating, cooking, and refrigeration

fuels (hereinafter “**Utilities**”) but not to include telephone service, cable television, or internet; and

3.2.1.4. Possessory interest taxes or other fees and charges assessed for use of the associated land and facilities by a public or private entity other than UHPF.

3.3. Utility Allowance: The permitted rental amount includes rent and Utilities. If UHPF pays all Utilities, then the full rent may be charged. If the Apartment Unit Tenant pays all or some of the Utilities, a “utility allowance” shall be determined and maximum rents identified in Exhibit C shall be reduced by the amount of the utility allowance. Utility allowances shall be approved in advance by the County.

3.4. Rental Period: Apartment Units shall not be rented nightly or weekly. The minimum rental length shall be six (6) months.

#### **4. REPORTING AND COMPLIANCE**

4.1. UHPF shall keep accurate and complete records of all Tenants. UHPF shall provide to the County a quarterly rent roll showing each individual Tenant or Tenant’s Household’s name(s), Apartment Unit occupied, rent charged, Household gross income, name(s) and location(s) of employment, term of lease and other information related to eligibility requested by the County from time-to-time. UHPF shall also provide the County with a quarterly copy of UHPF’s Tenant wait list. The County may make reasonable requests for additional documentation from UHPF to demonstrate compliance. The County shall have the right to audit UHPF’s Tenant files annually upon twenty-one (21) days advanced written notice to UHPF.

#### **5. MAINTENANCE OF APARTMENT UNITS & INSURANCE.**

5.1. Minimum Maintenance Standards. Each Apartment Unit shall at all times be maintained in good, safe, and habitable condition in all respects, normal wear and tear excepted, and in full compliance with all applicable laws, ordinances, rules and regulations of any authority having jurisdiction over the Apartment Unit.

5.2. Insurance. UHPF shall continuously insure the Apartment Units against all risks of physical loss for the full replacement cost of the Apartment Units. This insurance requirement applies only to the physical structure of the Units and does not include any personal belongings of the Tenants, which shall be covered by a separate renter’s policy obtained by and at the discretion of the Tenant.

#### **6. MORTGAGE PROTECTION.**

6.1. Subordination to First Mortgage. Except as provided in this Article 6, this Deed Restriction shall be subject and subordinate in all respects to the liens, terms,

covenants and conditions of the First Mortgage encumbering the Property and to all advances validly secured by said First Mortgage. For purposes of this Article 6, "First Mortgage" shall mean the mortgage of KeyBank.

6.2. Notice of Default; Notice of Foreclosure. Notwithstanding the subordination provision above, KeyBank, as holder of a First Mortgage, shall serve Notice on the County per Subsection 11.1: (a) if UHPF is in default of the First Mortgage for more than 60 days; and (b) if foreclosure proceedings have commenced against the Property.

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6.3. Option to Acquire Property from First Mortgagee. If Key Bank takes title to the Property by way of trustee's sale, foreclosure, deed-in-lieu of foreclosure or similar means, the County shall have the right to purchase the Property from KeyBank by delivering Notice to KeyBank within sixty (60) days after the date KeyBank takes title to the Property (the "Exercise Period"); provided, however, that KeyBank shall have served Notice of such event upon the County in accordance with Section 14(b) below or the Exercise Period shall be extended to 60 days after the date of service of Notice. The purchase price to be paid by the County for the Property shall be equal to the outstanding principal, delinquent payments, and any advances validly secured by the First Mortgage. Provided Key Bank has acted to cure any default within one hundred eighty (180) days or within a reasonable time established by industry standards (if greater), the purchase price may also include reasonable attorneys' fees and other reasonable costs incurred to recover the Property through a trustee's sale, foreclosure, deed-in-lieu of foreclosure or other similar means. In the event the County timely exercises such right to purchase the Property, the County shall close on the purchase within one hundred eighty (180) days following the date that the County delivers Notice of its intent to acquire the Property (the "Closing Deadline").

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6.4. No Impact on Foreclosure Sale. The provisions of Section 6.3 shall not impair KeyBank from causing the Property to be sold at public sale by way of judicial or non-judicial foreclosure. Any purchaser at such sale (other than KeyBank as provided in this Article 6) shall acquire the Property subject to this Deed Restriction. In the event of such public foreclosure sale, the County shall have no rights greater than or different from others bidding for the Property, except that the County shall have the post-foreclosure option to purchase described in Section 6.3.

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6.5. Termination of Deed Restriction Upon Foreclosure; Applicability. If KeyBank acquires the Property via foreclosure sale or similar legal means as described in Section 6.3 above and the County does not exercise its option to purchase the Property (by either failing to deliver Notice to KeyBank within the Exercise Period or failing to close on such purchase by the Closing Deadline), then the provisions of this Deed Restriction shall automatically terminate with respect to the Property and KeyBank shall be entitled to transfer the Property free and clear of this Deed Restriction. In such event the owner of the Property may, but shall not be required to, file in the Office of the Summit County Recorder an affidavit or other notice of termination, reciting the events giving rise to the termination of this Deed Restriction.

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The above-described termination of this Deed Restriction shall apply only to the acquisition of the Property by (or through) KeyBank strictly as described in the preceding paragraph. If any other person or entity (including the County) shall acquire the Property through foreclosure or trustee's sale or by any similar means, such acquisition shall be made, and the Property shall remain, subject to the terms and conditions of this Deed Restriction which shall not be automatically terminated by said foreclosure sale or other transfer event.

Deleted: the holder of a First Mortgage

**7. DEFAULT AND REMEDIES.**

7.1. Default. In the event of a breach of any of terms of this Deed Restriction by UHPF with respect to the Apartment Units or breach by KeyBank with respect to Section 6 herein, the County shall be entitled to injunctive relief, or to any other remedy available at law or in equity for such breach, including the specific remedies enumerated herein. The prevailing Party in any dispute hereunder shall be entitled to recover their reasonable attorneys' fees and costs incurred in connection with such dispute, regardless of whether litigation is pursued by either Party.

7.2. Violation of Criminal Code. In addition to the remedies contained herein, UHPF, KeyBank, Tenant(s) and other individuals dealing with the transfer and/or management of an Apartment Unit (including lenders, realtors, attorneys and title professionals) may be subject to the provisions of Summit County Code §5-2-7: Affordable Housing Fraud (as may be amended or replaced).

**8. TERM.** This Deed Restriction shall continue in full force and effect for forty (40) years from the date it is recorded in the Office of the Summit County Recorder unless terminated sooner by the mutual agreement of the Parties (the "Term").

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**9. CHOICE OF LAW.** This Deed Restriction shall be governed and construed in accordance with the laws of the State of Utah.

**10. RECORDING AND COVENANTS TO RUN WITH THE LAND.**

10.1. Recordation. Upon execution by the County, this Deed Restriction shall be recorded against the Property and filed in the Office of the Summit County Recorder.

10.2. Covenants Run with the Land. The Parties intend, declare and covenant, on behalf of itself and all future owners, that this Deed Restriction and the covenants and restrictions set forth herein, regulating and restricting the rents, use, occupancy and transfer of the Apartment Units shall be covenants running with the land and improvements constituting the Apartment Units, for the benefit of the County, shall encumber the Apartment Unit, and shall be binding upon the County and all subsequent owners of the Apartment Units.

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**11. MISCELLANEOUS.**

11.1. Notice.

11.1.1. Any and all notices or demands to UHPF or person(s) required or desired to be given hereunder shall be in writing and shall be validly given or made if (a) deposited in the U.S. mail, certified or registered, postage prepaid, return receipt requested, (b) sent by commercial courier keeping records of deliveries and attempted deliveries, or (c) via hand delivery with signed acknowledgment of receipt by a person of suitable age and discretion. Service by U.S. mail or courier shall be conclusively deemed made on the first business day delivery is attempted. Any notice or demand to UHPF shall be addressed to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11.1.2. Any and all notices or demands to the County shall be in writing and shall be served by (a) mail or commercial courier provided to the Summit County Clerk or his/her authorized agent authorized by appointment or by law to receive service by signing a document indicating receipt or (b) via hand delivery with signed acknowledgment of receipt by the Summit County Clerk or his/her authorized agent authorized by appointment or by law. Service shall be complete on the date the receipt is signed. Any notice or demand to the County shall be addressed to:

Summit County Clerk  
P.O. Box 128  
Coalville, Utah 84017

With a copy to:

Summit County Attorney  
P.O. Box 128  
Coalville, Utah 84017

Summit County, Utah  
Office of Economic Development  
PO Box 128  
60 North Main  
Coalville, Utah 84017  
Attn: Jeffrey B. Jones

11.1.3. Any and all notices or demands to KeyBank or person(s) required or desired to be given hereunder shall be in writing and shall be validly given or made if (a)

deposited in the U.S. mail, certified or registered, postage prepaid, return receipt requested, (b) sent by commercial courier keeping records of deliveries and attempted deliveries, or (c) via hand delivery with signed acknowledgment of receipt by a person of suitable age and discretion. Service by U.S. mail or courier shall be conclusively deemed made on the first business day delivery is attempted. Any notice or demand to KeyBank shall be addressed to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 11.1.4. The Parties may change their respective addresses for the purpose of receiving notices or demands as herein provided by Notice given in the manner aforesaid to the others, which notice of change of address shall not become effective, however, until the actual receipt thereof by the others or the recording of a change of address by the County.
- 11.2. Paragraph Headings. Paragraph or section headings within this Deed Restriction are inserted solely for convenience of reference, and are not intended to, and shall not govern, limit or aid in the construction of any terms or provisions contained herein.
- 11.3. Gender and Number. Whenever the context so requires herein, the neuter and gender shall include any or all genders and vice versa and the use of the singular shall include the plural and vice versa.
- 11.4. Exhibits: The Parties understand and agree that Exhibit B and Exhibit C to this Deed Restriction are based upon 2023 HUD AMI and UHC rental rates which are amended annually and as such Exhibit B and Exhibit C shall be amended annually to reflect changes in AMI and UHC maximum rental rates.
- 11.5. Modifications. Any modification of this Deed Restriction shall be effective only when made by writings signed by the Parties and recorded in the Office of the Summit County Recorder. In the event UHPF desires to convert the Units to condominiums, this Deed Restriction shall be amended.
- 11.6. Incorporation of Recitals. The recitals set forth at the beginning of this Deed Restriction are incorporated herein by this reference.
- 11.7. Binding Agreement. This Deed Restriction shall be binding upon the successor and assigns of the Parties hereto. The Parties may assign their rights and obligations under this Agreement with 30-days advance written notice to the other Parties.

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*Signatures on next page*

IN WITNESS WHEREOF the Parties have caused this Agreement to be executed as of the date hereof.

UTAH HOUSING PRESERVATION FUND, LLC

SUMMIT COUNTY, UTAH

\_\_\_\_\_

\_\_\_\_\_  
Summit County Manager

Date: \_\_\_\_\_

Date: \_\_\_\_\_

KEYBANK

\_\_\_\_\_

Date: \_\_\_\_\_

APPROVED AS TO FORM:

\_\_\_\_\_  
Helen E. Strachan, Deputy County Attorney

*notary acknowledgments on next page*

**Notary Acknowledgments**

STATE OF UTAH  
COUNTY OF SUMMIT

On this \_\_\_ day of \_\_\_\_\_ 2023, this Deed Restriction was acknowledged before me by Shayne Scott, County Manager of Summit County.

\_\_\_\_\_  
Notary Public

STATE OF UTAH:            )  
  )  
COUNTY OF SUMMIT )

On this \_\_\_ day of \_\_\_\_\_ 2023, this Agreement was acknowledged before me by \_\_\_\_\_, as \_\_\_\_\_ of Utah Housing Preservation Fund, LLC.

\_\_\_\_\_  
Notary Public

STATE OF UTAH: \_\_\_\_\_ )  
  )  
COUNTY OF SUMMIT )

On this     day of                    2023, this Agreement was acknowledged before me by \_\_\_\_\_, as \_\_\_\_\_ of KeyBank.

\_\_\_\_\_  
Notary Public

**EXHIBIT A**

**LEGAL DESCRIPTION OF PROPERTY**

ALL OF HI-PINES APARTMENTS; ACCORDING TO THE OFFICIAL PLAT ON FILE IN THE SUMMIT COUNTY RECORDERS OFFICE CONT 8.0 AC (LESS 0.68 AC 1124-560 HIP-1-A-X) BAL 7.42 AC (REF:621-53) 1389-1100 (SEE SWD-770-331 PINEBROOK DEVELOPMENT CORPORATION TO WILLOW RANCH DEVELOPMENT CO PARCEL 6) 2015-146 2082-1039 2743-579

On our ALTA Survey, the description is as follows:

Beginning at a point on the South line of Section 12, Township 1 South, Range 3 East, Salt Lake Base and Meridian, being South 89°24'30" East 1726.05 feet from the Southwest corner of said Section 12; thence North 35°44'46" West 920.96 feet to a point on a 315.00 foot radius curve to the right, (radius bears south 24°06'04" East); thence along the arc of said curve 119.42 feet to a point on a 385.00 foot radius curve to the left (radius bears North 2°22'45" West); thence along the arc of said curve 224.21 feet; thence North 54°15'14" East 50.00 feet to the Westerly right of way line of the Frontage Road as shown on State Highway Project No. I-80-4 (31) 141; thence along said Westerly right of way line the following (6) courses: South 35°44'46" East 539.92 feet to a State right of way marker (Engineers Station 200+24.26), said point also being a point of a 612.96 foot radius curve to the left (Radius bears North 54°13'19" East), and along the arc of said curve 106.98 feet to a point of tangency, and South 45°46'41" East 14.92 feet to a point on a 532.96 foot radius curve to the right (radius bears South 44°13'19" West), and Southeasterly along the arc of said curve 93.02 feet to a point of tangency, and South 35°46'41" East 50.00 feet to a point on a 778.51 foot radius curve to the right (radius bears South 54°13'19" West), and along the arc of said curve 111.10 feet; thence leaving said Westerly right of way line North 89°24'30" West 119.92 feet; thence South 0°35'30" West 145.00 feet to the South line of said Section 12, thence North 89°24'30" West 249.77 feet to the point of Beginning. Also known as Hi-Pines Apartments, according to the official plat thereof on file and of record in the Summit County Recorder's Office.

Excepting therefrom the following described property:

Beginning at the Southwest corner of that certain parcel deeded to Park City Fire Protection District described in a Special Warranty Deed, recorded as Entry No. 190192 in Book M-218 at Page 521 in the office of the Summit County Recorder, said point is located South 89°24'05" East 1975.82 feet from the Southwest corner of Section 12, Township 1 South, Range 3 East, Salt Lake Base and Meridian, said point of beginning is also located along the boundary line of the property described in the Hi-Pines Apartments Recorded of Survey Plat, recorded as Entry No. 361697 in the office of the Summit County Recorder, and running thence along the Section line North 89°24'05" West 249.77 feet (Hi-Pines Apartments recorded on Survey Plat North 89°24'30" West 249.77 feet); thence North 54°14'39" East 390.63 feet, more or less, to the Westerly right of way of the frontage road (Kilby Road) of Interstate I-80, said point is also located on a 778.51 foot radius curve to the right, whose radius point bears South 54°48'33" West, and running thence along the arc of said curve and along the Westerly right of way line of Kilby Road 102.18 feet thru a central angle of 7°31'11"; thence along the boundary line of the Park City Fire Protection District Special Warranty Deed and along the boundary of the Hi-Pines Apartments Record of Survey Plat North 89°24'05" West 118.98 feet (Hi-Pines Apartments Record of Survey Plat North 89°24'30" West 119.92 feet); thence along the boundary line of Park City Fire Protection District Special Warranty Deed and along the boundary line of the Hi-Pines Apartments Record of Survey Plat South 00°35'55" West 145 feet (Hi-Pines Apartments Record of Survey Plat South 00°35'30" West 145 feet) to the point of Beginning.

