	Health & Human Se Agenda Reque		<u>3</u> A				
COUNTY Requeste	d Meeting Date: February 25	5, 2025	Agenda Ite				
Title of Item:Region V+ Efforts to Decrease Unneeded Acute Hospital Stays							
REGULAR AGENDA	Action Requested: Approve/Deny Motion Adopt Resolution (attach di		Direction Requested Discussion Item Hold Public Hearing* earing notice that was published				
Submitted by: Paula Arimborgo		Departm H&HS					
Presenter (Name and Title): Mike Willie, Regional Transition	Administrator, Coursewall		Estimated Time Needed: 20 min				
Alternatives, Options, Effects or	n Others/Comments:						
Alternatives, Options, Effects or Recommended Action/Motion:	n Others/Comments:						

Region V+ efforts to decrease unneeded acute hospital stays Collaboration and Innovation

Sourcewell

02/25/25

Partnership with the Adult Mental Health Initiative

- 1996 legislation created regional partnerships to pilot innovative projects, which evolved to 19 AMHIs
- Aitkin County joined the counties in Region 5
- Sourcewell and Region V+ AMHI partnership:
 - AMHI and Region V+ Crisis Services Coordinator
 - Regional Transition Administrator
 - Regional Mental Health Coordinator



- 1 of 9 service cooperatives created in the 1970s
- Tasked with helping schools, cities, counties, and other local public agencies meet their goals
- We offer a wide range of solutions:
 - Shared services childcare and adult foster care licensing, zoning
 - Public safety training and funding opportunities
 - School support district strategy and planning, career and college readiness programs, student academic programming and more



Does Not Meet Criteria

- 2016 MN legislation: counties are liable for 100% of the cost of care for all individuals served in the Anoka Metro Regional Treatment Center (AMRTC) and the Community Behavioral Health Hospitals (CBHHs) deemed clinically appropriate for discharge.
 - Those individuals are given the status of Does Not Meet Criteria (DNMC) for further hospitalization.
- 2017: AMHI began discussions with Sourcewell to develop a position to better serve DNMC individuals.

Goals of the Regional Transition Administrator

Primary goal

 Reduction in DNMC days by taking the person's individual needs into account

Secondary goals

- Assist case managers
- Serve as a liaison with DC&T (Direct Care and Treatment) and placement providers
- Facilitate AMH (Adult Mental Health) case manager networking and skill development

Reducing Does not Meet Criteria Days

Concerted, collaborative effort across the region	RTA position is prominent but not the only tool used	Increased attendance at team meetings for individuals in state hospitals	County meetings around individuals in state hospitals
High levels of communication with hospital social workers	Early discharge planning and early MNChoices referrals	Concerted effort to engage clients and providers to plan for client success	LOTS of referrals

Assisting case managers

- Supports a high level of service from case managers to all their clients, especially clients not in state hospitals
- Targeted conversations with clients about their wishes
- Discussion with case managers about strategies for interventions
- Commitment logistics assistance
- Regional knowledge provides for a level of specialization that normally wouldn't be available for the counties in Region 5+

Liaison with DC&T

- Single contact point
- Gain knowledge and experience with each individual Direct Care and Treatment (DC&T) site
- Prioritization of DC&T cases
- Develop relationships with DC&T staff
- Develop experience and knowledge of DC&T protocols and operating procedures



Liaison with placement providers

- Preferred contact for each individual provider
- Maintain updated individualized forms for each provider
- Develop relationships with select providers
- Help providers with challenges in transitioning in new placements
- Facilitate discussion to address barriers to placement









AMH case manager networking

- Facilitate a bi-monthly meeting with AMH case managers
- Recruit presenters or facilitate panel discussions on topics for AMH case manager skill and knowledge development
- Provide networking opportunities for AMH case managers



Results

- About \$2.5 million decrease in DNMC costs since 2019
- Reduction in case manager stress
- Relationship development with DC&T
- Longevity in placements
- Cross county case manager networking

