Chairman Hogan and members of the Interim Human Services Committee, I am Rosalie Etherington, Superintendent of the North Dakota State Hospital (NDSH) and Chief Clinics Officer for the Department of Human Services (Department). Thank you for this opportunity to discuss the challenges and benefits of the Department of Human Services’ Tompkins Rehabilitation Center (TRC).

**Challenges and Benefits**

The Tompkins Rehabilitation program has unique benefits and challenges. Benefits include the consistent effectiveness of the program as evidenced by improvement in self-efficacy skills and the reduction of recidivism ([Handout B](#)).

NDSH receives multiple benefits from the Tompkins program, including the work provided through the vocational training program, the contribution of community from the residents, and the staff satisfaction of making a positive difference in people’s lives.

Successful treatment requires a progression of increasing privilege and freedom. Finding ways to meet this need can sometimes conflict with a correctional model and philosophy. Another challenge is that best practices require treatments to be individualized, which might mean that a client needs less or more time for completion than the strict number of days determined by DOCR. Moreover, a variable length of stay with
discharge based on clinical readiness could serve more individuals in the same number of beds or the same number of individuals in fewer beds, reducing overall treatment costs. The shared buildings and staff and the need to preserve the therapeutic nature of our campus prohibit the conversion of the buildings used for TRC to a prison-governed facility.

In the event that the legislature mandates DOCR to provide this service on its own or contract for this service elsewhere, the staff and buildings currently used for TRC should remain with DHS for repurposing to a different service.

This concludes my testimony. I would be happy to answer any questions. Thank you.