**EXHIBIT B**

**2023 INCOME QUALIFICATION TABLE  
(AS AMENDED ANNUALLY BY HUD)**

<b>2022 Summit County AMI = \$134,700</b>	<b>30% AMI</b>	<b>40% AMI</b>	<b>50% AMI</b>	<b>60% AMI</b>	<b>70% AMI</b>	<b>80% AMI</b>	<b>100% AMI</b>
1 person	\$28,080	\$37,440	\$46,800	\$56,160	\$65,520	\$74,880	\$94,300
2 person	\$32,100	\$42,800	\$53,500	\$64,200	\$74,900	\$85,600	\$107,800
3 person	\$36,120	\$48,160	\$60,200	\$72,240	\$84,280	\$96,320	\$121,301
4 person	\$40,110	\$53,480	\$66,850	\$80,220	\$93,590	\$106,960	\$134,700
5 person	\$43,320	\$57,760	\$72,200	\$86,640	\$101,080	\$115,520	\$145,480
6 person	\$46,530	\$62,040	\$77,550	\$93,060	\$108,570	\$124,080	\$156,260

**Commented [HS1]:** This table will be updated on May 15th to reflect new numbers that are published.

**EXHIBIT C**

**2023 MAXIMUM PERMITTED MONTHLY RENTS  
INCLUDING UTILITIES BY MEDIAN INCOME  
(AS AMENDED ANNUALLY BY HUD)**

**Commented [HS2]:** This table will be updated on May 15th to reflect new numbers that are published

Number of Bedrooms	Household Size	Moderate Income Housing						Attainable Housing 100% AMI
		30% AMI	40% AMI	50% AMI	60% AMI	70% AMI	80% AMI	
0	1	\$702.00	\$936.00	\$1,170.00	\$1,404.00	\$1,638.00	\$1,872.00	\$2,357.50
1	2	\$802.50	\$1,070.00	\$1,337.50	\$1,605.00	\$1,872.50	\$2,140.00	\$2,695.00
2	3	\$903.00	\$1,204.00	\$1,505.00	\$1,806.00	\$2,107.00	\$2,408.00	\$3,032.53
3	4	\$1,002.75	\$1,337.00	\$1,671.25	\$2,005.50	\$2,339.75	\$2,674.00	\$3,367.50

# GRANT AGREEMENT

**THIS AGREEMENT** made and entered into this \_\_\_\_ day of \_\_\_\_\_, 2023 (the “**Effective Date**”) by and between Summit County (herein called “**County**”), a body corporate and politic of the State of Utah, 60 N. Main Street, Coalville, Utah 84017 and the Utah Housing Preservation Fund, LLC, a wholly owned subsidiary of Utah Non-Profit Housing Corporation, a 501(c)(3) nonprofit corporation (“**UHPF**”), 223 West 700 South, Salt Lake City, Utah 84101. The County and UHPF each is a “**Party**” and collectively they are referred to as the “**Parties**”.

## WITNESSETH:

WHEREAS, the mission of UHPF is to preserve existing affordable housing stock through (a) the acquisition of such housing stock that may be otherwise acquired by private equity funds, and (b) the recordation of deed restrictions guaranteeing the continuing affordability of such housing; and,

WHEREAS, Elk Meadows, located at 2627 Kilby Road, Park City, Utah 84098 (“**Elk Meadows**”), is a “for rent” 100% deed restricted affordable housing project for ninety-six (96) units financed through LIHTC, which expired on December 31, 2022; and,

WHEREAS, UHPF acquired Elk Meadows on May 31, 2022; and,

WHEREAS, in order to financially maintain Elk Meadows as affordable housing stock and impose new deed restrictions thereon, \$2,160,338 in capital improvements are needed, as set forth in Exhibit A hereto, which is incorporated herein by this reference (the “**Capital Improvements**”); and,

WHEREAS, UHPF has applied to the County for a grant to assist in funding a portion of the Capital Improvements; and,

WHEREAS, in accordance with Utah Code §17-27a-403, Summit County enacted Summit County Ordinance No.s (“**Ordinance**”) 950 and 951, setting forth moderate income housing plans for the Snyderville Basin and Eastern Summit County, which have been approved by the Department of Workforce Services, Housing and Community Development Division; and,

WHEREAS, the preservation of existing affordable housing is more impactful than building new affordable housing stock; and,

WHEREAS, providing grants to further the preservation of affordable housing stock within the Snyderville Basin satisfies Ordinance No. 950, Strategies B and G; and,

WHEREAS, the County finds that it is in the best interests of the County to issue a monetary grant to UHPF in order to assist it in the funding of Capital Improvements for Elk Meadows, on the condition that appropriate affordable housing deed restrictions, approved by the County, are recorded against Elk Meadows; and,

WHEREAS, the County and UHPF have agreed to the following terms and conditions of this Agreement.

**NOW THEREFORE**, in consideration of the promises and the mutual covenants contained in this Agreement, it is agreed as follows:

1. UHPF Responsibilities.

- A. UHPF shall use the Grant (as described below) to finance a portion of the Capital Improvements for Elk Meadows in order to ensure its continued use as “for rent” 100% deed restricted affordable housing serving average median household incomes of 60% or less.
- B. UHPF shall adhere to the procedure set forth in Section 2(A) below.
- C. Within ten (10) days of the Effective Date, UHPF shall record the Affordable Housing Deed Restrictions, in form and substance consistent with Exhibit B, which is incorporated herein by this reference (the “**Deed Restrictions**”).

2. County's Responsibilities.

- A. Grant. Subject to the recordation of the Deed Restrictions, the County shall reimburse UHPF for Capital Improvements for Elk Meadows, up to a maximum of five hundred thousand dollars (\$500,000.00) (the “**Grant**”). Said Grant shall be disbursed to UHPF using the following procedure:
  - (i) UHPF shall expend funds for Elk Meadows Capital Improvements.
  - (ii) UHPF shall obtain an inspection sign-off from the Summit County Building Official (the “**Building Official**”) on the Capital Improvements (the “**Inspection Sign-Off**”).
  - (iii) UHPF shall obtain lien waivers from all contractors and subcontractors who provided materials or work on the Capital Improvements (the “**Lien Waivers**”).
  - (iv) UHPF shall submit to the County a written request for reimbursement for a specific Capital Improvement (the “**Request**”), together with copies of all invoices demonstrating the costs associated with the Capital

- Improvement, an Inspection Sign-Off and all Lien Waivers.
- (v) County shall issue payment to UHPF within thirty (30) days of receipt of a properly documented Request.

3. Term. The term of this Agreement shall commence on the Effective Date and shall continue until December 31, 2024. Any monies not expended during the term of this Agreement for the purposes set forth herein, shall be released back to the County.

4. Insurance. UHPF, at its own expense, shall maintain sufficient liability insurance against claims or lawsuits which result from the actions of UHPF or its employees, contractors or agents on Elk Meadows. County is a body corporate and politic of the State of Utah, subject to the Governmental Immunity Act of Utah (the "**Governmental Immunity Act**" or "**Act**"), Utah Code §§ 63G-7-101 to 904. The Parties agree that County shall only be liable within the parameters of the Governmental Immunity Act. Nothing contained in this Agreement shall be construed in any way, to modify the limits of liability set forth in that Act or the basis for liability as established in the Act.

5. Indemnification. UHPF agrees to indemnify and hold the County harmless from any claim or damages for injuries, including costs and reasonable attorney fees, resulting from the use by UHPF, its agents, employees, members, officers, and invitees, of Elk Meadows or any actions of its contractors, employees or agents in installing any improvements thereon. The provisions of this Section 5 shall survive the termination of this Agreement.

6. Assignability. The rights and obligations of UHPF under this Agreement are not transferable or assignable in whole or in part without the written consent of the County, which consent shall be subject to the sole and absolute discretion of County.

7. Waiver. No failure of the County to exercise any power given to it under this Agreement, or to insist upon strict compliance by UHPF with any obligation, responsibility, or condition under it, and no custom or practice of the Parties at variance with its terms shall constitute a waiver of the County's right to demand exact compliance with those terms upon any subsequent default.

8. Independent Contractor. In making and performing this Agreement, UHPF acts and shall act at all times as an independent contractor, and nothing contained in this Agreement shall be so construed or applied as to create or imply the relationship of partners, of agency, joint adventurers, or of employer and employee between the Parties hereto.

9. Public Funds and Public Monies.

- A. Definitions: "Public funds" and "public monies" mean monies, funds, and accounts, regardless of the source from which they are derived, that are owned, held, or administered by the state or any of its boards, commissions, institutions,

departments, divisions, agencies, bureaus, laboratories, or other similar instrumentalities, or any county, city, school district, political subdivision, or other public body. The terms also include monies, funds or accounts that have been transferred by any of the aforementioned public entities to a private contract provider for public programs or services. Said funds shall maintain the nature of “public funds” while in Oakley’s possession.

- B. UHPF’s Obligation: UHPF, as recipient of “public funds” and “public monies” pursuant to this Agreement, expressly understands that it, its officers, and employees are obligated to receive, keep safe, transfer, disburse and use these “public funds” and “public monies” as authorized by law and this Agreement. UHPF understands that it, its officers, and employees may be criminally liable under Utah Code § 76-8-402, for misuse of public funds or monies. UHPF expressly understands that County may monitor the expenditure of public funds by UHPF. UHPF expressly understands that County may withhold funds or require repayment of funds from UHPF for noncompliance, failure to comply with directives regarding the use of public funds, or for misuse of public funds or monies.

10. Political Activity Prohibited. None of the funds, materials, property or services provided directly or indirectly under this Agreement shall be used for any partisan political activity, or to further the election or defeat of any candidate for public office.

11. No Officer or Employee Interest. It is understood and agreed that no officer or employee of the County has or shall have any pecuniary interest, direct or indirect, in this Agreement or the proceeds resulting from the performance of this Agreement.

12. Ethical Standards. UHPF represents that it has not: (a) provided an illegal gift to any County officer or employee, or former County officer or employee, or to any relative or business entity of a County officer or employee, or relative or business entity of a former County officer or employee; (b) retained any person to solicit or secure this contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, other than bona fide employees of bona fide commercial agencies established for the purpose of securing business; (c) breached any of the ethical standards set forth in State statute; or (d) knowingly influenced, and hereby promises that it will not knowingly influence, any County officer or employee or former County officer or employee to breach any of the ethical standards set forth in State statute or Summit County ordinances.

13. Severability. If any term or provision of this Agreement shall, to any extent, be invalid or unenforceable, the remainder of this Agreement shall not be affected thereby, and each provision of this Agreement shall be valid and enforceable to the fullest extent permitted by law.

14. Governing Law. This Agreement shall be interpreted according to the laws of the State

of Utah.

15. Entire Agreement. This Agreement contains the entire agreement between the Parties concerning its subject matter, and no representations, inducements, promises, or agreements, oral or otherwise, between the Parties with reference to it and not embodied in this Agreement shall be of any force or effect.

16. Counterparts. This Agreement may be executed in several counterparts and all so executed shall constitute one agreement binding on all the Parties, notwithstanding that each of the Parties are not signatory to the original or the same counterpart. Further, executed copies of this Agreement delivered by facsimile or electronic means shall be deemed an original signed copy of this Agreement.

**IN WITNESS WHEREOF**, the Parties have executed this Agreement as of the Effective Date.

SUMMIT COUNTY

By: \_\_\_\_\_  
Shayne C. Scott  
County Manager

Approved as to form:

\_\_\_\_\_  
David L. Thomas  
Chief Civil Deputy

UTAH HOUSING PRESERVATION FUND, LLC,  
a wholly owned subsidiary of the Utah Non-Profit  
Housing Corporation

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Its: \_\_\_\_\_

EXHIBIT "A"

ELK MEADOWS  
CAPITAL IMPROVEMENTS

ELK MEADOWS  
2627 W Kilby Road  
Park City, UT 84098  
IMPROVEMENT BUDGET

RENOVATION BUDGET					Notes:
INTERIORS	DM%	# of Units	Per Unit	Total Cost	\$ PSF
Interior Unit - Classic	15%	91	\$4,984	\$453,579	6.65
Interior Unit - Partial 1	15%	0	\$0	\$0	-
Interior Unit - Partial 2	15%	0	\$0	\$0	-
Interior Unit - Reno Complete	15%	5	\$0	\$0	-
Down Unit	15%	0	\$0	\$0	-
<b>SUBTOTAL INTERIORS</b>	<b>15%</b>	<b>96</b>	<b>\$4,984</b>	<b>\$453,579</b>	<b>6.65</b>
<b>OTHER INTERIOR</b>					
Washer/Dryer Hookup	0%	96	\$0	\$0	- don't have any WD hookups and don't really have room for any
Washer/Dryer Appliance	0%	96	\$0	\$0	-
Water Conservation Program	50%	114	\$500	\$57,000	0.84
Other	0%	96	\$0	\$0	-
<b>SUBTOTAL OTHER INTERIOR</b>	<b>50%</b>		<b>\$500</b>	<b>\$57,000</b>	<b>0.84</b>
<b>TOTAL INTERIORS</b>	<b>19%</b>		<b>\$5,484</b>	<b>\$510,579</b>	<b>7.48</b>
<b>DEF MAINT &amp; EXTERIOR</b>					
Roofs	100%	96	\$0	\$0	- All roofs have been done 4 years ago
Gutters	100%	96	\$0	\$0	-
Windows	100%	96	\$1,000	\$96,000	1.41 Windows are original. Assuming we replace all of them.
Patio Doors	100%	96	\$0	\$0	-
Exterior Paint	100%	8	\$25,000	\$200,000	2.93 Exterior paint & vinyl repairs needed
Electrical	100%	96	\$0	\$0	- Copper wiring
Plumbing	100%	96	\$0	\$0	- Replaced 180 fire sprinklers in the units.
HVAC	100%	96	\$350	\$33,600	0.49
Water Heater	100%	96	\$1,000	\$96,000	1.41 #1 work order, cut out hole in the door so that furnace & water heater can have some ventilation
Asphalt	100%	96	\$2,604	\$250,000	3.66 Asphalt needs to be redone. Likely have to take it down 2" and then build it back up.
Concrete	100%	96	\$1,563	\$150,000	2.20 A lot of cracking & lifted concrete throughout the community
Furnace	100%	86	\$2,000	\$172,000	2.52 90% of the furnaces are original
Wood Rot	100%	96	\$0	\$0	-
Stair Landings	100%	8	\$10,000	\$80,000	1.17 Landings in rough shape, assuming two landings per building
Site Drainage	100%	96	\$0	\$0	-
Dumpsters	100%	96	\$208	\$20,000	0.29 Only have one large dumpster. Build some around the community w/ cameras or other measures to reduce dumping
Other	100%	96	\$781	\$75,000	1.10 fluff
<b>TOTAL DEF MAINT &amp; EXTERIOR</b>	<b>100%</b>		<b>\$44,506</b>	<b>\$1,172,600</b>	<b>17.19</b>
<b>COMMON AREAS</b>					
Clubhouse	15%	96	\$260	\$25,000	0.37 Small leasing center, minor updates
Clubhouse FF&E	15%	96	\$156	\$15,000	0.22 Small leasing center, minor updates

A

Fitness Center	15%	96	\$0	\$0	-	No fitness center
Fitness Equipment	15%	96	\$0	\$0	-	
Pool Area	15%	96	\$0	\$0	-	No pool
Pool FF&E	15%	96	\$0	\$0	-	
Model Apartment FF&E	15%	96	\$0	\$0	-	
Building Security Alarm/Access	15%	96	\$0	\$0	-	
Landscaping	50%	96	\$1,042	\$100,000	1.47	A lot of open space, improve the landscaping.
Fences & Gates	100%	96	\$260	\$25,000	0.37	Gate on the HOA side is coming down, fix w/ the HOA
Site Lighting	50%	8	\$6,250	\$50,000	0.73	Flood lights on buildings are good but there is no good lighting for the edges of the property
Corridors/Breezeways	25%	96	\$0	\$0	-	
Signage	25%	96	\$625	\$60,000	0.88	new monument sign & signage for the buildings
Carports	100%	96	\$0	\$0	-	
Amenity Space 1	0%	96	\$521	\$50,000	0.73	Revamp the playground/grilling areas
Amenity Space 2	0%	96	\$260	\$25,000	0.37	add dog park(s) and pet waste bin stations
<b>TOTAL COMMON AREAS</b>	<b>35%</b>		<b>\$9,375</b>	<b>\$350,000</b>	<b>5.13</b>	
<b>EXTERIORS</b>	<b>DM%</b>	<b># of Units</b>	<b>Per Unit</b>	<b>Total Cost</b>	<b>\$ PSF</b>	
Exterior Façade	50%	96	\$0	\$0	-	
Building Exterior Lighting	50%	96	\$0	\$0	-	Flood lights on buildings are good but there is no good lighting for the edges of the property
Other	25%	96	\$0	\$0	-	
<b>TOTAL EXTERIORS</b>	<b>0%</b>		<b>\$0</b>	<b>\$0</b>	<b>-</b>	
<b>CONTINGENCY</b>	<b>DM%</b>	<b>% of Cost</b>	<b>Per Unit</b>	<b>Total Cost</b>	<b>\$ PSF</b>	
Hard Cost Contingency	25%	5%	\$1,059	\$101,659	1.49	
Soft Cost Contingency	25%	10%	\$266	\$25,500	0.37	
<b>TOTAL CONTINGENCY</b>	<b>68%</b>		<b>\$1,325</b>	<b>\$127,159</b>	<b>1.86</b>	
<b>TOTAL RENOVATION COSTS</b>	<b>68%</b>		<b>\$22,504</b>	<b>\$2,160,338</b>	<b>\$31.67</b>	

B

Grant Agreement

EXHIBIT "B"

**DEED RESTRICTIONS**  
See Attached

**Grant Agreement**

C

**SUMMIT COUNTY, UTAH  
ORDINANCE NO. 950**

**AN ORDINANCE ADOPTING THE MODERATE INCOME HOUSING PLAN INTO THE SNYDERVILLE BASIN  
GENERAL PLAN**

**PREAMBLE**

**WHEREAS**, Utah Code Annotated (“UCA”) § 17-27a-401 requires that each county prepare and adopt a comprehensive, long-range general plan for present and future needs of the county and for growth and development of all or any part of the land within the unincorporated portions of the county; and

**WHEREAS**, House Bill 462, Utah Housing and Affordability Amendments was approved during the 2022 legislative session and requires Summit County to adopt a moderate-income housing element that provides a realistic opportunity to meet the need for additional moderate-income housing within the next five years; and

**WHEREAS**, the moderate income housing plan must be adopted into the General Plan by October 1, 2022; and,

**WHEREAS**, based on Summit County’s population, the county is required to include at least three or more (out of 23) strategies in the General Plan.

