North Dakota Olmstead Plan 2011 Update

September 2011

North Dakota has met or is undertaking efforts to meet goals outlined in its Olmstead Plan. The state considers this plan a working document involving ongoing effort.

Goal 1.0: North Dakota will have the infrastructure necessary to provide to people with disabilities community services and supports that are accessible, effective, responsive, safe, and continuously improving given the resources available to the state and the need to maintain a range of services to accommodate individuals with varying needs and preferences.

Infrastructure Accomplishments:

- The *Money Follows the Person* grant is funding the development of a **rental gap assistance** program and a **housing initiative** to support transitions and diversion efforts so that people with disabilities can reside in community settings.
    - The gap assistance helps address rent costs while consumers deal with the lengthy waiting list for Housing Choice Vouchers.
    - The initiative includes a registry and assistance helping people with disabilities find affordable accessible housing. The N.D. Dept. of Human Services (DHS) is contracting with Minot State University to provide the services.
- Aging Service Unit staffs in the regional human service centers are working with the Aging Services Division to continue **implementation of Aging & Disability Resource LINK and options counseling services** at the community level, contracting with local providers to ensure that individuals residing in care facilities can explore the option to move to a community-based setting.
- DHS continues work on the **Guardianship Establishments Funds** to implement the $500 guardianship fee. The Legislature's Interim Human Services Committee has approved the proposed study plan for guardianship services.
- Southeast Human Service Center in Fargo continues to participate with other local partners in a **jail/court diversion process** with alternative sentence options for eligible individuals with mental health disorders.

2011 Developments in N.D. Dept of Human Services' Budget to Support Community-Based Services that strengthen the community "infrastructure"

- Lawmakers approved a **3% increase for all providers** for each year of the biennium.
- Additional funding for brief inpatient care under **contracts with local hospitals** was provided by the legislature. The expanded contracts now also include two private psychiatric hospitals: Prairie St. John's in Fargo, and Stadter Psychiatric Center in Grand Forks, allowing clients further choice when local care is needed. These contracts are expected to result in fewer individuals needing to be hospitalized away from home at the N.D. State Hospital in Jamestown, unless longer care is needed.
- Funds continue for the **dementia care services program** providing care consultation and training for people with dementias and their caregivers to help people remain in their homes.
- **Congregate and home-delivered meals** received additional funding.
- In Region V (Fargo), which has a high number of individuals receiving substance abuse treatment, funding was allocated to **add 15 residential treatment beds** to improve capacity and allow individuals to be served at that level of care when inpatient hospital is not required. Southeast Human Service Center is currently preparing to issue an RFP to providers who can implement this program, with an estimated target date of January, 2012.

Goal 2.0: Establish a system to provide comprehensive information and education so people with disabilities can make informed choices about living options available to them and to prevent or divert people from being institutionalized or segregated.

Information and Education Accomplishments:

- **Local Contact Agency** system had been established to provide information to nursing facility residents about community services options.
- **Realistic Job Preview videos** were created to assist in recruitment and retention of Direct Service Professional (DSPs) and Qualified Service Professionals (QSPs) and is posted online at www.nd.gov/dhs/services/adultsaging/providers.html.
- The Department has continued to provide **training to tribal entities** interested in greater utilization of Home and Community Based Services (HCBS) in reservation communities.
- **Aging & Disability Resource LINK activities** continue under the pilot grant and the Aging Services Division is in the beginning stages of the roll-out of options counseling services in western North Dakota. A public awareness campaign was implemented in Region II (Minot region) and VII (Bismarck region). These activities will be expended to Region I (Williston region) and Region VIII (Dickinson region) to broaden the key partnerships in those areas.
- DHS coordinated the launch **and marketing of the new Aging & Disability Resource LINK toll-free number** [1-855-GO2-LINK (1-855-462-5465)] with the Medical Services Division's home and community-based services/*Money Follows the Person* marketing effort. This number is used in conjunction with efforts to market services available to consumers.
- The ***Money Follows the Person*** **grant** continues to work to increase public awareness of long term care options. **Marketing materials** have been developed for referral sources and the general public.
- Information about **dementia care services and available resources** and services is being provided to medical professionals, law enforcement, and the public through the dementia care services program contract with the Alzheimer's Association.

