



Minnesota Department of **Human Services**

Positive Support Community of Practice

(PSCoP)

8/5/14

A Focus on Minnesota Crisis Resources

- Larraine Pierce – DHS Adult Mental Health
- Nelly Torori – DHS Children’s Mental Health
- Steve Dahl – Community Support Services

How to submit questions

Email your questions to:

positivesupports@state.mn.us

Mental Health Crisis Response Services in Minnesota

Prepared for the Positive support
Community of Practice

What is a crisis?

- For the purposes of this service, it is when
 - A person experiences a symptom of mental distress such as anxiety, repetitive thoughts, depression, etc.
 - Those symptoms make the person very uncomfortable or interferes with their functioning.

What are the services?

- Phone triage
- Face-to-face assessment and intervention
- Follow-up and stabilization

Response time

- Thirty minutes from the determination that the person needs a face to face response or
- As soon as possible given weather conditions and traffic.

Who provides the services

- Licensed mental health professionals
- Trained mental health practitioners under supervision of a mental health professional

Who is eligible for these services?

- Any person who is in Minnesota
 - Who is experiencing
 - Anxiety
 - Depression
 - Suicidal thoughts
 - Hearing or seeing things that others do not
 - Other mental health issues that interfere with functioning
 - To the extent that the person is not able to function effectively
 - Self assessment
 - Significant other or provider assessment

Availability of services

- All mental health crisis response services are available after 5 pm and on weekends.
- Most are available 24 hours per day
- By January, all Minnesota Counties except 6 for adults and 2 for children, will have mobile crisis response services available.

Phone Numbers

- <http://www.childcrisisresponsemn.org/map/>

Crisis Services Expansion

- Minnesota has done an excellent job in creating a statewide mental health crisis response service system
- Expansion as a result of the 2013 legislative session
- Added 4 more teams in the Children crisis services.

Goals of Crisis Response Services:

- Mobility– go where the crisis is
- Responsiveness – Arrive within 30-45 minutes weather permitting.
- Availability – after hours – some 24/7
- Increased Volume
- Widespread Community Awareness

Goals....cont.

- Divert unnecessary out of home placements and arrests
 - Hospital Staff may have limited knowledge of community options
 - Children are more likely to be unnecessarily hospitalized if they visit an ED
 - Children at increased risk of arrest when police are called
- Coordination with schools, ED's, Law Enforcement, Hospitals, etc.

Schools and Crisis Services

Olmstead Action Item:

Olmstead Action Item

- Establish a process for School districts to ensure students with complex disabilities can access crisis services

Definitions

- Students with complex disabilities limited to students with an IEP receiving special education services.
- Crisis -a child who is actively experiencing a high-level of distress within the school setting and in need of timely, safe, and effective intervention to assist the child in de-escalation to prevent further escalation of a crisis situation and prevent future crisis.

Barriers to Service Provision in Schools

- Access and Coordination
- Response time
- Capacity
- Training gaps

Action item goal

- Build upon existing crisis service system of care to expand service population.
- Service to address a reduction in the school's use of restrictive procedures for children with complex disabilities

Recommendations for system enhancement

- Access and Coordination
 - Creating standardized processes statewide
 - Increased communication and coordination with other service providers
- Enhance capacity for mobile crisis response services.
 - Access to specialty consultation for developmental disability, traumatic brain injury or intellectual disability related crisis needs.

System Enhancement cont....

- Training needs for the system
 - Training for community capacity across crisis service providers on MH, DD and waiver services
 - Training for school personnel

Evaluation

- Data collection
- Service outcome measures:
 - School and crisis provider service agreements
 - Reduction in the use of restrictive practices
 - A decline in incident/behavior and police reports

Thank you.

THE END!

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Community Support Services (CSS)

*Strengthening Community Living of
People with Clinically Complex
Challenges*

Who is CSS?

Department of Human Services

State Operated Services

Community-Based Services

CSS

CSS Mission

“Community Support Services advances the Department of Human Services (DHS) mission by strengthening the community living of people with clinically complex challenges, through initiating and guiding innovative behavioral supports, building collaborative support networks, and advocating for person-centered approaches.”

Who is CSS? (continued)

- Past:
 - Legislation created 7 CSS regional teams in 1994
 - Support successful community transitions of individuals with intellectual and developmental disabilities (IDD) as regional human service centers closed
 - Focus on Positive Behavior Supports
 - Primarily community-focused
 - Limited support within State Operated Services (SOS) facilities to assist with transitions

Who is CSS? (continued)

- Present:
 - 9 multidisciplinary teams serving statewide
 - Behavior analysis
 - Clinical social work
 - Psychology
 - Nursing
 - Occupational Therapy (sensory focus)
 - Psychiatry
 - In community settings and within SOS facilities

Who does CSS serve?

- Individuals with multiple, complex barriers to successful community living related to:
 - Intellectual & developmental disability,
 - Serious mental illness, and/or
 - Brain injury
- Support networks of individuals with clinically complex challenges
- Must triage referrals for best outcomes

Where does CSS serve?

- All Minnesota counties & tribal communities
 - Individual homes
 - Group living settings
 - Hospitals
 - Long-term care facilities
 - Other community settings
 - State Operated Services (SOS) facilities

What does CSS do?

- Build & strengthen individuals' support networks through:
 - Integrated multidisciplinary assessment & support recommendations
 - Person-centered planning methods
 - Case-specific training, coaching, and mentoring
 - Consultation to problem-solve barriers
 - Transition supports

CSS Crisis-Related Supports

- Assist existing support network to:
 - Identify factors contributing to crisis
 - Develop crisis prevention and support plans
 - Build Positive Behavior Supports into person's life
 - Plan *support network* actions to prevent crises and to handle consequences of individuals' choices/behavior
 - Identify potential additional support resources
 - Respite options, behavioral health services, etc.

CSS Crisis-Related Supports (cont.)

- As needed, directly coach individuals to:
 - Assess & communicate their own goals & preferences
 - Understand factors contributing to crisis
 - Identify and practice coping skills and alternative behaviors
 - Partner effectively with their support network

CSS Crisis-Related Supports (cont.)

- Provide Augmentative Supports:
 - Expert Direct Support Professionals
 - Work alongside person's existing support providers
 - Not a replacement for existing supports
 - Provide modeling, coaching, and training
 - Assist CSS lead clinician with observations

How are CSS services funded?

- Home and Community-Bases Services waivers:
 - Developmental Disability (DD)
 - Community Alternatives for Disabled Individuals (CADI)
 - Brain Injury (BI)
- Shared service contract
 - Counties and private organizations
- Legislative appropriation
 - When no other funding source available

How are CSS referrals made?

- Through the individual's county case manager
- Contact regional CSS team
- Brochure on DHS website:

<http://mn.gov/dhs/people-we-serve/people-with-disabilities/services/direct-care-treatment/programs-services/>

Questions?



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More information about CSS

- On the DHS website:

<http://mn.gov/dhs/people-we-serve/people-with-disabilities/services/direct-care-treatment/programs-services/>

- Steve Dahl, CSS Director:

Steven.Dahl@state.mn.us

Next PSCoP:

August 19th; 10a-12p

Dr. Angela Amado – Including the
Community in Community
Integration