**WHEREAS**, because Summit County has adopted a small public transit district, one of the county’s three required strategies must include “Create a housing and transit reinvestment zone pursuant to Title 63N, Chapter 3, Part 6, Housing and Transit Reinvestment Zone Act.”

**WHEREAS**, In order to ensure that jurisdictions are establishing concrete steps to increase the stock of moderate-income housing, each jurisdiction must set a timeline to implement the strategies outlined in the moderate-income element; and,

**WHEREAS** the Snyderville Basin Planning Commission held three (3) public hearings and recommended adoption of the amended sections of the Snyderville Basin General Plan on August 23, 2022; and

**WHEREAS** the Summit County Council held a public hearing on September 14 & 19, 2022; and,

**NOW, THEREFORE**, the County Council of the County of Summit, State of Utah, ordains as follows:

**Section 1.** The Snyderville Basin General Plan is amended as depicted in Exhibit A.

**Section 2.** Effective Date: This Ordinance shall take effect immediately after publication.

Enacted this 19<sup>th</sup> day of Sept 2022.

COUNTY COUNCIL  
SUMMIT COUNTY, UTAH

by Christopher F. Robinson  
Chris Robinson, Chair

Councilmember Robinson voted  
Councilmember Clyde voted  
Councilmember Armstrong voted  
Councilmember Wright voted  
Councilmember Stevens voted

Aye  
Absent  
Nay  
Aye  
Aye

ATTEST:

Evelyn Furse  
Evelyn Furse, County Clerk, Summit County, Utah



**Approved as to form  
Summit County Attorney**

By [Signature]

# Chapter 6.1

## Moderate Income Housing Element

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### **INTRODUCTION**

*Rather than being monolithic, moderate-income housing is a multifaceted challenge for Summit County. It is tied closely to a variety of Snyderville Basin challenges including extremely high median housing costs; traffic congestion and legacy transportation issues; availability of sufficient local laborers; business challenges due to lack of access to labor; an increasingly non-diverse community; a shrinking number of full-time residents with long-term community and generational ties; increasing environmental degradation due to increasing development pressures; concerns about sustainability of air, land, and water natural resources; and the critical need to manage and limit rapid growth in a County that seeks to preserve open spaces, agricultural and cultural heritage (collectively, "Critical Concerns"). Accordingly, creating standards and strategies concerning moderate-income housing in this Chapter would be incomplete, ineffective, and potentially harmful to the vision and goals of this General Plan as well as the County Council's vision, values, and strategic goals without carefully evaluating the impacts of any such standards and strategies on the Critical Concerns to determine if they will aggravate or mitigate and provide solutions to those Critical Concerns. All such standards and strategies and the Critical Concerns should continually be evaluated given the dynamic nature of growth in and on the borders of the County.*

*The Summit County Manager, relevant staff as determined by the County Manager, and the County Council should regularly assess the County's moderate-income housing needs and seek to articulate where such housing is most appropriate and for whom the need is greatest at any given moment always taking into careful consideration the Critical Concerns ("Moderate-Income Housing Assessment"). A priority of any such assessment should seek to identify if housing challenges are creating significant labor shortages in critical areas such as law enforcement, emergency medical services, education, doctors and nurses and other health care professionals, and local government workforce. In addition, the Moderate-Income Housing Assessment should examine the needs of long-term resident seniors seeking to age in place in the County, vulnerable populations, as well as the County's tourism industry's workforce. With respect to tourism workforce, any strategies developed in this Chapter 6.1 should seek to require major employers to bear some of the burden of providing employees with housing opportunities as well as reasonable wages that take into account the high housing costs in resort counties much like the difference in wages paid in rural Utah compared to San Francisco, California.*

*External influences also need to be part of the Moderate-Income Housing Assessment, such as whether nightly rentals are removing long-term housing from the available housing capacity with a result of hollowing out formerly well-established neighborhoods, particularly outside of resort cores. Such assessment should consider*

any moderate-income housing permitted, platted, commenced and/or built since the prior Moderate-Income Housing Assessment. Careful consideration of where to locate housing is a fundamental question the Moderate-Income Housing Assessment needs to examine in each instance with a focus on the Critical Concerns. For example, building or incentivizing affordable housing in the Snyderville Basin for County workforce that work primarily in County offices in Coalville requires commuting, which the moderate-income housing plan should seek to reduce. In addition, approving a large ratio of market rate housing to obtain a smaller ratio of affordable housing exacerbates the dearth of affordable housing given the additional services and workers required to service the market rate housing, and should be avoided.

The critical questions of each Moderate-Income Housing Assessment should include: for whom, ideal location(s), transit and transportation access, trails access, and access to services to reduce commuting and car trips, as well an assessment of the state of each of the Critical Concerns. Those preparing the Moderate-Income Housing Assessment need to include specific metrics that are transparent, effective, and easy to understand that can be used to provide of positive or negative impacts that may be used by the County to adjust the goals and strategies contained in this Chapter 6.1.

With respect to any and all analyses and changes to land use regulations contained in this Chapter 6.1, the County should carefully consider the positive and negative impacts on each of the Critical Concerns to make sure any such changes are likely to reduce deficits identified in the Moderate-Income Housing Assessment and do not result in unintended consequences that negatively impact the Critical Concerns.

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**Moderate income housing is defined as: “Housing occupied or reserved for occupancy by households with a gross household income equal to or less than 80% of the median gross income for households of the same size in the county in which the housing is located.” However, given that the median gross income for the County is substantially higher than the national average, consideration should be given to requiring moderate-income housing that is targeted to lower median gross income depending upon the intended solutions sought as identified in the Moderate-Income Housing Assessment.**

**GOAL: Provide moderate-income housing opportunities that address the moderate-income housing needs identified in the Moderate-Income Housing Assessment, as updated in accordance with the Introduction of this Chapter. Due to already aggressive market rate housing growth pressures, it is essential that moderate-income housing does not come as a trade-off for additional market rate housing that may ultimately increase the moderate-income housing deficit due to the additional impacts created by the market rate housing and coincident infrastructure, services, and other needs that generate requirements for additional workforce. The primary goal should be meaningful reductions in existing deficits identified in the Moderate-Income Housing**

**Assessment.**

**OBJECTIVE A: Develop strategies to facilitate an adequate supply of moderate-income housing to reduce the identified deficits of housing in the Snyderville Basin for various moderate and low income groups living, working, or desiring to work in the Snyderville Basin, all as identified and prioritized in the Moderate-Income Housing Assessment, as updated, while minimizing negative impacts on the Critical Concerns.**

**The County shall measure demand and the County's progress toward meeting such demand through annual reporting, consistent with the requirements of Utah law.**

**STRATEGY A:** Identify possible changes to land use regulations including, Development Code amendments and zoning changes including, rezones and the creation of new zones, all narrowly tailored to further the purposes of this Chapter. All such changes should be targeted to creating appropriate densities necessary to facilitate the production of moderate-income housing to reduce housing deficits identified in the Moderate-Income Housing Assessment, as modified, while minimizing negative impacts on Critical Concerns. All such strategies should include well-crafted, understandable, and enforceable deed restrictions to ensure that all such moderate-income housing meets the goals of this Chapter over the long term.

*(Utah Code § 17-27a-403(2)(b)ii(A))*

**Implementation Measure 6.1.1:** Annually review, and amend as necessary, the Development Code moderate-income housing provisions relating to the Neighborhood Mixed Use Zone, Town Center Zone, and Resort Center Zone as necessary to meet the goals and strategies of this Chapter.

**Implementation Measure 6.1.2:** Commence a study to determine the suitability of using some or a portion of various County owned properties for moderate-income housing, to meet specific needs and deficits identified in the Moderate-Income Housing Assessment. Such study should take into consideration the Moderate-Income Housing Assessment as well as other important County needs and uses for such properties. Properties found suitable and appropriate for moderate-income housing development should be considered for moderate-income housing to meet deficits identified in the Moderate-Income Housing Assessment but in all instances any study must make findings concerning the impacts on Critical Concerns. No County property acquired as public open space or on which conservation easements have been granted shall be considered for the purposes contemplated

herein.

**Implementation Measure 6.1.3:** Review the current mixed-use zoning and density to determine whether the Moderate-Income Housing Assessment indicates that additional zones or rezones for higher density or moderate-income residential development in commercial or mixed use zones, commercial centers, or employment centers are required to achieve the purposes of this Section 6.1.

**Implementation Measure 6.1.4:** Within a year of the approval of the Summit County Moderate Income Housing Plan by the State of Utah, the Planning Commission should:

**6.1.4.1:** Review the General Plan to identify, plan, and possibly create additional neighborhood master planned development and/or redevelopment areas, if and as necessary, to relieve deficits identified in the Moderate-Income Housing Assessment, as updated, in accordance with this Chapter 6.1, and thereafter amend the General Plan accordingly. Note that such review should take into account such areas that the County has already identified in the Snyderville Basin as well as in Eastern Summit County; and

**6.1.4.2:** Review the Future Land Use Maps in Chapter 9 of the General Plan to identify and define specific densities that would be appropriate in mixed use areas to facilitate the deficits identified in the Moderate-Income Housing Assessment with careful consideration of negative and positive impacts on the Critical Concerns.

**Implementation Measure 6.1.5:** Within two years of the approval of the Summit County Moderate Income Housing Plan by the State of Utah, the Planning Commission should prepare and submit to the County Council an analysis of the benefits of creating a moderate-income housing zone district to address the deficits identified in the Moderate-Income Housing Assessment, with careful consideration of negative and positive impacts on the Critical Concerns as a critical part of such analysis.

**Implementation Measure 6.1.6:** Review land use regulations, and amend, as necessary to accomplish the goals and purpose of this Chapter 6.1, to allow for higher density of new moderate-income residential development in commercial or mixed-use zones near major transit investment corridors.

*(Utah Code § 17-27a-403(2)(b)ii(F))*

**Implementation Measure 6.1.7:** Continue to regularly review, and amend as necessary, the comprehensive long range Snyderville Basin Transportation Master Plan.

**Implementation Measure 6.1.8:** Create or allow for, and reduce regulations related to, internal and detached accessory dwelling units in residential zones including amending the Development Code, within one year, to add a definition of Internal Accessory Dwelling Unit that is consistent with State Code, and to modify regulations related to accessory dwelling units, both internal and detached, to facilitate their creation. Establish criteria whereby reduced parking requirements and removing the minimum land size required for detached accessory dwelling units, deed-restricted for workforce/employee housing.

*(Utah Code § 17-27a-403(2)(b)ii(E))*

**Implementation Measure 6.1.9:** Amend the Development Code, within one year, to require adequate bicycle parking requirements.

**Implementation Measure 6.1.10:** Amend land use regulations to allow for the development of Single Room Occupancy (SRO) housing, group homes, community housing, emergency shelter and transitional housing, and supported living facilities for the elderly and persons with special housing needs in residential zone districts, taking into consideration the proximity to public transportation, shopping, medical services, and other essential support services.

*(Utah Code § 17-27a-403(2)(b)ii(I))*

**STRATEGY B:** Identify and utilize county general fund subsidies or other sources of revenue to waive construction related fees that are otherwise generally imposed by the County for the construction or rehabilitation of moderate-income housing.

*(Utah Code § 17-27a-403(2)(b)ii(D))*

**Implementation Measure 6.1.11:** Maintain, and annually review, and amend as necessary, Development Code provisions regarding fee waivers for moderate-income housing units.

**Implementation Measure 6.1.12:** Maintain, and annually review, and amend as necessary, the fee in lieu of constructing moderate-income housing established in the Development Code.

**Implementation Measure 6.1.13:** Amend the Development Code, within one year, to allow fees in lieu that have been collected to

subsidize construction related fees for moderate-income housing on private property.

**STRATEGY C:** Implement zoning incentives for moderate-income units in new developments.

*(Utah Code § 17-27a-403(2)(b)ii(J))*

**Implementation Measure 6.1.14:** Amend the Development Code, within two years, to incentivize the creation of moderate-income housing units such as increased building height, reduced setbacks, reduced parking standards, and expedited building permit reviews.

**Implementation Measure 6.1.15:** Maintain the incentive community benefit criteria for incentive zoning for deed restricted moderate-income housing in the Town Center and Resort Center zone districts.

**Implementation Measure 6.1.16:** Amend the Development Code, within two years, to incentivize the creation of deed restricted affordable senior living communities for residents that are 55 years old or older.

**STRATEGY D:** Develop and implement measures that hold developers of moderate-income housing strategies accountable for the implementation of their strategies, actions, and results. Monitoring must be transparent with clear, easily understood metrics that enable the developers, elected officials, and the public to easily understand if and how progress is being made in implementing the strategy.

**Implementation Measure 6.1.17:** Require developers of moderate-income housing to file annual reports with reasonably detailed criteria that reports the compliance with applicable deed restrictions; create penalties for failure to comply with such deed restrictions and related enforcement mechanisms.

**Implementation Measure 6.1.18:** Create land use regulations that prohibit nightly rentals of any housing units that are created using any moderate-income housing incentives or pursuant to land use regulations created, amended, or modified to facilitate the creation of moderate-income housing.

**Implementation Measure 6.1.19:** Following receipt of the Annual Moderate Income Housing Reporting Form, establish a stakeholder committee that meets annually with the purpose of adopting and monitoring specific measures to be used when evaluating moderate-income housing projects.

**Implementation Measure 6.1.20:** Develop and implement a public engagement program to communicate, educate, and collaboratively problem solve issues related to creating moderate-income housing in appropriate areas.

**Implementation Measure 6.1.21:** Annually report the County's progress toward meeting the moderate-income housing demand as required by Utah law.

**Implementation Measure 6.1.22:** Annually review the number of moderate-income units entitled, permitted, and constructed against the Moderate-Income Housing Assessment, as updated.

**STRATEGY E:** Demonstrate creation of, or participate in, a community land trust program for moderate-income housing.

*(Utah Code § 17-27a-403(2)(b)ii(M))*

**Implementation Measure 6.1.23:** Study and implement the creation of a Summit County Housing Authority and/or regional housing authority, within one year.

**Implementation Measure 6.1.24:** Annually meet with local non-profit organizations who support the creation of and intend to ensure the long-term affordability of moderate-income housing to establish on-going cooperation and coordination and to maintain public/private partnerships.

**Implementation Measure 6.1.25:** Establish a stakeholder committee, within one year, comprised of local governments, community housing agencies, and residents to establish numerical goals and associated milestones to track and monitor progress of creating moderate-income housing and to uncover shortfalls.

**STRATEGY F:** Explore the establishment of a regional housing authority through joint agreement(s) with one or more other local political subdivisions for the purpose of combining resources to address common moderate income housing needs and challenges.

*(Utah Code § 17-27a-403(2)(b)ii(T))*

**Implementation Measure 6.1.26:** Facilitate discussions with local political subdivisions to enter into a joint agreement within two years.

**Implementation Measure 6.1.27:** Within two years, coordinate with local political subdivisions to accurately assess regional moderate-income housing needs, including a regional employment

study.

**Implementation Measure 6.1.28:** Within one year, coordinate with local political subdivisions in the development and implementation of regional moderate-income housing strategies.

**Implementation Measure 6.1.29:** Within one year, coordinate with local political subdivisions to identify local, state, and federal funding sources to create moderate-income housing through a regional housing authority or other forms of cooperation.

**STRATEGY G:** Demonstrate implementation of any other program or strategy to address the housing needs of residents of the county who earn less than 80% of the area median income, including the dedication of a local funding source to moderate-income housing or the adoption of a land use ordinance that requires 10% or more of new residential development in a residential zone be dedicated to moderate-income housing.

*(Utah Code § 17-27a-403(2)(b)ii(W))*

**Implementation Measure 6.1.30:** Maintain the requirement that all new residential development be required to develop or ensure the development of moderate income housing at a rate of twenty percent (20%) of the units in a development. The moderate income housing obligation shall continue to be met concurrently with the construction of market rate units.

