

**Olmsted County Human Services Division  
Community Services Advisory Board (CSAB)**

Wednesday, September 12, 2018  
Room 161, 2117 Campus Drive S.E.

**A. Call to order**

Chair Schmidt called to order the regular meeting of the Community Services Advisory Board (CSAB) at 7:03 a.m.

**Members Present**

Alex Alexander, Commissioner Stephanie Podulke, Patrick Gannon, Patrick Keane, Karen Nation, Judy Ohly, Jim Rustad, Randy Schmidt, John Tierney, Commissioner Gregg Wright, Shirley Westbrook.

**Members Absent**

Julie Ruzek, Walter L. Smith III, JoMarie Morris, Justin Stotts, Patrick Gannon, Evelyn Kuschel, Kathy Schumann.

**Staff Present**

Sarah Oachs, Emily Colbenson, Corrine Erickson, Dan Jensen, Amy Shillabeer, Diane Paradise, Megan Schueller, Tim Hunter, Jake Christianson, Bea SanMiguel-Molina.

**Staff Absent**

None.

**Guests**

Elizabeth Mangan, Kenneth Busch, Christina Block.

**B. Agenda Changes for Regular Meeting**

None.

**C. Approval of minutes from last meeting**

A motion was made and seconded to approve the August 8, 2018, CSAB meeting minutes with the correcting positionally with potentially on page 3. Motion carried.

**D. Chair Announcements**

Chair Schmidt welcomed guests and said three CSAB members will be reaching their maximum terms in December those members are Jim Rustad, Kathy Schuman, and John Tierney. The United Way representative also needs to be filled and Julie Ruzek will be leaving but has recommended a possible replacement. An external bulletin for member volunteers has been posted. Sarah said students have also been invited as possible members through several avenues and will have more information as it arises.

**E. Informational Items and Updates**

**Olmsted County Behavioral Services Overview – Emily Colbenson**

Emily said mental health is a very broad topic, and the presentation will highlight some opportunities for the CSAB to see where there are some gaps. Behavioral Health serves in Adult & Family Services (AFS) encompasses both mental health and

chemical dependency and have been integrated for some time. Although there are different classifications of mental illness, the scope of Olmsted County case management is to serve those deemed with serious and persistent mental illness. The intake and assessment team make sure people can stay connected to the right resources on an on-going basis. The Assertive Community Treatment (ACT) team help people who have not been effectively addressed by traditional, less intensive services. The ACT team work with clients in their homes, work settings, or places in the community where additional support might be needed. The Rapid Access Clinic is no longer in operation, but this service will be covered within the Crisis Center once it is operational. The area of Behavioral Health is growing and will continue to grow. The diagnostic assessment is going through reform; which will allow providers to do the assessments directly. The philosophy of AFS is having a person-centered approach, so an individual's choice is always represented. Success is measured through outcome and goal measures. In general people within the different programs must fall within certain income guidelines. Amy said Youth Behavioral Health (YBH) served 361 youth while Child & Family Services as an entire department served 3,915 in 2017. YBH serves children and their families with multiple challenges who are at risk for out of home placement or involved in the criminal justice system. Truancy services are done in partnership with schools, probation, Olmsted County attorney's office, and include early intervention with educational advocates to try and prevent children from having to make court appearances. The Community Intensive Bridging Services (CIBS) is new within the last couple of years, it is an intensive therapeutic intervention for children and their families intended to keep children in the home. CIBS not only helps the child, but the family also learns skills to manage situations at home to avoid out of home placement. YBH also has a variety of clinical services, one of those is Neurofeedback. It is based on brain science done by Stevan Huber and Tonya Plonka. Services to sexually exploited youth have given the department the opportunity to take part in state workgroups to develop practices for assessment and intervention for these children. They also provide services related to Substance Use Disorders (SUD) and chemical dependency treatment. Olmsted County partners with Zumbro Valley Health Center and Family Service Rochester who make up most of case managers located in the 2117 building. Case managers provide follow up visits when children return from treatment. A challenge in YBH no place for children to be placed while in crisis so they are ending up in the Juvenile Detention Center (JDC), emergency departments or in out of home placements.