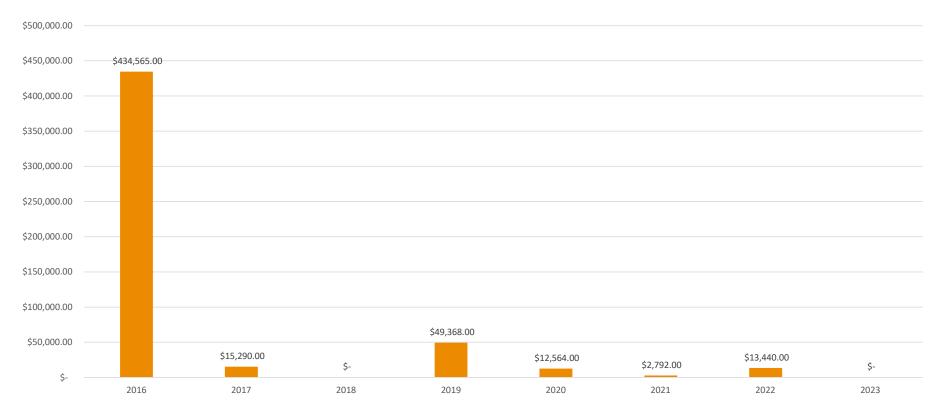




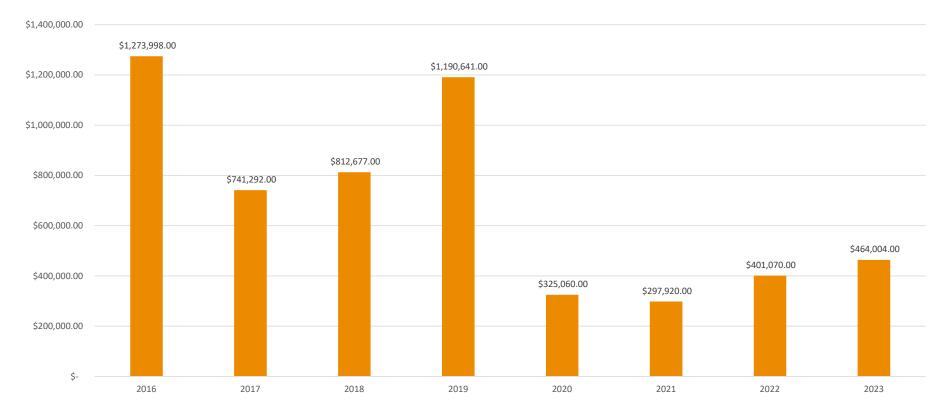




DNMC costs to Aitkin County



DNMC costs to Region V+



Placement successes

Explaining placement settings with clients and spending time discussing different options with clients	Matching placement providers with clients	Providing options for the clients to choose from	Researching new placements in areas clients identify to be a preference
Finding specialized placements for individual clients	Possible individual placement developments for clients	Knowledge and experience with MSOCS when that is needed	Capacity to submit multiple referrals

Relationships built

- In a 2023 DHS report to the legislature Region 5+'s efforts were called out as having a positive impact on decreasing DNMC days
- DHS partners call us to request resource information
- Community partners let us know about open beds
- Identify community partners willing to collaborate for new developments and creative approaches to serving people
- Partnering with EDs to address ER boarders



Ongoing work

- Region V+ has made significant structural changes in how we work with individuals in DC&T sites since 2019
 - Hiring the RTA position
 - Increase in staff/supervisor time dedicated to individuals at DC&T sites
 - Inter-agency/Intra-agency meetings to ensure county/state processes don't disrupt discharge
- Changes have resulted in overall reduction in unneeded hospital stays
- Even with those changes, counties in Region V+ still carry a historical and ongoing burden from DNMC billing



"The RTS has found resources and providers that I would not have had the time to research and locate that have been positive experiences. The RTS has created collaboration opportunities with providers and case managers as well as brought together teams to ensure ongoing support. The role has been a saving grace for a busy case manager!" -- AMH Case Manager "You also take a huge amount of stress off of me, and save me invaluable amount of time to do my other work, because you contact providers and complete the referral paperwork. Placements are found faster having this position, as more referrals can be made when that is the focus, as I could never make the amount of referrals that you do, or know of all the referral options throughout the State like you do." -- **AMH Case Manager** "The RTS role is of great value. This role has provided trainings, collaboration with other regional social workers. This position is an asset when needing additional assistance with finding housing/placement." -- AMH Case Manager "The RTS role is vital in assisting me to find appropriate placement for my clients. Completing ROIs, sending information to potential providers, and all the follow-up that is involved in finding services and homes for clients takes a lot of time. However, with the assistance of a Regional Transition Specialist, it alleviates stress and provides more time for other tasks that need my attention." -- **AMH Case Manager**

"If everyone is moving forward together, then success takes care of itself."

- Henry Ford



Thank you!