**STRATEGY H:** Create a housing and transit reinvestment zone (HTRZ) pursuant to Title 63N, Chapter 3, Part 6, Housing and Transit Reinvestment Zone Act.

*(Utah Code § 17-27a-403(2)(b)ii(Q))*

**Implementation Measure 6.1.31:** Hold community public hearings to acquire input in the criteria that the County should consider in selecting a HTRZ within one year.

**Implementation Measure 6.1.32:** Amend the General Plan and Development Code to codify HTRZ criteria and establish zones where HTRZs are allowed within one year after the community public hearings are closed.

**Implementation Measure 6.1.33:** Establish a development permit application process for projects in the HTRZ within one year after the community public hearings are closed.

# COUNTY ATTORNEY MARGARET H. OLSON

## Criminal Division

PATRICIA S. CASSELL  
Chief Prosecutor

JOSEPH S. HILL  
Prosecutor

JANET ELLEDGE  
Prosecutor

BRAD BLOODWORTH  
Prosecutor



## Civil Division

DAVID L. THOMAS  
Chief Civil Deputy

HELEN E. STRACHAN  
Deputy County Attorney

RYAN P.C. STACK  
Deputy County Attorney

LYNDA VITI  
Deputy County Attorney

TO: Summit County Council

FROM: Margaret Olson, County Attorney  
Ted Walker, CJC Director

DATE: May 5, 2023

RE: Amendment to Chart of Positions for FIT Interviewer

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CJC of Summit County has received funding from the Attorney General's office with a match requirement for a Forensic Interviewer. The interviewer will conduct child interviews with children that are alleged to have experienced some form of maltreatment. This is a full time position that will be shared between Summit and Wasatch Counties. The initial funding provided for this state fiscal year (through June 30, 2023) has been provided by the Attorney General's office to the CJC of Summit County. The cost of benefits will be shared between Summit and Wasatch Counties. The position will be housed fifty percent of the time in Summit County and fifty percent of the time in Wasatch County with some flexibility depending on crisis or other needs. The use of a Forensic Interviewer has been proven to increase the quality of the interview which in turn has improved outcomes for prosecution and for the families involved. The Forensic Interviewer will also serve as an expert on the multi-disciplinary team regarding the interview process and also as an expert witness in court. The successful candidate will also be required to become a Forensic Interview Trainer within a year and share their expertise and knowledge statewide.

For the next fiscal year (July 1 2023) and ongoing, the position will be funded half from the Attorney General's office and half by the respective counties including benefits. The attached interlocal agreement specifies responsibilities for the current fiscal year. An additional agreement will need to be drafted for the upcoming fiscal year starting July 1. Our half of the half salary and benefits was approved in the County Attorney's Budget for 2023.

**Civil Division:** PO BOX 128 · 60 North Main Street · Coalville Utah 84017 · Telephone (435) 336-3206 · Facsimile (435) 336-3287

**Criminal Division:** 6300 Justice Center Road · Park City Utah 84098 · Telephone (435) 615-3828 · Facsimile (435) 608-4462

Email: (first initial)(last name)@summitcounty.org

**INTERLOCAL COOPERATIVE AGREEMENT  
BETWEEN  
SUMMIT COUNTY  
AND  
WASATCH COUNTY**

This Interlocal Cooperation Agreement ("Agreement") is entered into by and between **SUMMIT COUNTY**, a political subdivision of the State of Utah (hereinafter, "Summit"), and **WASATCH COUNTY**, a political subdivision of the State of Utah (hereinafter, "Wasatch"). Each is individually referred to as a "Party" and collectively as the "Parties."

**A. Purpose.**

The Agreement is entered into for the purpose of setting forth the duties and obligations of the Parties with respect to employment, financial obligations, and sharing of services of a Forensic Interviewer ("Interviewer.")

The Interviewer's duties will be to:

conduct forensic interviews with children, witnesses and vulnerable adults according to and in compliance with the established interview guidelines, state statute and the national accreditation forensic interview standards. The Interviewer serves as a forensic interview specialist and participates in multi-disciplinary team (MDT) case review meetings with allied professionals for criminal prosecution and protective action in child abuse cases; provides peer review for forensic interviewers on the CJC MDT; testifies as an expert witness; provides information to special victim's unit (SVU), prosecutors, judges and other criminal justice system and child protection personnel; communicates information to appropriate agency personnel to ensure follow through, and assists SVU prosecutors with case prep as needed and directed.

**B. Authority.**

This Agreement is entered into pursuant to Utah Code § 11-13-201 et seq., the Interlocal Cooperation Agreement Act.

**C. Summit Obligations.**

In furtherance of this Agreement, Summit will:

1. Advertise for and hire an Interviewer as a full-time Summit employee.
2. Utilize fifty percent of the Interviewer's work hours, approximately twenty (20) hours per week, and allot fifty percent of the Interviewer's work hours to Wasatch.
3. Pay the Interviewer's salary in full (Attachment A), using funds provided by the Attorney General's Office (Attachment B.)
4. Pay benefits associated with the position (Attachment A), subject to fifty percent reimbursement by Wasatch County.

5. Provide office space and appropriate training opportunities for the Interviewer.

#### **D. Wasatch's Obligations**

In furtherance of this Agreement, Wasatch will:

1. Utilize fifty percent of the Interviewer's work hours, approximately twenty (20) hours per week.
2. Reimburse Summit fifty percent of benefits paid by Summit to the Interviewer.
3. Provide office space and appropriate training opportunities for the Interviewer.

#### **E. Liabilities and Indemnification.**

1. Wasatch agrees and promises to indemnify and hold Summit its officers, agents, officials and employees, and volunteers harmless and release them for and from any liability, costs or expenses arising from any action, causes of action, claims for relief, demands, damages, expenses, costs, fees or compensation, whether or not said actions, causes of action, claims for relief, demands, damages, costs, fees, expenses, and/or compensation are known or unknown, are in law or equity, and without limitation, all claims of relief which can be set forth through a complaint or otherwise that may arise out of the acts or omissions, negligent or otherwise, of Wasatch and/or its officers, agents, officials, members, employees or volunteers.
2. Summit agrees and promises to indemnify and hold Wasatch, its officers, agents, officials and employees, and volunteers harmless and release them for and from any liability, costs, or expenses arising from any action, causes of action, claims for relief, demands, damages, expenses, costs, fees or compensation, whether or not said actions, causes of action, claims for relief, demands, damages, costs, fees, expenses, and/or compensation are known or unknown, are in law or equity, and without limitation, all claims of relief which can be set forth through a complaint or otherwise that may arise out of the acts or omissions, negligent or otherwise, of Summit and/or its officers, agents, officials, members, employees or volunteers.

#### **F. Governmental Immunity Act.**

Because both Parties are governmental entities under the Utah Governmental Immunity Act of Utah, Utah Code § 63G-7-101, et. seq., as amended, each Party is responsible and liable for any wrongful acts or negligence committed by its own officers, employees, or agents and neither Party waives any defense available to it under the Utah Governmental Immunity Act of Utah.

#### **G. Termination and Withdrawal.**

1. This Agreement shall be in effect for a period of one (1) year commencing on the date of the last signature to this Agreement, unless terminated earlier in accordance with this Agreement.
2. Either Party may terminate this Agreement, with or without cause, upon giving sixty (60) days written notice of the termination to the other Party

#### **H. Miscellaneous Provisions.**

1. A duly executed copy of this Agreement shall be filed with the keeper of records of each Party, pursuant to §11-13-209 of the Utah Interlocal Cooperation Act.
2. No separate legal entity is created by the terms of this Agreement. To the extent that this Agreement requires administration other than as set forth herein, it shall be administered by the Director or County Manager of each Party.
3. No real or personal property shall be acquired jointly by the Parties as a result of this Agreement unless this Agreement has been amended to authorize such acquisition. To the extent that a Party acquires, holds, or disposes of any real or personal property for use in the joint or cooperative undertaking contemplated by this Agreement, such Party shall do so in the same manner that it deals with other property of such Party.

**I. Third Party Beneficiaries.**

There are no intended third-party beneficiaries to this Agreement. It is expressly understood that enforcement of the terms and conditions of this Agreement, and all rights of action relating to such enforcement, shall be strictly reserved to the Parties, and nothing contained in this Agreement shall give or allow any claim or right of action by any third person under this Agreement. It is the express intention of the Parties that any person, other than the Party who receives benefits under this Agreement, shall be deemed an incidental beneficiary only.

**15. Execution in Counterparts.**

This Agreement may be executed in counterpart originals, all such counterparts constituting one complete executed document.

**16. Effective Date.**

This Agreement shall be effective as of the date of the last signature to this Agreement.

For Summit County:

Shayne Scott Dated: 4/6/2023  
Shayne Scott, County Manager

For Wasatch County:

Dustin Grabau Dated: 5/3/23  
Dustin Grabau, County Manager

Approved as to form: Lynda L. Viti  
Lynda L. Viti, Deputy County Attorney, Summit County

Approved as to form: Scott Sweat  
Scott Sweat, County Attorney, Wasatch County

**ATTACHMENT A**

<b>ITEM</b>	<b>AMOUNT</b>
Travel	<b>\$0</b>
Personnel	<b>\$0</b>
Equipment	<b>\$0</b>
Contract Services	<b>\$60,253</b>
<b>TOTAL</b>	<b>\$60,253</b>

- a. The forensic interviewer will receive the following salary and benefits:
  - Wage: \$30.00 an hour/\$62,400 per year
  - Benefits: (49% of wage)  $\$62,400 \times .49 = \$3,0576$  per year
  - Total: (wage + benefits) \$92,976 per year
  
- b. Totals for FY 23 (April 1 to June 30):
  - i. Salary:
    - $\$62400 / 12$  months = \$5,200 per month
    - $\$5200 \times 3$  months = \$15,600 per quarter
  - ii. Benefits
    - $\$30578 / 12$  months = \$2,548 per month
    - 2548 months = 7,644
  - iii. Total cost for FY 23 (assuming 3 months ending June 30) \$23,244
  
- c. Summit County will pay the interviewer's salary using funds provided by the Attorney General's Office (Attachment B.)
- d. Summit County will pay the interviewer's benefits, subject to 50% reimbursement from Wasatch County.



**ATTACHMENT B**  
**STATE OF UTAH**  
**CONTRACT AMENDMENT**

AMENDMENT # 1 To CONTRACT # 230479

TO BE ATTACHED TO AND MADE A PART OF the above numbered contract by and between the State of Utah, Utah Attorney General's Office referred to as State Entity and, Summit County, referred to as Contractor.

**THE PARTIES AGREE TO AMEND THE CONTRACT AS FOLLOWS:**

**1. Contract period:**

7/1/2022 (Original starting date)

6/30/2027 (Current ending date)

6/30/2027 **new ending date**

**2. Contract amount:**

\$43,893 (Current contract amount)

\$24,054 (Amendment amount)

\$67,947 **new contract amount**  
 add current amount to amendment amount

**3. Other changes: (attach other sheets if necessary):**

See attached Scope of Work for the addition of a forensic interviewer to serve Summit and Wasatch counties. See also attached interlocal agreement for details on this shared resource and the budget for the position.

**4. Effective Date of Amendment:** 4/03/2023

All other conditions and terms in the original contract and previous amendments remain the same.

IN WITNESS WHEREOF, the parties sign and cause the amendment to be executed.

**CONTRACTOR**

Shayne Scott 4/6/2023  
 Contractor's signature Date

Shayne Scott, County Manager  
 Type or Print Name and Title

**STATE**

[Signature] 4/6/23  
 Agency's signature Date

NA, Contractor is Gov't Entity  
 Director, Division of Purchasing Date

RECEIVED AND PROCESSED  
 BY DIVISION OF FINANCE 4/10/23

<u>Tracey Tabet</u> Agency Contact Person	<u>801 281-1202</u> Telephone Number	<u>                    </u> Fax Number	<u>ttabet@agutah.gov</u> Email
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**UTAH CJC ONSITE FORENSIC INTERVIEWER PROGRAM**  
**Scope of Work for Children's Justice Centers**

Utah Children's Justice Centers provide a safe environment where children can be interviewed regarding alleged abuse in a neutral, fact-finding manner. The Utah CJC Program has proven the efficacy of onsite forensic interviewers, and as part of its ongoing evaluation, the Program will specifically look at whether CJs/MDTs are maximizing the use of dedicated onsite interviewers.

The CONTRACTOR agrees to provide an onsite forensic interviewer who can perform the following functions and meet the following minimum qualifications:

**Functions/Responsibilities of the Interviewer**

As a primary duty, conduct forensic interviews of children and vulnerable adults according to protocol, including extended interview protocol when necessary.

Gather relevant background information from parents or caregivers, law enforcement and CPS. Provides debrief after interviews with parents/caregivers, law enforcement and CPS.

Establish and maintain teamwork and a cooperative working relationship with MDT.

Participate in team staffing.

Serve as forensic interview specialist in interagency meetings.

Provide forensic interview consultation for own MDT and statewide as needed.

Provide courtroom testimony on forensic interviews conducted and expert witness testimony if applicable.

Provide forensic interview related training and technical assistance to own MDT and statewide as needed.

Maintain knowledge of current research in the field of child forensic interviewing.

Facilitate peer review for MDT and statewide as needed.

Participate in peer review and have own interviews reviewed at least quarterly.

Perform other duties as required.

**Responsibilities of the Center**

The Center must have guidelines for the use of the onsite forensic interviewer, including:

Coordination with CPS and/or LE. The interviewer will conduct the interview, but all other aspects of the investigation remain the responsibility of the investigating agency.

Attendance/Observation of interview by CPS and/or LE and interaction by CPS and/or LE with family.

Process to be used in gathering information from the family/caregiver to avoid duplication

Policy mandating interviews be conducted at a CJC and instructions for interviews not conducted on the premises

### Chart of Fulltime Positions

Department	Position	2010 Fulltime	2011 Fulltime	2012 Fulltime	2013 Fulltime	2014 Fulltime	2015 Fulltime	2016 Fulltime	2017 Fulltime	2018 Fulltime	2019 Fulltime	2020 Fulltime	2021 Fulltime	2022 Fulltime	2023 Fulltime
<b>Animal Control</b>	Animal Control Administrator	1	1				1	1	1		1	1	1	1	1
	Field Supervisor	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Animal Control Officers	5	4	3	3	3	4	4	4	4	3	3	3	3	3
	Kennel Tech		1	1	1	1	2	2	2	2	2	2	2	2	2
<b>Subtotal</b>		7	7	5	5	5	8	8	8	7	7	7	7	7	7
<b>Assessor's Office</b>	County Assessor	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy Assessor	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Commercial Appraiser					1	1	1	1	1	1	0	0	0	0
	Appraisal Supervisor	1	1												
	Assoc Commercial Appraiser											1	1	1	1
	Appraiser/Software Spec	1	1	1	1	1	1	1							
	Deputy Appraisers	4	4	4	4	4	4	4	4	4	4	6	6	6	6
	Data Analyst														1
	CONVERT PT TO FT FOR 2023	Assessing Tech	2	2	2	2	2	2	2	3	3	3	1	1	1
	<b>Subtotal</b>		11	10	9	9	10	10	10	10	10	10	10	10	11
<b>Attorney's Office</b>	County Attorney	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Civil Attorney	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Civil Attorney	2	2	2	1	1	2	2	2	2	3	3	3	3	3
	Chief Prosecutor					1	1	1	1	1	1	1	1	1	1
	Prosecuting Attorneys	3	3	3	3	2	2	2	2	2	2	2	2	2	2
	Investigator	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Victim Advocate Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Victim Advocate	1													
	CJC Director								1	1	1	1	1	1	1
	<b>NEW REQUEST- MAY 2023</b> <b>(shared w/ Wastach County)</b>	Forensic Interview Specialist													
	Legal Secretary														
	Paralegal	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>Subtotal</b>		11	10	10	9	9	10	11	11	11	12	12	12	12	13
<b>Auditor's Office</b>	County Auditor	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy Auditor	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Financial Officer					1									
	Payroll Clerk							1	1	1					
	Management Analyst					1									
	Accountant	1	1	1	1										
	Auditing Tech	2	2	2	2	2	2	2	2	2	2	1	1	1	1
<b>Subtotal</b>		5	5	5	5	6	4	5	5	5	4	3	3	3	3
<b>Clerk's Office</b>	Clerk	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy Clerk	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Deputy Clerk	1	1	1	1	1	1	1	1	1	1	1	1	2	1
	Elections Clerk														1
<b>Subtotal</b>		3	3	3	3	3	3	3	3	3	3	3	3	4	4
<b>Community Development</b>	Comm Development Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Office Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Administrative Assistant													1	2
	Planning and Zoning Admin				1	1	1	1	1	1					
	Planning and Zoning Director										1	1	1	1	1
	Economic Development Spec														
	Planning Director														
	Project Coordinator	1	1	1	1	1	1	1	1	1	1	1	1	2	1
	Senior Planner				2	2	2	2	2	2	2	2	2	2	2
	Special Projects Manager				1	1									
	Principal Planner	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	County Planners	5	5	5	2	2	2	2	2	2	3	3	4	4	4
	Assistant County Planner	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Regional Transportation Planning Crd													1	
Code Enforcement Officer	1	1	1	1	1	1	1	1	1	1	1	1	2	2	
1 NEW FOR 2023	Permit Technician		1												1