#### **Forensic Services – Megan Schueller**

Magen said the zero-intercept measure is new to this 0 through 5 concepts of measure called sequential intercept model. Sequential Intercept Model explains the best practice model designed to identify the different intercepts someone with mental health or chemical dependency issues would go through when encountering the

criminal justice system. Intercept 0 includes mobile crisis, crisis centers and her position as the only Law Enforcement Liaison. In 2017 she performed a pilot for her new position which entailed data gathering. Some highlights from this data collection were the reduction of repeat callers and 70% of people calling for crisis situations were diverted away from the emergency room. Prior to her being on staff only 40% of case were diverted. She provides an on scene clinical assessment as officers are not trained clinicians and able to de-escalate individuals on scene when needed with medical calls and crime victims. Collaboration between agencies has proven to add additional resources to social services and it provide a response plans for police. Psych calls are assessed, and she determines which call will benefit the most from her services which are usually the most challenging. She is also available to officers on call or via phone to help with resources. Most officers have taken the Crisis Intervention Training (CIT). The CIT program started in 2007, currently about 70% of officers are trained across patrol and jail staff. This is the only self-sustaining CIT program in the State of Minnesota which provides ongoing CIT training, refreshers, collaborative meetings, use of CIT forms that alert law enforcement and social services. This began with social services funding but now Olmsted County Sheriff's Office and Rochester Police Department have dedicated budgets towards CIT training and programming. The data from the CIT program helped to support and lobby for the urgent care center and furnished comparison data for her law enforcement liaison position. The Jail Diversion program started in 1999 and evolved into having 2 full time social workers since 2006. Megan held one of those positions for 12 years prior to her current position. Diversion data show the length of stay in jail is reducing and diversion is also helping with high level violent crimes. A mental health screening is done before booking to evaluate and identify those individuals who would want to mislead to avoid jail and pretend to have mental health issues. The forensic commitment is further along on the diversion spectrum. It involves a Rule 20 or better known as competency cases that sometime require a mental health commitment while they are in jail. At times an individual could be recommended to join Competency Restoration Center at St. Peter Community Behavioral Hospital or Anoka-Metro Regional Treatment Center (AMRTC). The Whatever It Takes (WIT) grant to do "Whatever it Takes" is related to getting people out of state hospital's and integrate them back into the community. The WIT Team does all the liaison case management for both AMRTC and Security Hospital. When a person is deemed Does Not Meet Medical Criteria (DNMC) this creates a significant cost for counties. The intention of this teams is work on discharge as soon as the individual is done with treatment at these institutions. If a person is deemed DNMC the cost to keep the person under care to the originating county increases significantly based on location. Within the last year or two they have added a liaison or case manager for the Community Behavioral Health hospitals also. There are several smaller hospitals in the area who have a 16-bed capacity and this person

helps these institutions navigate the DNMC system. The WIT team has helped create procedural manuals for other counties on how to get a system in place and how to serve the mentally ill and dangerous population with rule 20. This is used as a resource handed out by the state to other counties as a best practice model. The other two pieces to this continuum is re-entry and crossover case management. Re-entry specialist is located at the Olmsted County jail. She is a social worker who spends half her time doing rule 25 or chemical assessment and the other half is spend on re-entry services. This is to help people with serious and persistent mental illness, such a borderline personality disorder, bipolar, schizophrenia or severe or major depression and could have chemical dependency issues also. A staff from AFS, Jake Christianson or a mental health professional from the jail can complete a diagnostic assessment on the person with the purpose to wrap services around the person and help reduce recidivism. The crossover or second piece of this case management is a person embedded in Corrections. She provides a linage to services such as chemical dependency treatment while someone is incarcerated and after offers ongoing support.

**Behavioral Health Services Access Group (Identified Gaps) – Emily Colbenson**

Emily said the behavioral health services access group started convening several years ago. It consists of many different entities such as Rochester Public Schools, Olmsted County, law enforcement and health service providers. They gather to understand and find way to address the behavioral health needs in the community. In 2015 they identified three key gaps. One of the gaps was a shortage of behavioral health providers such as psychologists and psychiatrists. This is not just a concern for this county or the state but rather a nationwide gap. Olmsted County has partnered with Mayo Clinic to recruit for the open provider position. Internally AFS has started a clinical trainee program so staff can have the opportunity to acquire their clinical licensure. Second gap identified was the lack of crisis services. The Crisis Center originated through this group. The last gap was the shortage of supportive housing options. Legislative efforts have appropriated funding for the building of crisis center and supportive housing and they are preparing to respond to these opportunities.