Goal 3.0: Administer a system for coordinated services to individuals with disabilities in the most integrated setting appropriate to the needs of the individual.

Coordination of Services Accomplishments:

- N.D. continues to provide **case management services** to qualifying individuals with developmental disabilities and serious mental illness through its regional human service centers, as well as the elderly and people with disabilities who qualify for Medicaid home and community-based services waiver. Case managers help connect people to services.
- All Human Service Centers continue to work closely with local providers, local hospitals, and the N.D. State Hospital to screen for the **appropriate level of care**, providing step-down services in crisis beds where possible, to limit hospitalization.
- **Nurse quality assurance services** have been developed to improve overall transition outcomes for people transitioning from nursing facilities.
- The Centers for Medicare and Medicaid Services (CMS) is funding six new full time temporary **transition coordinator positions** at the Centers for Independent Living to continue outreach and transition coordination services for people participating in the *Money Follows the Person* effort.
- The N.D. Department of Human Services - Developmental Center's **Clinical, Assistance, Resources, Evaluation, and Services team** (CARES Team) now has five behavioral analysts (an increase of one from last year) and offers statewide services to maintain people in the community by working with individuals, families, and community services providers.

Helping People Move Out of Institutions:

N.D. continues to support community living options for people with disabilities. Awareness about care options in the community continues to grow. The Department of Human Services operates two state institutions: the **Developmental Center** and the **North Dakota State Hospital**. The following section describes recent transition accomplishments. Individuals typically transition to independent living situations with supports, to their homes, or to other residential and community settings. Placement varies by individual needs and community resources.

- The **number of people with developmental disabilities (DD) residing at the Developmental Center has decreased** from 149 adults in 2001 to 93 adults in June 2011.
- The state's Transition Task Force, which includes the active involvement of the Center, has set a goal of 67 people at the Center by July 1, 2013.
- The Center also serves **3 individuals in an** Independent Support Living Arrangement, and five individuals in a youth transition program.
- In addition to transition services, a transformation of services initiative is underway.

- The **North Dakota State Hospital's average daily census** for its traditional population (individuals with serious mental illness or addiction) was 162 in 2001 and is about 106 today (81% occupancy).
    - The State Hospital is the primary inpatient treatment provider for the Williston, Dickinson, Devils Lake, and Jamestown regions, which include 22 of the state's 53 counties.
    - Work continues with private hospitals to ensure availability of services in local communities when possible. (See hospital contracts information in the *Goal 1* area)
    - A **statewide shortage of psychiatrists and clinical psychologist**s – especially professionals who specialize in pediatric treatment continues.
    - N.D. is using telemedicine to help address this. DHS is also in the final stages of **adopting new technology** so that telemedicine services can be provided from computer to computers in addition to rooms with Polycom conferencing equipment.

Institutional Diversion:

- All **admissions to the State Hospital and N.D. Developmental Center continue to be pre-screened** prior to admission to ensure that institutional treatment is required. Whenever possible, individuals are assisted in community-based services first.
- **Aging and Disability Resource Center** staff gave a presentation to the medical community in the pilot region. Plans for the expansion of options counseling include working with the medical community to promote diversion.

Nursing Homes:

- As of 8/31/2011, **29 individuals** (11 older adults and 18 persons with a physical disability) have transitioned from nursing facilities in N.D. to a home/community setting with help from *the Money Follows the Person* grant.

Intermediate Care Facilities (ICF) for People with Developmental Disabilities:

- As of 8/31/2011, **35 individuals with Intellectual Disabilities/Developmental Disabilities** (ID/DD) **have transitioned from the Developmental Center and other ICF/ID group homes** through the *Money Follows the Person* grant.