### Chart of Fulltime Positions

Secretaries	2	2	2	2	2	2	2	2	2	2	2	2		
Chief Building Official	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Plan Examiner				1	1	1	1	1	1	1	1	1	1	1
Assistant Plan Examiner						1	1	1	1	1	1	1	1	1
Asst B.O./Supervising B.O.						1	1	1	1	1	1	1	1	1
Plan Exam/Asst Building Offic	1	1	1											
Building Inspectors	5	4	4	4	5	5	5	5	5	5	5	6	6	6
<b>Subtotal</b>	<b>20</b>	<b>20</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>22</b>	<b>22</b>	<b>22</b>	<b>23</b>	<b>23</b>	<b>26</b>	<b>26</b>	<b>27</b>

Chart of Fulltime Positions

Department	Position	2010 Fulltime	2011 Fulltime	2012 Fulltime	2013 Fulltime	2014 Fulltime	2015 Fulltime	2016 Fulltime	2017 Fulltime	2018 Fulltime	2019 Fulltime	2020 Fulltime	2021 Fulltime	2022 Fulltime	2023 Fulltime
County Manager's Office	County Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Assistant County Manager	1	1	1	1	1	1	1	1						
	Deputy County Manager									1	1	1	1	1	1
	Rural Affairs Assistant Manager									1	1				
	Commission Administrator														
	Executive Assistant								1	1	1	1	1	1	1
	Exec Assistant/Purch Admin														
	Special Projects Director	1													
	Economic Development/Housing Dir					1	1	1	1	1	1	1	1	1	1
	<b>New for 2023</b>	Economic Development Housing Administrator													
	Regional Transportation Planning Director													1	1
Converted Sr. Engineer pos	Regional Transportation Deputy Director														1
<b>New as of April 2023</b>	Transportation Deman Planning Manager														1
<b>New as of April 2023</b>	Bicycle Mechanic														1
	Sustainability Manager	1	1	1	1	1	1	1	1						
	Comm & Pub Affairs Spec				1	1	1	1	1	1	1				
	Office Manager	1	1	1	1	1	1								
	Financial Officer							1	1	1					
	Management Analyst						1	1							
	Risk & Procurement Administrator									1	1				
	Senior Citizen Cook										1	1			
	Receptionist	1													
	Historian	1	1	1	1	1	1	1	1	1	1				
	Administrative Assistant											1	1	1	1
	Fair Coordinator							1	1						
	Lands & Natural Resources Manager													1	1
<b>Added to Mgr - March 2023</b>	Special Events Manager									1	1	1			1
	Emergency Manager									1	1			1	1
	Grant Coordinator (Time-limited)														
	Secretary		1	1	2	1	1	1	1	1	1				
<b>Subtotal</b>		<b>7</b>	<b>6</b>	<b>6</b>	<b>8</b>	<b>8</b>	<b>11</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>10</b>	<b>5</b>	<b>7</b>	<b>8</b>	<b>13</b>
<b>Communication &amp; P. E.</b>	Director												1	1	1
	Deputy Director												1	1	1
<b>Mar 2023 - moved to Mgr</b>	Special Events Manager												1	1	1
	Outreach Specialist												1	1	1
<b>Subtotal</b>													<b>4</b>	<b>4</b>	<b>4</b>
<b>Engineering</b>	County Engineer	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Engineer	2	2	2	2	3	3	3	3	3	3	3	3	3	3
	Public Works Inspectors	2	2	2	2	2	2	2	2	2	2	2	2	3	3
	Engineering Tech						1	1	1	1					
	Code Enforcement Tech		1	1	1	1	1	1	1	1	1	1	1		
	Eng. Sec/Assistant Tech	1													
	Administrative Assistant				1	1	1	1	1	1	1	1	1	1	1
<b>Subtotal</b>		<b>6</b>	<b>6</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>
<b>Facilities Department</b>	Facilities Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Grounds Supervisor	1	1	1	1	1	1	1	1						
	Facilities Tech	1	1	1											
	Housekeeping Supervisor	1	1	1				1	1	1	1	1	1	1	1
	Housekeepers	5	5	4	5	5	5	4	5	6	6	6	6	6	6
	Maintenance Techs	2	2	2	2	2	2	2	2	3	3	3	3	4	4
<b>NEW FOR 2023</b>	Landscape Tech														1
	Office Manager							1	1	1	1	1	1	1	1
	Custodian			1	1	1	1	1							
<b>Subtotal</b>		<b>11</b>	<b>11</b>	<b>11</b>	<b>10</b>	<b>10</b>	<b>10</b>	<b>11</b>	<b>11</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>13</b>	<b>14</b>
<b>Finance</b>	Finance Officer										1	1	1	1	1
	Risk, Compliance & Procurement										1	1	1	1	1
	Accountant										1	1	1	1	1
	Accounts Payable										1	1	1	1	1
	Accounts Receivable										1	1	1	1	1

Chart of Fulltime Positions

	Payroll										1	1	1	1	1
<b>Subtotal</b>											6	6	6	6	6
<b>Health Department</b>	Health Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Deputy Health Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Business Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	BUDGET ANALYST													1	1
	Emergency Response Planner	1	1	1	1	1	1								
	Public Health Emergency Planner											1	1		
	Public Health Emergency Manager													1	1
New for 2023	MRC Coordinator														1
	Public Information Officer							1	1	1	1	0			
	Administrative Assistant	1	1	1	1	1	1	1	1	1	1	1	1	2	2
	Grant Coordinator (Time Limited)												1	1	1
	Epidemiologist													1	1
	WIC Director				1	1	1	1	1	1	1	1	1	1	1
	Clinical Assistant	4	4	4	2	3	3	3	3	3	4	4	4	4	4
	Clinical Aide														
	Environmental Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Environmental Health Admin							1	1	1	1	1	1	1	1
	Environmental Hth Scientist	2	2	2	2	4	4	4	4	4	5	5	5	5	5
	Sustainability Manager									1	1	1	1	1	1
	Sustainability Analyst (Time-limited)												1	1	1
	Behavioral Health Director										1	1	1	1	1
	Behavioral Health Budget Manager											1	1	1	1
	Behavior Health Program Specialist												1	1	1
	Nurse Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Nurse Practitioner	1	1	1	1	1	1	1	1	1					
	Public Health Nurse	4	3	3	3	3	3	3	3	3	4	4	4	4	4
	Public Health Nurse (Time-limited)													1	1
	Early Intervention Ser. Prov	1	1	1	1	1	1	1	1	1	1	1	1	2	2
	Early Intervention Interpret	1	1	1	1										
	Registered Dietician			1	1	1	1	1	1	1	1	1	1	1	1
Move from PT - FT	Occupational Therapist				1	1	1	1	1						1
	Speech Pathologist									1	1	1	1	2	2
	Prevention Director										1	1	1	1	1
	Health Promotions Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Health Educator	1	1	1	1	1	2	2	3	3	3	3	3	3	3
<b>Subtotal</b>		22	21	22	22	24	25	26	27	28	32	33	36	42	44

### Chart of Fulltime Positions

Department	Position	2010 Fulltime	2011 Fulltime	2012 Fulltime	2013 Fulltime	2014 Fulltime	2015 Fulltime	2016 Fulltime	2017 Fulltime	2018 Fulltime	2019 Fulltime	2020 Fulltime	2021 Fulltime	2022 Fulltime	2023 Fulltime	
<b>Heritage &amp; Arts</b> (Formerly Library)	Director											1	1	1	1	
	Museum Director											1	1	1	1	
	Library Director	1	1	1	1	1	1	1	1	1	1					
	Assistant Library Director	1	1													
	Information Serv Librarian										1					
	Youth Services Librarian	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Teen Services/Social Media Librarian											1	1	1	1	
	Technical Services Librarian	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Outreach Services Librarian	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Spanish Services Librarian	1	1	1	1	1	1	1	1	1	1					
	Branch Managers															3
	Branch Librarians	2	2	3	3	3	3	3	3	3	3	3	3	3	3	
	Office Manager															1
	Administrative Assistant	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Library Clerks	5	5	6	6	6	6	6	6	4	4	4	4	4	4		
<b>Subtotal</b>		<b>14</b>	<b>14</b>	<b>15</b>	<b>15</b>	<b>15</b>	<b>15</b>	<b>15</b>	<b>13</b>	<b>13</b>	<b>13</b>	<b>14</b>	<b>14</b>	<b>14</b>	<b>14</b>	
<b>Information Technology</b>	Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	I.T. Manager														1	
	LAN Administrator	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Network Security Engineer										1	1	1	1	1	
	Info Tech Specialists	4	4	3	3	3	3	3	3	3	2	2	2	3	3	
	GIS Coordinator						1	1	1	1	1	1	1	1	1	
	GIS Specialists	2	2	2	2	1	1	1	1	1	1	1	2	1	1	
	Multi-Media Coordinator													1	1	
	Web Administrator			1	1	1	1	1	1	1	1	1	1	1	1	
	Records Imaging Tech	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
<b>Subtotal</b>		<b>9</b>	<b>10</b>	<b>10</b>	<b>10</b>	<b>11</b>										
<b>Justice Court</b>	Judge	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Court Administrator				1	1	1	1	1	1	1	1	1	1	1	
	Senior Justice Clerk	1	1	1												
	Judicial Assistant	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
<b>Subtotal</b>		<b>5</b>														
<b>Personnel</b>	Director	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Benefits Administrator	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	HR Tech	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	1 NEW FOR 2023 Admin Specialist - Floater														1	
<b>Subtotal</b>		<b>3</b>	<b>4</b>	<b>5</b>												
<b>Public Works</b>	Public Works Administrator	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Deputy Public Works Director														1	
	Financial Analyst															
	Stormwater Manager											1	1	1	1	
	Stormwater Inspector											1	1	2	2	
	Public Works Superintendent															
	Weed Supervisor								1	1	1	1	1	1	1	
	Office Manager								1	1	1	1	1	1	1	
	Road Superintendent	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Area Supervisor													3	3	
	Project Foreman		2	2	2	2	2	2	2	2	2	2	2	2	2	
	Mechanics	2	2	2	2	2	2	2	1	1	1	1	1	1	1	
	Mechanic Tech								1	1	1	1	1	1	1	
	Administrative Assistant	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	Weed Control Lead	1	1	1	1	1	1	1								
	Equip Operator/Weed Spray									1	1	1	1	1	1	
	Equip Operator/Weed Enfor	2	1	1	1	1	1	1	1	1	1	1	2	2	2	
	Weed Enforcement Officer		1	1	1	1	1	1	1							
	Equipment Operators	13	11	11	12	12	15	15	15	15	15	15	15	14	15	
	Equip Operator/Storm Water	3	3	3	3	3										
Sign Technician	1	1	1	1	1	1	1	1	1	1	1	1	1	1		
<b>Subtotal</b>		<b>25</b>	<b>25</b>	<b>25</b>	<b>26</b>	<b>26</b>	<b>26</b>	<b>27</b>	<b>27</b>	<b>27</b>	<b>28</b>	<b>30</b>	<b>30</b>	<b>32</b>	<b>32</b>	

### Chart of Fulltime Positions

<b>Recorder's Office</b>	County Recorder	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy Recorder	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Survey Manager													1	1
	GIS Technician				1	1	1	1	1	1	1	1	1	1	1
	Senior Cadastral Mapper	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Cadastral Mapper													1	1
	Deputy Recorder	6	4	4	3	3	3	3	3	3	3	3	3	4	4
<b>Subtotal</b>		9	7	7	7	7	7	7	7	7	7	7	8	9	9
<b>Senior Citizens</b>	Senior Director												1	1	1
	Senior Cook												1	1	1
<b>Subtotal</b>												2	2	2	2
<b>Solid Waste</b>	Solid Waste Manager		1	1											
	Solid Waste Superintendent	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Solid Waste Foreman									1	1	1	1	1	1
	Landfill Operators	6	6	6	6	6	6	6	7	7	7	7	7	7	7
	Landfill Spotters	2	2	2	2	2	2	2	2	2	2	2	2	2	2
	Gate Attendant	1	1	1	1	1	1	1							
<b>Subtotal</b>		10	11	11	10	10	10	10	11	11	11	11	11	11	11
<b>Department</b>	<b>Position</b>	<b>2010 Fulltime</b>	<b>2011 Fulltime</b>	<b>2012 Fulltime</b>	<b>2013 Fulltime</b>	<b>2014 Fulltime</b>	<b>2015 Fulltime</b>	<b>2016 Fulltime</b>	<b>2017 Fulltime</b>	<b>2018 Fulltime</b>	<b>2019 Fulltime</b>	<b>2020 Fulltime</b>	<b>2021 Fulltime</b>	<b>2022 Fulltime</b>	<b>2023 Fulltime</b>
<b>Sheriff's Office</b>	Sheriff	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy	1	1					1	1	1	1	1	1	1	1
	Office Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Secretary	2	2	2	2	3	3	4	4	4	4	4	4	4	4
	Admin Assistant														4
	Emergency Manager										1	1	1	1	1
	Captain	3	1	2	1	1									1
	Admin Lieutenant								1	1	1	1	1	1	1
	Admin Sergeant											1	1	1	1
	Patrol Lieutenant		1	1	1	1	1	1	1	1	1	1	1	1	1
	Patrol Sergeants	6	4	5	5	5	5	5	5	5	5	5	5	5	5
	Patrol Lead Deputies	4	5	5	4	4									
	Deputies	18	15	14	14	15	19	19	19	19	19	23	23	22	24
	JRI Deputy								2	2	2	2	2	2	2
	Major Crime Lieutenant		1	1	1	1	1	1	1	1	1				
	Major Crime Sergeant		1	1	1	1	1	1	1	1	1	1	1	1	1
	Major Crime Detective		1	4	3	3	3	3	2	2	2	2	2	2	2
	Special Ops Lieutenant	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Special Ops Sergeant			2	1	1	1	1	1	1	1				
	Special Ops Deputies														
	Detective Sergeant	3	2												
	School Resource Sergeant											1	1	1	1
	Detectives	10	8	6	7	7	7	7	7	7	7	7	7	8	8
	Evidence Tech		1	1	1	1	1	1	1	1	1	1	1	1	2
	SAR Lieutenant											1	1	1	1
	Corrections Lieutenant	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Corrections Sergeant	4	4	4	5	5	5	5	5	5	5	5	5	5	5
	Corrections Lead Deputies	4	4	4	4	4									
	Corrections Officers	14	13	12	12	12	16	16	16	16	16	16	16	16	16
	Corrections Nurse			1	1	1	1	1	1	1	1	1	1	1	2
	Court Security Lieutenant		1	1	1	1	1	1	1	1	1	1	1	1	1
	Court Security Sergeant	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Court Security Lead Deputy	1	1	1	1	1									
Court Security Officer	6	6	6	7	7	8	8	8	8	8	8	8	8	8	
Inmate Working Deputies		2	2					2	2	2	2	3	3	3	
Kitchen Manager	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Cooks	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
Communications Director											1	1	1	1	
Dispatch Supervisor	1	1	1	1	1	1	1				2	2	2	2	
Communications Lieutenant								1	1						
Lead Dispatchers	2	2	2	2	2	2	2	2	2	4	4	4	4	4	
Admin Dispatcher											1	1	1	1	
Dispatchers	12	12	12	12	12	12	12	17	17	17	11	11	11	11	

### Chart of Fulltime Positions

<b>Subtotal</b>		99	97	98	95	97	97	102	107	107	112	113	113	117	117
<b>Treasurer's Office</b>	County Treasurer	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Chief Deputy Treasurer	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Deputy Treasurer	2	1	1	1	1	1	1	1	1	1	1	1	1	1
	Motor Vehicle Supervisor	1	1	1			1	1	1	1	1	1	1	1	1
	Motor Vehicle Tech	3	3	3	4	4	2	2	3	3	3	3	3	3	3
<b>Subtotal</b>		8	7	7	7	7	6	6	7	7	7	7	7	7	7
<b>Transit District</b>	Regional Transportation Plan Dir						1	1	1	1	1	1	1		
	Transportation Planner										1	1	2		
<b>ALL TRANSFER TO NEW ENTITY</b>	Data Analyst												1		
	Admin Technician												1		
	Transit Tech						1	1	1	1	2	2	2		
<b>Subtotal</b>							2	2	2	2	4	4	7	0	0
<b>USU</b>	Secretary	1	1	1	1	1	1	1	1	1					
<b>Subtotal</b>		1	1	1	1	1	1	1	1	1					
<b>Total FTE</b>		<b>286</b>	<b>278</b>	<b>277</b>	<b>276</b>	<b>284</b>	<b>293</b>	<b>303</b>	<b>309</b>	<b>312</b>	<b>326</b>	<b>332</b>	<b>344</b>	<b>355</b>	<b>367</b>
<b>11/4/2020</b>															



Chart of Part-time Positions

Department	Position	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
		Parttime																							
Public Works	Secretary				1	1	1	1																	
<b>Subtotal</b>		0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Senior Citizens	Senior Admin Assistant																					2	2	2	2
	Senior Assistant Cook																					1	1	1	1
<b>Subtotal</b>																						3	3	3	3
Solid Waste	Gate Attendants					2	2	2																	
	Landfill Operator	3	3	3	2	2																			
	Landfill Spotters						1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>Subtotal</b>		3	3	3	2	4	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0
Treasurer	Motor Vehicle Tech																2	2							
<b>Subtotal</b>		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2	0	0	0	0	0	0	0
<b>Totals</b>		17	16	16	18	25	25	24	20	19	28	28	27	22	25	30	32	31	30	32	31	31	31	32	29



## STAFF REPORT

TO: Summit County Council

FROM: County Auditor

DATE: May 4, 2023

RE: Action items for properties in the May 25<sup>th</sup> Tax Lien Sale

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### Summary

The annual tax sale will be held at 10:00 a.m. on May 25<sup>th</sup> this year by online auction via Public Surplus. As of the date of this Staff Report, there are 13 properties slated to be sold at auction. The total of all taxes, interest, and fees that will be owed as of 5/25/2023 is \$180,625.84.