**Crisis Center & Supportive Housing Update – Tim Hunter**

Tim described the mental health continuum having four stages health, reacting, injured and ill. The mental health service continuum consists of all the services from the lowest level of need to highest level of service needed. A gap identified in services continuum in acute care and services to children in crisis. The proposed crisis center and supportive housing is looking at providing a place where people can receive education, treatment, and receive services in a timely manner. The crisis center service map explains two paths of service a person experiencing a mental health crisis will take. First the walk-in option illustrates a warm reception with peer support, family friendly waiting space where adults and children are separated. They are working a no

wrong door policy, so no one will be turned away. The next step, crisis triage, will consist of an assessment of medical need and current level of care determination. This stage would refer people to the emergency department if necessary to be seen by a physical immediately or psychiatric services within 24 hours. The following steps consists of high quality risk assessment followed by the intervention and ending with community stabilization; each stage with intentional care coordination. The residential stabilization for adults and children will also provide short term housing options and services for adults and children. The second path, call 911, describes the mobile response team. If someone cannot leave their home a team of mental health professionals will come to the person in need. The region has seen a rise in the crisis line calls, so a key goal is to get as many access points and outreach in community including rural areas. A building model for these type of services does not exist, but they have toured some places with similar concepts to gage possibilities. The regional solution is looking at creating a governance arrangement or joint powers agreement to include all systems. 2018 will consist of selecting operational partners, developing and distributing the request for proposal (RFP) with hope to build the center in spring or summer of 2019. On the supportive housing aspect of the funding bill, this will provide an opportunity to build a structure for permanent supportive housing for people suffering from severe and persistent mental illness. The building will offer one-bedroom units with full amenities. The Housing Redevelopment Authority (HRA) is leading this project.

### **Services to Seniors – Dan Jensen**

Dan said between 2010 to 2030, Olmsted County will experience a considerable growth in its older population. As people start their retirement stage they typically do not need social services, so it is not until people reach their later 70's that people could require more assistance. By the year 2040, a much larger increase in this population is predicted. Determinants of health ageing show at the core, people carry their own set of factors that contribute to ageing like gender, education, health behavior, disease state and nutrition. The following factors called social determinants of health show how outside activities or environment impact health. These determinants are not limited to these, but they include diet, fertility, social status of community, educational level, housing, poverty and employment. The more remote factors that are not within someone's control also contribute to how someone ages for instance war, food production, world economy, technological advances and climate. A multifaceted approach to ageing is key. Olmsted County sees these factors as an opportunity for people to take part of programs that are not specific to aging but support the aging community for example Supplemental Nutrition Assistance Program (SNAP), Energy Assistance, or HRA. Other areas that are specific to aging and provide other levels of support are the Elder Network, Senior Center, and home care agencies. The scope of services that Olmsted County provides is minor compared to

the services the community can provide. Dan's department connect people services but there are over 500 community organizational partners that offer more specific services for people's needs. Services to people are not solely for people who have financial needs. Assessments can be done to help families and people connect with community services; this reduces people's vulnerability and helps their own resources last longer. Case management or care coordination is not provided to people that are not in financial need. The ageing and care coordination programs have about 40 staff members and they do assessments, case management and other specific care services. In 2018-2019 their goals are to complete the integration of Adult & Family Services and Public Health Aging & Care Coordination team, hire a Community Health Specialist to focus on the community aging infrastructure and support new and transitioning work. A gap impacting the elderly and disabled citizens is caregiver staffing and wage retention. Entry level positions for caregivers offer such low wages it has created a crisis in home making services, home patient care services and chore services. Another gap is not having a community care team, this was a multifunctional team who assessed, screened and brought services to people in a very quick manner and was withdrawn due to low enrollment. This service is needed, and the outcomes of the program were very positive. Another area that requires assistance is in the coordinated technical infrastructure, this would allow for common plans of care and help people understand what stages of care people are at. The final gap is in preparing the professional workforce. Enrollment into the geriatric MD programs across the nation are very low because the wages are better when a doctor goes into specialty care. Some creative solutions have emerged with empowering people that are interested in going into the field of geriatric.

#### **F. Emerging Items & Updates**

##### **County Board Announcements**

Commissioner Podulke said the Youth Commission is starting back up this fall and the Housing Redevelopment Authority (HRA) levy was set and was came in at mid-level funding.

##### **Staff Announcements**

None.

##### **Other**

None.

#### **G. Adjournment**

Chair Schmidt adjourned the meeting at 9:00 a.m.

Minutes submitted by: Bea SanMiguel-Molina