Requesting council action on the following property:

Account	PARCEL	OWNER	Total due 5/25
0153571	PCA-89	BYER MAMIE L	\$ 59,506.38

### Information on PCA-89

This subject property has unpaid taxes, interest, and fees accruing from as far back as tax year 1999. Why this property is just coming to our attention and subject to tax sale is unknown to the current Auditor's office and legal council.

Initial notice of being subject to the 2023 tax sale was sent to the Mamie Byers successors on 3/31/2023. While the auditor office attempted to collect information about this account and the reason for the many years of past due taxes without payment or sale by the county at a prior tax sale, the Byers successors' legal counsel contacted our office. They express a desire to find a resolution and pay what they are responsible for considering the question of ownership and so forth.

The Byers quit paying taxes in 1999 on this property because of questions as to whether or not they still own the property after a Corrected Land Patent in 1995 and a purported conflict between PCA-89 and PCA-S-98. They have stayed current on payments for contiguous properties PCA-89-A and PCA-89-B.

Title searches are being completed on the subject property and will be reviewed before the 5/10 council meeting. It is suspected that there is a lack of legal access to the property.



Please see attached request from the Mamie Byers successors legal council for additional background information and details on reason for request. Email attachments referenced are also included. Additional requests are mentioned in this correspondence, however for the purpose of this staff report, we are focused on the following request.

**Action Requested**

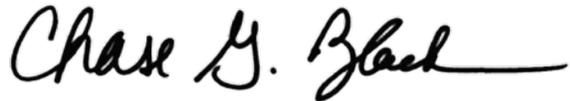
Withdraw PCA-89 from 2023 Tax sale to allow the Auditors Office and other county offices additional time to investigate the situation and come to an agreement with the owners.

Tax lien to remain in place on this property. The outstanding amount of taxes due will continue to accrue interest while the balance is unpaid or until an agreement has been made and approved. If the delinquent taxes for this parcel have not been brought current by the end of 2023, the County reserves the right to sell this property at the 2024 Tax Sale.

**Note on Other Properties**

There are a couple additional properties that are being investigated further. The Auditors Office may need to request that council "deadhead" the taxes or withdraw these properties from the 2023 sale. More information will be forthcoming if a discussion on these properties is needed.

Thank you for your consideration of these requests.

A handwritten signature in black ink that reads "Chase G. Black". The signature is written in a cursive style with a long horizontal flourish at the end.

Chase Black  
Chief Deputy Auditor

## Chase Black

---

**From:** Steve Lovell <steve@freemanlovell.com>  
**Sent:** Wednesday, April 26, 2023 10:23 PM  
**To:** Chase Black  
**Cc:** emmapc203@gmail.com; Julie Woolstenhulme  
**Subject:** PCA-89 Property Tax Notice  
**Attachments:** 1995 Corrected Land Patent.pdf; 1972 Original Land Patent.pdf; Tax Account PCA-89 Byer.pdf; Tax Account PCA-S-98 mining patent.pdf; REC Plat showing 4ac not included in Hidden Meadow and showing conflict.pdf; REC Plat of HIDDEN MEADOW SUB PHASE 1.pdf

Chase:

Thanks for taking my call today and for your willingness to look into this matter further. After our call, I called Julie Woolstenhulme at the County Recorder's office (cc'd) and gained a lot more valuable information about this unique situation. Here is a summary of the background along with my thoughts as to next steps:

1. John Byer purchased approximately 15 acres from the State of Utah in 1972 and he received a land patent for that purchase (see attached). John then passed away the following year in 1973.
2. Following John's probate, the property was vested in his surviving wife Mamie Byer's name. Mamie died in 1997 and the property has been in the estate ever since.
3. The property is identified in the county records as PCA-89, and my clients paid taxes on the property from 1972 until 1999 (27 years).
4. In September of 1995 the State of Utah issued and recorded a "Corrected" Land Patent (see attached) which purportedly removed the 4+ acres of PCA-89 from the Byers without notice or consideration. When Julie saw this, the recorder's decided not to change the ownership of PCA-89 due to the improper attempt to summarily strip land from the Byers at 23 years of ownership and paying taxes.
5. Also in 1995, a month before the recording of the Corrected Land Patent, the United Park City Mines Company ("UPCMC"), which was one of the largest landholders and real estate developers in Summit County (then owner of the land leased to Park City Resort and Deer Valley), finalized and submitted its plat to the County recorder for their new residential development called Hidden Meadow. What was interesting on their plat was that they claimed ownership to parcel PCA-89, but their claim in the county records is to parcel PCA-S-98. Due to the conflict in ownership, our wise county recorder's office refused to allow the Hidden Meadow plat to be recorded without the Byer's signature as the owners of PCA-89. Instead of fighting the issue, UPCMCM just amended their plat to remove PCA-89 from their plat. However, they had already caused the City to annex that parcel into the City AND rezone it to Residential Open Space, rendering it useless for the Byer's economic benefit without going through an almost impossible rezone process with the City.
6. Whether UPCMCM acquired their interest before or after the Byer's 1972 patent is still unknown, but what is known is that the Byer's paid taxes on that land for 23 years before it was summarily taken from them without consideration or reimbursement, and the Byer's continued to pay taxes on that property for an additional 5 years until 1999. At that point they did not know if they owned it and they did not want to keep paying taxes on it if they couldn't use it, develop it or sell it due to the open space rezone. So they just stopped paying taxes on it.
7. What is also interesting however is that UPCMCM was paying taxes on the property as well as Parcel PCA-S-98, so there was a time when the county was collecting taxes from two different sources for the same property. What is also interesting is the valuation of the property on UPCMCM's tax statement (\$30k) versus the Byer's tax statement (\$119k) (see attached statements).
8. UPCMCM has sold off most of their holdings (Park City, Deer Valley, etc...) and is now being operated by Kerry Gee. I haven't had a chance yet to contact Mr. Gee to see if UPCMCM still has any land holding and/or who might have purchased them, but it appears that they too are a few years behind on their taxes.

My goal is to make contact with Mr. Gee and inquire as to the status of UPCMC's interest in the property. Once I know that, I can make a determination as to next steps.

However, I would strongly urge the County to remove the property from the tax sale at this time due to the conflict between PCA-89 and PCA-S-98, which would only be further complicated by adding an additional innocent third party purchaser who would have no idea as to this conflict and the potential claims the county might have from the parties as a result.

I would also urge the County to reevaluate the county taxes being assessed against the property to match UPCMC's valuation.

I'm also attaching for your convenience the Hidden Meadow subdivision showing that the property was excluded (but still annexed and rezoned), and the section map showing the Byer's ownership, but also noting the conflict between PCA-89 and PCA-S-98.

And a very special thanks to Julie Woolstenhulme and her amazing memory that after 28 years can remember most of the facts and circumstances surrounding the Byer's situation (and others that were similarly mistreated).

I'll keep you posted on what I'm able to find out from Mr. Gee. But I hope to be able to resolve the conflict between PCA-89 and PCA-S-98 once and for all so that we can all move forward (hopefully at the lower taxable valuation ;)

Best,

-Steve

Schedule a meeting with me [HERE](#)



Steven R. Lovell | Partner  
Freeman | Lovell, PLLC  
9980 South 300 West, Suite 200  
Sandy, Utah 84070  
Office: (385) 355-4826  
Mobile: (801) 214-4826  
[www.freemanlovell.com](http://www.freemanlovell.com)  
[steve@freemanlovell.com](mailto:steve@freemanlovell.com)

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Circular 230 Disclaimer: To ensure compliance with Treasury Regulations governing written tax advice, please be advised that any tax advice included in this communication, including any attachments, is not intended, and cannot be used, for the purpose of avoiding any federal tax penalty, or promoting, marketing, or recommending any transaction or matter to another person.

Entry No. 117249 Book M 41  
 RECORDED 10-13-72 at 1:16 M Page 548-9  
 REQUEST of John Byer  
 FEE 3.00 WANDA M. S. COO, SUMMIT CO. RECORDER  
 INDEXED 5 By Wanda S. Coe No. 18487  
 ABSTRACT

**To All to Whom These Presents Shall Come, Greeting:**

WHEREAS, JOHN BYER  
PARK CITY  
 of the County of SUMMIT State of UTAH heretofore purchased from  
 the State of Utah, the lands hereinafter described, pursuant to the laws of said State in such case made and provided,

AND WHEREAS, the said JOHN BYER  
 has paid for said lands, pursuant to the conditions of said sale, and the laws of the State duly enacted in relation thereto, the  
 sum of Two Thousand One Hundred Twenty-four and No/100 (\$2,124.00) Dollars,  
 and all legal interest thereon accrued, as fully appears by the certificate of the proper officer, now on file in the office of the Secretary  
 of State of the State of Utah;

NOW THEREFORE, I CALVIN L. RAMPTON, Governor, in consideration of the premises,  
 and by virtue of the power and authority vested in me by the laws of the State of Utah, in such case made and provided, do issue  
 this PATENT, in the name and by the authority of the State of Utah, hereby granting and confirming unto the said  
JOHN BYER

and to his heirs and assigns  
 forever, the following piece or parcel of land, situate in the County of Summit State aforesaid.  
 to-wit: East Half (E½) Southwest Quarter (SW¼) Southwest Quarter (SW¼) Section Two (2) Township Two (2)  
South, Range Four (4) East, Salt Lake Base and Meridian.

(Reserving to the State of Utah, all coal and other  
 minerals, in the above lands, and to it, or persons  
 authorized by it, the right to prospect for, mine and  
 remove coal and other minerals from the same, upon  
 compliance with the conditions and subject to the limita-  
 tions of Title 65, Chapter 1, Utah Code Annotated  
 1953, and amendments thereto.

Rights of way for canals, ditches, tunnels, telephons and trans-  
 mission lines controlled by authority of the United States hereby  
 reserved. U. S. Act, Aug. 30, 1950 (65 Stat. 591); 45 - 2 - 3 Utah  
 Code Annotated 1953.

BOOK M 41 PAGE 548

containing Eleven and 80/100 (11.80) acres according to the said certificate.

TO HAVE AND TO HOLD the above described and granted premises unto the said JOHN BYER

and to his

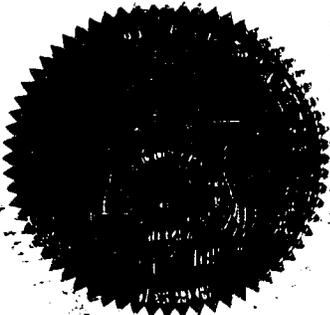
heirs and assigns forever, subject to any easement or right of way of the public, to use all such highways as may have been established according to law, over the same or any part thereof, and subject also to all rights of way for ditches, tunnels, and telephone and transmission lines that may have been constructed by authority of the United States.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the great seal of the State of Utah to be hereunto affixed.

Done at Salt Lake City, this 4th day of January in the year of our Lord,

one thousand nine hundred and Seventy-two, and of the independence of the United States of America the one hundred and 96th and in the 77th year of the State of Utah.

By the Governor:



Lytle L. Miller  
Secretary of State.

Carl H. [Signature]

Charles [Signature]  
Executive Secretary, Land Board  
Director of the Division of State Lands

Recorded Patent Book 36 Page 411

Certificate of Sale No. 23956

APPROVED AS TO FORM:

VERNON B. ROMNEY  
ATTORNEY GENERAL

By [Signature]

BOOK M41 PAGE 549

00437019 B:00906 Pa00676-00677

ALAN SPRIGGS, SUMMIT COUNTY RECORDER  
1995 SEP 08 16:56 PM FEE \$12.00 BY MAT  
REQUEST: STATE OF UTAH SCHOOL & INDUST T

**CORRECTED STATE OF UTAH PATENT NO. 18487**

WHEREAS, JOHN BYER of Park City, Utah, heretofore purchased from the State of Utah, the lands hereinafter described, pursuant to the laws of said State,

AND WHEREAS, the said JOHN BYER has paid for said lands, pursuant to the conditions of said sale, and the laws of the State duly enacted in relation thereto, the sum of Two Thousand One Hundred Twenty-four and No/100 Dollars (\$2,124.00) and all legal interest thereon accrued, as fully appears by the certificate of the proper officer, now on file in the office of the Lieutenant Governor of the State of Utah;

NOW THEREFORE I, MICHAEL O. LEAVITT, Governor, by virtue of the power and authority vested in me by the laws of the State of Utah, do issue this CORRECTED PATENT, in the name and by the authority of the State of Utah, hereby granting and confirming unto the said JOHN BYER and to his heirs and assigns forever, the following tract or parcel of land, situated in the County of Summit, State of Utah, to-wit:

Township 2 South, Range 4 East, SLB&M

Section 2: Beginning at the SE corner of the SW $\frac{1}{4}$ SW $\frac{1}{4}$  of Section 2, T2S, R4E, SLB&M; thence running West along the section line 78.49 feet, more or less, to the East end line of a patented mining claim, Clegg #2, (Survey #6792), thence North 39°45' West 372.80 feet, more or less, thence North 41°00' West 645 feet to the Northeast corner of a patented mining claim, Clegg #1, (Survey #6792); thence running North 53°33' East 920 feet, more or less, to the quarter line, thence South 1320 feet, more or less, to the point of beginning.

Containing 11.85 acres, more or less.

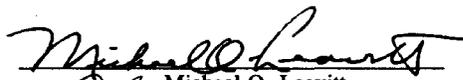
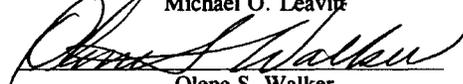
TO HAVE AND TO HOLD the above described and granted premises unto the said JOHN BYER and to his heirs and assigns forever, subject to any valid, existing easement or right of way of any kind and any right, interest, reservation or exception appearing of record, and subject also to all rights of way for ditches, tunnels, and telephone and transmission lines that have been or may be constructed by authority of the United States as provided by Statute. There is reserved to the State all coal and other mineral deposits, along with the right for the State or other authorized persons to prospect for, mine, and remove the deposits as provided by statute.

1200

Corrected Patent No. 18487  
Page Two

IN TESTIMONY WHEREOF, I have caused the great seal of the State of Utah to be hereunto affixed. Done at Salt Lake City, this twenty-second day of August in the year of our Lord, one thousand nine hundred and ninety-five, and of the independence of the United States of America the two hundred and twentieth, and in the one hundredth year of the State of Utah.

By the Governor:

  
Michael O. Leavitt  
  
Olene S. Walker  
Lieutenant Governor

  
Scott Hirschi, Director  
School and Institutional  
Trust Lands Administration

APPROVED AS TO FORM  
Jan Graham  
Attorney General

By   
Frederick P. McBrier  
Assistant Attorney General

Recorded Patent Book 36 Page 411-A

Certificate of Sale No. 23956

00437019 Bk00906 Ps00677



TABLE B

Table with 4 columns: LOT #, SQUARE FEET, MAXIMUM FLOOR AREA, MAXIMUM SITE DISTURBANCE. Lists lots 1 through 45 with their respective areas.

TRAIL EASEMENT LINE TABLE

Table with 3 columns: LINE, DIRECTION, DISTANCE. Lists trail easement lines 11 through 116.

EASEMENT LINE TABLE with 3 columns: LINE, DIRECTION, DISTANCE. Lists easement lines 1 through 13.

EASEMENT CURVE TABLE with 4 columns: CURVE, RADIUS, LENGTH, DELTA. Lists easement curves EC1 through EC15.

CURVE TABLE with 4 columns: CURVE, ARC, DELTA, PADJES. Lists curves C1 through C47.

LEGEND and additional tables. Includes symbols for survey monuments, ROS, C/L, and street addresses. Also includes a scale bar and north arrow.

GENERAL NOTES: 1. A Declaration of Covenants, Conditions and Restrictions is recorded concurrently herewith. All development within the Hidden Meadow Subdivision is subject to said Declaration...

13. Lot owner/s constructing dwellings with any portion of the structure greater than 150 feet from the public way may be required by the City to install and connect a dry stand pipe...

HIDDEN MEADOW SUBDIVISION PHASE 1

A SUBDIVISION LOCATED IN SECTIONS 10 AND SECTION 11, TOWNSHIP 2 SOUTH, RANGE 4 EAST, SALT LAKE BASE AND MERIDIAN.

RECORDED #456642 STATE OF UTAH COUNTY OF SUMMIT AND FILED AT THE REQUEST OF COALITION TITLE CO. DATE 9-1-95 TIME 17:00 PM BOOK PAGE 139.00 FEE RECORDER

SUNRIDGE  
ROS PARCEL 4  
90.36 ACRES

SUNRIDGE  
ROS PARCEL 4  
90.36 ACRES

TABLE B

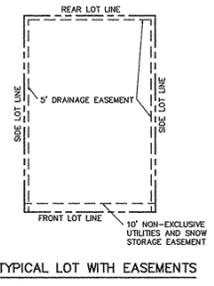
LOT #	SQUARE FEET	MAXIMUM FLOOR AREA	MAXIMUM SITE DISTURBANCE
LOT 1	77,447 S.F.	8,500 S.F.	12,000 S.F.
LOT 2	54,540 S.F.	7,250 S.F.	10,000 S.F.
LOT 3	49,336 S.F.	7,250 S.F.	10,000 S.F.
LOT 4	81,390 S.F.	8,500 S.F.	12,000 S.F.
LOT 5	157,921 S.F.	10,000 S.F.	14,000 S.F.
LOT 6	74,821 S.F.	8,500 S.F.	12,000 S.F.
LOT 7	55,352 S.F.	7,250 S.F.	10,000 S.F.
LOT 8	64,921 S.F.	7,250 S.F.	10,000 S.F.
LOT 9	81,303 S.F.	8,500 S.F.	12,000 S.F.
LOT 10	281,972 S.F.	10,000 S.F.	16,000 S.F.
LOT 11	122,989 S.F.	10,000 S.F.	16,000 S.F.
LOT 12	80,180 S.F.	8,500 S.F.	12,000 S.F.
LOT 13	81,338 S.F.	8,500 S.F.	12,000 S.F.
LOT 14	76,228 S.F.	8,500 S.F.	12,000 S.F.
LOT 15	64,790 S.F.	7,250 S.F.	10,000 S.F.
LOT 16	58,077 S.F.	7,250 S.F.	10,000 S.F.
LOT 17	49,379 S.F.	7,250 S.F.	10,000 S.F.
LOT 18	74,275 S.F.	8,500 S.F.	12,000 S.F.
LOT 19	78,392 S.F.	8,500 S.F.	12,000 S.F.
LOT 20	130,330 S.F.	10,000 S.F.	14,000 S.F.
LOT 21	128,150 S.F.	10,000 S.F.	14,000 S.F.
LOT 22	98,309 S.F.	10,000 S.F.	14,000 S.F.
LOT 23	118,896 S.F.	10,000 S.F.	14,000 S.F.
LOT 24	125,517 S.F.	10,000 S.F.	14,000 S.F.
LOT 25	80,976 S.F.	8,500 S.F.	12,000 S.F.
LOT 26	186,994 S.F.	10,000 S.F.	16,000 S.F.
LOT 27	90,053 S.F.	10,000 S.F.	14,000 S.F.
LOT 28	60,918 S.F.	7,250 S.F.	10,000 S.F.
LOT 29	64,391 S.F.	7,250 S.F.	10,000 S.F.
LOT 30	48,547 S.F.	6,000 S.F.	10,000 S.F.
LOT 31	43,069 S.F.	6,000 S.F.	10,000 S.F.
LOT 32	39,189 S.F.	6,000 S.F.	10,000 S.F.
LOT 33	39,308 S.F.	6,000 S.F.	10,000 S.F.
LOT 34	41,201 S.F.	6,000 S.F.	10,000 S.F.
LOT 35	45,723 S.F.	7,250 S.F.	10,000 S.F.
LOT 36	37,722 S.F.	6,000 S.F.	10,000 S.F.
LOT 37	42,690 S.F.	6,000 S.F.	10,000 S.F.
LOT 38	42,063 S.F.	6,000 S.F.	10,000 S.F.
LOT 39	37,052 S.F.	6,000 S.F.	10,000 S.F.
LOT 40	44,458 S.F.	7,250 S.F.	10,000 S.F.
LOT 41	25,535 S.F.	6,000 S.F.	10,000 S.F.
LOT 42	39,381 S.F.	6,000 S.F.	10,000 S.F.
LOT 43	75,089 S.F.	8,500 S.F.	12,000 S.F.
LOT 44	98,348 S.F.	10,000 S.F.	14,000 S.F.
LOT 45	57,471 S.F.	7,250 S.F.	10,000 S.F.

LINE TABLE

LINE	BEARING	DISTANCE
L1	N 37°30'00" W	11.00
L2	S 88°18'30" E	45.87
L3	N 88°18'30" W	21.64
L4	N 88°18'30" W	39.81
L5	N 88°18'30" E	22.43
L6	S 36°02'00" E	61.23
L7	S 36°02'00" W	11.53
L8	S 73°33'21" E	6.96
L9	S 73°33'21" E	48.14
L10	N 57°32'31" W	26.14
L11	N 57°32'31" W	24.09
L12	N 33°58'31" E	23.88
L13	N 22°13'13" E	12.19
L14	N 22°13'13" E	26.43
L15	S 22°13'13" W	26.50
L16	S 22°13'13" W	13.11
L17	N 12°17'11" W	18.83
L18	N 57°32'31" E	40.00
L19	N 57°32'31" E	28.53
L20	N 30°04'47" E	35.50
L21	N 30°04'47" E	126.46
L22	N 29°28'09" E	61.81
L23	N 88°18'30" W	128.38
L24	S 22°13'13" W	12.11
L25	N 22°13'13" E	13.19
L26	N 57°32'31" W	24.09
L27	N 30°04'47" E	11.53
L28	S 36°02'00" E	11.53
L29	S 73°33'21" E	5.06
L30	N 88°18'30" E	61.23
L31	N 57°32'31" E	96.64
L32	N 57°32'31" E	86.38
L33	N 57°32'31" E	51.45
L34	N 57°32'31" E	13.74
L35	N 42°58'45" E	61.47
L36	N 42°58'45" E	13.74
L37	N 88°18'30" E	26.21
L38	N 88°18'30" E	126.46
L39	N 88°18'30" E	127.00
L40	N 88°18'30" E	58.46
L41	N 88°18'30" E	69.00
L42	N 88°18'30" E	58.33
L43	N 88°18'30" E	69.88
L44	N 42°58'45" E	126.46
L45	N 42°58'45" E	66.57

CURVE TABLE

CURVE	ARC	DELTA	RADIUS
C1	39.65	10°48'16"	173.79
C2	138.07	43°33'31"	173.79
C3	13.37	6°48'37"	113.00
C4	167.75	89°02'46"	113.00
C5	22.90	11°26'11"	113.00
C6	38.98	19°45'58"	113.00
C7	99.30	59°20'56"	113.00
C8	195.36	49°55'20"	113.00
C9	29.37	6°43'59"	173.79
C10	36.01	5°14'16"	801.86
C11	29.91	3°54'50"	501.86
C12	11.28	1°39'44"	176.11
C13	38.60	12°33'58"	176.11
C14	144.89	47°06'17"	176.11
C15	1.92	0°27'17"	176.11
C16	80.73	37°03'59"	140.00
C17	31.37	12°07'23"	140.00
C18	90.28	39°26'46"	140.00
C19	53.90	17°08'48"	650.00
C20	52.80	43°04'44"	650.00
C21	46.92	2°36'25"	650.00
C22	196.49	29°22'47"	440.00
C23	43.38	12°38'56"	440.00
C24	19.31	7°02'20"	15.00
C25	23.38	8°07'46"	15.00
C26	128.88	13°14'44"	508.00
C27	148.10	15°21'44"	508.00
C28	15.07	4°55'56"	15.00
C29	23.84	7°28'50"	50.00
C30	99.48	11°37'11"	50.00
C31	64.49	9°48'16"	50.00
C32	39.83	4°24'51"	50.00
C33	14.24	5°02'22"	15.00
C34	164.87	18°38'36"	508.00
C35	85.25	7°39'48"	508.00
C36	21.87	3°03'12"	15.00
C37	15.98	6°10'12"	15.00
C38	170.01	17°40'12"	201.21
C39	39.03	5°02'56"	201.21
C40	13.82	5°01'12"	15.00
C41	64.68	7°23'46"	50.00
C42	51.68	5°27'27"	50.00
C43	48.44	5°20'33"	50.00
C44	88.58	8°07'46"	50.00
C45	13.82	5°20'12"	15.00
C46	110.58	12°38'18"	501.21
C47	77.79	7°39'12"	501.21
C48	22.98	8°46'18"	15.00
C49	120.27	50°20'58"	138.00
C50	98.79	7°39'12"	501.86
C51	97.66	5°28'14"	501.86
C52	166.77	83°57'52"	151.21
C53	140.00	47°15'51"	170.00
C54	151.51	51°03'32"	170.00
C55	181.33	42°23'27"	165.00
C56	38.44	12°39'16"	165.00
C57	44.88	62°28'20"	164.33
C58	159.66	83°37'56"	164.33
C59	157.47	13°22'00"	675.00
C60	118.94	10°29'46"	675.00
C61	13.05	4°01'06"	18.00
C62	52.20	59°48'49"	50.00
C63	45.48	49°40'26"	50.00
C64	13.05	4°01'06"	18.00
C65	47.10	33°53'31"	675.00
C66	38.02	4°29'56"	675.00
C67	14.24	5°27'20"	15.00
C68	86.79	8°27'20"	50.00
C69	14.24	5°23'20"	15.00
C70	133.14	7°31'18"	164.33
C71	130.86	7°49'33"	164.33
C72	20.20	7°18'37"	15.00
C73	106.40	36°26'49"	185.00
C74	158.28	42°23'31"	2075.00
C75	50.62	13°00'00"	2075.00
C76	115.19	46°14'33"	142.73
C77	114.39	45°55'16"	142.73
C78	149.18	89°06'43"	82.73
C79	128.31	32°27'20"	2128.00
C80	81.31	20°58'48"	2128.00
C81	82.79	43°31'44"	1041.68
C82	121.47	84°07'31"	1041.68
C83	23.92	87°44'00"	15.00
C84	163.45	47°06'47"	201.51
C85	28.22	10°05'48"	15.00
C86	119.00	42°57'10"	148.20
C87	42.83	42°12'06"	625.00
C88	21.80	8°16'50"	15.00
C89	73.77	43°39'02"	1029.33
C90	266.18	232°14'48"	650.00
C91	44.08	33°33'00"	650.00
C92	262.32	291°08'52"	516.60
C93	73.52	84°14'37"	50.00
C94	48.67	7°38'28"	201.51



TYPICAL LOT WITH EASEMENTS

NOTE:  
NO CONSTRUCTION SHALL OCCUR ON  
ADJOINING PROPERTY UNTIL HIDDEN  
MEADOW PHASE 2 SUBDIVISION PLAT  
IS RECORDED.

EASEMENT CURVE TABLE

CURVE	RADIUS	LENGTH	DELTA
E01	250.00	20.39	24°02'31"
E02	150.00	15.00	18°00'00"
E03	15.00	20.61	78°42'31"
E04	207.21	41.38	11°43'00"
E05	15.00	21.31	81°32'29"
E06	120.00	48.42	23°35'55"
E07	70.00	38.79	12°53'49"
E08	170.00	30.18	10°10'14"
E09	142.73	24.30	09°45'13"
E10	13.05	14.44	07°00'11"
E11	142.73	17.93	07°11'46"
E12	508.08	10.00	01°07'26"
E13	10.01	10.01	01°07'26"
E14	403.72	107.11	15°12'01"
E15	50.00	15.27	17°29'26"

GENERAL NOTES:

- A Declaration of Covenants, Conditions and Restrictions is recorded concurrently herewith. All development within the Hidden Meadow Subdivision is subject to said Declaration and the Land Management Code of Park City Municipal Corporation. All Final Conditions of Approval as ratified on December 15, 1993 are in full force and effect. All Conditions of the Amended Agreement dated March 5, 1995 also are in effect.
- Unless noted otherwise by definition of a rear limits of disturbance line the minimum required setbacks from property lines shall be 25 feet front, 20 feet side, and a 15 foot rear, except on Lots 4 through 25 where the rear setback will be computed from the limits of disturbance line. A 30 foot setback from the Center Line of the existing power line is required on the affected lots.
- The Declaration of Covenants, Conditions, and Restrictions create an "Architectural Committee". No improvements of any kind, including without limitation the construction of any dwelling unit, barn, garage, out building, or addition to any of them, or any parking area, driveway, tennis court, walkway, or other hard surfaced area in excess of 100 square feet, swimming pools, outdoor hot tubs or spas, fences, walls, curbs, flag poles, trampolines, satellite dishes or antennas, solar panels or any other permanent structure may be constructed, erected, or installed in the Subdivision without written approval of the Hidden Meadow Architectural Committee.
- The maximum floor area of homes constructed on Hidden Meadow lots shall be governed by the table shown herein. Additionally, this table establishes the maximum allowable area to be disturbed during construction of home and yard improvements. This area of disturbance is exclusive of the driveway improvements. Any deviations from maximum site disturbance allowed for each lot may and must be reviewed and approved by the Park City Community Development Department and the Hidden Meadow Architectural Committee.
- Driveway access from the public way to the Building Zone must be specifically approved by the Hidden Meadow Architectural Committee. Each Lot Owner, at his/her sole expense shall construct the driveway/abandonment/curb intersection to comply with applicable Park City Municipal Corporation Specifications.
- Unless noted otherwise a 10 foot wide non-exclusive public utility and snow storage easement is hereby dedicated along all front lot lines. A five foot wide drainage easement is hereby dedicated along all side lot lines.
- The Limits of Disturbance Line shown on Lots 4 through 25 indicates a non-disturbance zone within the Lot which expressly prohibits the construction of pools, tennis courts, gazebos, or any other structures or facilities.
- Park City ordinances in effect at the time of approval of Hidden Meadow Subdivision require payment of substantial water development and water connection fees at the time of building permit issuance. Park City does not allow snow until such time as 50% of the lots have legally occupied single family dwellings. The total cost of snow removal until that time is substantial.
- Owners of downhill lots may encounter difficulty in designing a home with gravity flow to the sanitary sewer laterals. Owners of such lots at their sole expense, will be required to install private individual ejector systems. Lot 25 will require an ejector system.
- The Lot owner shall identify and maintain historic drainage channels (if any) in conjunction with construction on the property.
- The maximum Floor Area for Dwellings in the Subdivision, including the area of any Accessory Dwelling Unit, is set forth in the Declaration of Covenants, Conditions, and Restrictions and on the table herein.
- The City requires that a modified type 130 fire sprinkler system as per Park City's Modifications be installed in all residences constructed in the Hidden Meadow Subdivision.
- Lot owner's constructing dwellings with any portion of the structure greater than 150 feet from the public way may be required by the City to install and connect a dry stand pipe from the edge of the public roadway to the fire sprinkler system within the dwelling. The residences shall be constructed to conform to the Park City's Modified 130' fire protection standards including, but not limited to interior and exterior sprinkler heads, and a fire retardant roof.
- The 30 foot wide back lot public sewer easement shown on Lots 24 and 25 provides Sycamore Basin Sewer Improvement District with a right-of-access to said back lot sewer including ingress or egress along any reasonable route of access for the purpose of maintenance, operation, repair, or eventual replacement.
- Trail easements are provided for the trails as delineated on sheets 1 of 3 in the Recreation Open Space Areas.
- Special Restrictions on Some Lots. As a condition of approval by the city, additional restrictions have been imposed on some of the lots:
  - On Lots 4, 5, 9, 10, and 11, no more than 35% of the gross floor area, exclusive of the garage, will be above the ground level story. The ground level story shall be defined as finished grade. The maximum Dwelling Height will be 25 feet to the midpoint of the roof and 28 feet to the ridge line. Measurement standards are defined in the Park City Land Management Code.
  - On Lots 10 and 11, the front yard setback will not exceed 100 feet from the front lot line.
- The 30' power line easement shown on the plat contains a power line which is overhead at the time of plot recordation and is intended to remain overhead.
- Fox Trail and Solomere Drive are to be formed to become a heavily traveled collector road, provided lands to the East are duly annexed.
- No building permits will be issued until roads are paved.

EASEMENT LINE TABLE

LINE	DIRECTION	DISTANCE
EL1	S 78°24'45" E	17.33
EL2	N 85°01'17" E	15.00
EL3	S 12°56'20" E	10.32
EL4	S 77°03'40" W	40.00
EL5	N 04°08'20" W	12.09
EL6	N 12°29'22" W	60.67
EL7	N 40°59'00" W	77.64
EL8	N 43°41'07" W	15.97
EL9	N 58°23'28" W	43.83
EL10	S 80°37'22" W	29.75
EL11	S 80°37'22" W	1.89
EL12	S 82°06'00" W	18.41
EL13	N 48°20'02" W	12.37
EL14	N 48°41'39" E	4.40
EL15	N 00°57'03" E	89.12
EL16	S 88°00'00" E	8.46
EL17	N 58°23'28" W	35.04
EL18	S 78°24'45" E	25.33
EL19	S 61°01'00" W	21.88
EL20	N 38°40'43" W	12.50
EL21	N 48°48'19" E	63.87
EL22	N 41°14'05" W	39.84
EL23	S 70°00'00" W	4.22

- LEGEND
- SURVEY MONUMENT TO BE SET
  - ROS - RECREATIONAL OPEN SPACE ZONE
  - C/L - CENTERLINE
  - - STREET ADDRESS

# HIDDEN MEADOW SUBDIVISION

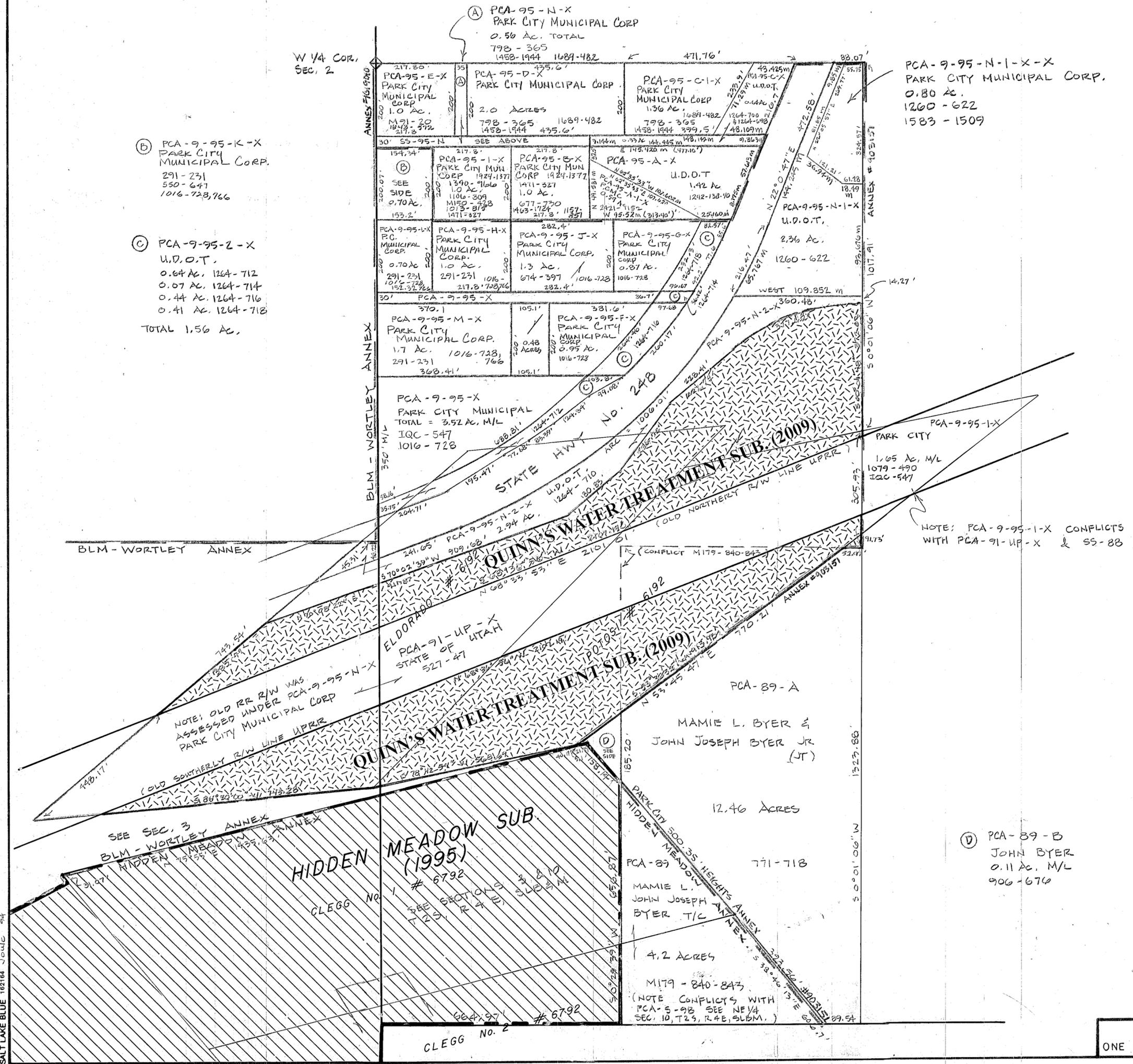
## PHASE 1

A

# SUMMIT COUNTY UTAH

W 1/2 of SW 1/4 SECTION 2

T 2 S - R 4 E, SLB & M.



- (A) PCA-95-N-X  
PARK CITY MUNICIPAL CORP  
0.50 AC. TOTAL  
798-365  
1458-1944 1689-482
- (B) PCA-9-95-K-X  
PARK CITY MUNICIPAL CORP.  
291-231  
550-647  
1016-728,766
- (C) PCA-9-95-Z-X  
U.D.O.T.  
0.64 AC. 1264-712  
0.07 AC. 1264-714  
0.44 AC. 1264-716  
0.41 AC. 1264-718  
TOTAL 1.56 AC.

PCA-9-95-N-1-X-X  
PARK CITY MUNICIPAL CORP.  
0.80 AC.  
1260-622  
1583-1509

NOTE: PCA-9-95-1-X CONFLICTS WITH PCA-91-UP-X & SS-88

(D) PCA-89-B  
JOHN BYER  
0.11 AC. M/L  
906-676

SCALE  
ONE INCH = 200 FEET

W 1/2 SW 1/4 SEC. 2

SALT LAKE BLUE 182164 Jovale 04

# Account 0153571

Location	Owner	Value	
<b>Account Number</b> 0153571	<b>Name</b> BYER MAMIE L	<b>Market (2022)</b>	\$117,600
<b>Acres</b> 4.20	PO BOX 658	<b>Taxable</b>	\$117,600
<b>Situs</b> ,	MIDWAY, UT 84049-0658	<b>Tax Area: 63 Tax Rate:</b> 0.006742	
<b>Tax District</b> 63 - PARK CITY A,J,K,U (V)		<b>Type Actual</b>	<b>Assessed Acres</b>
<b>Parcel Number</b> PCA-89		Land \$117,600	\$117,600 4.200
<b>Geo Neighborhood</b> 05-03-03 - Oaks			
<b>Legal</b> E1/2 SW1/4 SW1/4 SEC 2 T2SR4E SLBMEXCEPTING THEREFROM THE FOLLOWING DESC PARCELS BEG AT A PT WH IS S 0*28'32" EALG THE W SEC LINE 1312.02 FT & S 89* 18'31" E 1293.48 FT FR THE W 1/4 COROF SEC 2,T2SR4E,SLBM, & RUN TH; S 89* 13'31" E 47.22 FT; TH S 0*01'06" W1323.88 FT TO THE S 1/16 COR OF SEC 2; TH N 88*47'32" W ALG TH S SEC LINE 89.54 FT; TH N 39*43'29" W 393.56 FT ALG A MINERAL SURVEY (NO. 6792); TH N 40*41'42" W 500.35 FT ALG A MINERAL SURVEY (NO:6792) LINE; TH N 0*13'39" W 185.20FT; TH N 53*45'47" E 770.21 FT ALG A MINERAL SURVEY (NO.6192) LINE TO THE PTOF BEG ALSO EXCEPTING THEREFROM THAT PORTION OF THE E 1/2 SW SW ASSESSEDUNDER SERIAL #PCA-9-95-N & SS-91-UP-X NOTE:M179-840-843 IN CONFLICT WITHPCA-9-95- N & SS-91-UP-X BAL 4.20 ACRES MAMIE L BYER UND 25/27 INT; & JOHNJOSEPH BYER JR UND 2/27 INT AS T/C M41-548 M137-100 M179-840-843(NOTE: CONFLICTS WITH PCA-S-98) (ANNEXED INTO HIDDEN MEADOW WAS SS-89) (SEE SWD 887-75 UPCM TO BLUE LEDGE CORP) (SEE CORRECTED PATENT NO. 18487 TO JOHNBYER 906-676)			
<b>Parent Parcels</b>			
<b>City</b>			

Transfers

Entry Number	Form Name	Recording Date
<a href="#">00425892</a>		<a href="#">03/08/1995 08:21:00 AM</a>

**Images**

## Tax Account

### Summary

Account Id 0281380

Parcel Number PCA-S-98

Owners UNITED PARK CITY MINES COMPANY

Address PO BOX 1450  
PARK CITY, UT 84060-1450

Situs Address

Legal BEG AT A PT N 00\*19'41" E ALONG THE SEC LINE 290.59 FT FROM THE E1/4 COR OF SEC 10 T2SR4E SLBM; & RUN TH N 70\*30'00" W 9.46 FT; TH S 77\*00'00" W 1622.00 FT; TH S 35\*30'00" W 1410.00 FT TO THE NE COR OF THE EMMA MINING CLAIM (MINERAL SURVEY 3262); TH ALONG THE N'LY END LINES OF THE EMMA; TH EMILY #2 & THE HOPE #2 MINING CLAIMS (MINERAL SURVEY 3262) N 77\*39'13" W 1626.95 FT M/L; TH ALONG THE W'LY END LINE OF THE GASOLINE ALLEY #6 MINING CLAIM (MINERAL SURVEY 6992) N 28\*59'00" W 222.56 FT M/L; TH ALONG THE S'LY SIDE LINE OF THE INA MINING CLAIM (MINERAL SURVEY 5490) N 59\*06'00" E 465.36 FT M/L; TH ALONG THE S'LY SIDE LINE OF THE BESSIE MINING CLAIM (MINERAL SURVEY 5552) N 61\*01'00" E 1500.00 FT M/L; TH ALONG THE E'LY END LINE OF THE BESSIE MINING CLAIM N 38\*40'43" W 601.29 FT; TH ALONG THE E'LY END LINE OF THE LITTLE BESSIE MINING CLAIM (MINERAL SURVEY 5490) N 40\*09'07" W 601.17 FT; TH ALONG THE E'LY END LINE OF THE SUNRISE MINING CLAIM (MINERAL SURVEY 5490) N 40\*09'07" W 135.53 FT M/L; TH ALONG THE S LINE OF THE N1/2 OF THE NW1/4 OF SEC 10; N 89\*51'10" E 595.76 FT; TH ALONG THE E LINE OF THE N1/2 OF THE NW1/4 OF SEC 10; N 00\*40'33" E 771.40 FT; TH ALONG THE N'LY SIDE LINE OF THE WOODROW #1 MINING CLAIM (MINERAL SURVEY 6792) N 60\*10'00" E 516.35 FT M/L; TH ALONG THE N'LY SIDE LINE OF THE WOODROW #2 MINING CLAIM N 62\*56'19" E 1501.54 FT; TH ALONG THE W'LY END LINE OF THE CLEGG #1 MINING CLAIM (MINERAL SURVEY 6792) N 44\*04'01" W 31.07 FT; TH ALONG THE N'LY SIDE LINE OF THE CLEGG #1 MINING CLAIM N 75\*55'00" E 1435.63 FT M/L; TH ALONG THE S'LY END LINE OF THE POTOSI MINING CLAIM (MINERAL SURVEY 6192) N 7\*41'14" E 40.19 FT; TH ALONG THE E'LY SIDE LINE OF THE POTOSI MINING CLAIM N 53\*33'00" E 5.10 FT; TH ALONG THE N'LY SIDE LINE OF THE CLEGG #1 MINING CLAIM N 75\*55'00" E 21.29 FT M/L; TH ALONG THE E'LY END LINE OF THE CLEGG #1 MINING CLAIM S 41\*00'00" E 643.43 FT M/L; TH ALONG THE E'LY END LINE OF THE CLEGG #2 MINING CLAIM S 39\*40'23" E 608.58 FT; TH ALONG THE E'LY END LINE OF THE CLEGG #3 MINING CLAIM S 38\*46'13" E 606.70 FT; TH ALONG THE S'LY SIDE LINE OF THE CLEGG #3 MINING CLAIM S 75\*52'07" W 1501.92 FT; TH ALONG THE S'LY SIDE LINE OF THE CLEGG #6 MINING CLAIM S 63\*17'52" W 344.36 FT; TH ALONG THE E LINE OF SEC 10; S 00\*19'41" W 1183.41 FT TO THE PT OF BEG CONT 258.38 AC M/L(LESS 2.31 AC 888-392 PARCEL A PCA-2-98-A)(LESS 5.33 AC 888-392 PARCEL B PCA-S-98-B)(LESS 212.11 AC PART HIDDEN MEADOWS SUBDIVISION)(LESS 31.82 AC 1740-1531 PCA-S-98-SEC-11)(LESS 0.89 AC 2530-1273 PCA-S-98-SEC-11) BAL 4.96 AC M/L (NOTE: REMAINING PORTION LYING IN SEC 2 CONFLICTS WITH PCA-89) (NOTE: LOTS 15 & 16 PREVIOUSLY BLM UNASSESSED) M48-389-408 230-574 700-108739-708 887-75 (NOTE: CONFLICT WITH PCA-122) (SEE CORRECTED PATENT #18487 TO JOHN BYER 906-676) 1677-415 (NOTE: SWD-1677-415 DESC DOES NOT CLOSE)

### Inquiry

As Of 04/26/2023 

Taxes Due \$1,063.20

Interest Due \$164.89

Penalty Due \$40.00

Total Due \$1,268.09

### Value

<b>Area Id</b>	<b>Tax Rate</b>
63 - 63 - PARK CITY A,J,K,U,(H-H)	0.0067420000
	<b>Actual      Assessed</b>
RESIDENTIAL SECONDARY UNIMPROVED - 02B	32,240      32,240
<b>Taxes</b>	\$217.36

The current taxes due are based on **2022** property value assessments.



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## MINUTES

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### **SUMMIT COUNTY**

Summit County Council Meeting

HEALTH DEPARTMENT

650 ROUND VALLEY DRIVE, PARK CITY, UT, 84060

MONDAY, APRIL 24, 2023

Meeting also conducted via Zoom.

### **DRAFT**

#### Attendance

Christopher Robinson  
Roger Armstrong  
Malena Stevens  
Tonja B Hanson  
Canice Harte

Congressman John R. Curtis  
Lorie D. Fowlke  
HD Sanderson  
Shayne Scott  
Janna Young  
Jess Kirby  
Amy Price  
Brian Craven

Welcome, Ice Breaker with Video and Introductions.

#### Work Session

- 1) Pledge of Allegiance (5 min)
- 2) Discussion with Congressman Curtis

Council Members met with Congressman Curtis and members of the Congressman's staff.

Council Member Robinson left the meeting at 9:15 am.

#### Adjournment

**Malena Stevens made a motion to adjourn. Canice Harte seconded, and all voted in favor, (4-0).**

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**Roger Armstrong, Chair**

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**Eve Furse, Clerk**

**Public Comment Instructions**

**5/10/2023**

If you would like to make public comments, please email [publiccomments@summitcounty.org](mailto:publiccomments@summitcounty.org) by 12:00 p.m. on Wednesday, May 10<sup>th</sup>. Your comments will be made part of the meeting record.

If you are participating via Zoom, and wishing to interact with Council during the public input, please:

1. Go to <https://zoom.us/j/772302472>
2. Enter meeting ID: 772-302-2472
3. Type in your full name, so you are identified correctly.
4. Set up your audio preferences.
5. You will be muted upon entering the meeting.
6. If you would like to comment, press the "Raise Hand" button at the bottom of the chat window.
7. When it is your turn to comment, the moderator will unmute your microphone. You will then be muted again after you are done speaking.