

**Executive Summary: Major Themes/Issues Identified at the
Fall 2007 N.D. Dept. of Human Services (DHS) Public Stakeholder Meetings**
Held in Bismarck, Devils Lake, Dickinson, Fargo, Grand Forks, Jamestown, Minot, and Williston

The final report is available online at www.nd.gov/dhs/about/.

North Dakota's aging population is impacting service capacity.

- Older Americans Act outreach service funding is not keeping pace with growing demand and rising costs (especially for meals-on-wheels and outreach services)
- More funding is needed for home and community-based services. The qualified service provider (QSP) infrastructure is fragile – especially in rural areas.
- Service unit caps on long-term care continuum services are a concern across all regions.
- The state's long term care continuum needs to address affordable assisted living, other housing needs, and in-home supports including crisis management for the elderly and other people with long-term disabilities, if transition-to-community efforts are to succeed.
- The state's developmentally disabled population is aging, and those individuals' needs are growing. Provider reimbursement is an issue – especially for those individuals living and receiving supportive services in the community.
- The state should increase the Medicaid Medically Needy eligibility income level to address the growing number of low-income elderly and disabled individuals, who currently don't qualify for Medicaid services, yet can't afford services out-of-pocket.

Child welfare services are stressed in many regions.

- There is a need for more foster homes; rates are a huge issue.
- The state needs more crisis residential and shelter care beds for children and teens.
- N.D. needs more intensive in-home, parent aide, and other preventive services to sustain children in their homes.
- Counties are concerned about funding levels for core social services administered by the counties – especially child welfare services.

Capacity issues exist across the system to appropriately serve children and youth transitioning into adult services.

- Supported housing and other housing is a huge unmet need especially for youth aging out of foster care.
- Those who don't meet case management criteria fall through gaps. These individuals are typically higher functioning, but still have needs.

Transportation is an issue across the state and across delivery systems.

- Higher fuel prices make it hard for people to afford the transportation necessary to access a wide array of human services.
- Demand for outreach services is growing.

Workforce concerns exist across the entire service delivery system from direct care workers to clinical specialists.

- Providers agreed that reimbursement increases are helping with retention, but not recruitment. A lack of available workers exists in many regions.
- The required background check process takes too long. Some providers lose job applicants in child care and direct service while they wait for background checks to be completed.

Capacity issues exist across the state's mental health system.

- Resources are needed to expand intensive in-home services and residential bed capacity for children.
- North Dakota needs more residential services and housing options for adults with chronic mental illness.
- More acute care beds are needed at the State Hospital.
- Community mental health inpatient service providers (hospitals) are stressed, and reimbursement is a key concern.
- Adults with serious and chronic mental illness need access to more job development and employment support services to support their recovery.

Concerns exist about gaps in the public substance abuse treatment system.

- Stakeholders expressed a need for more residential options for the chronic population.
- Many said the state needs more acute treatment/detox beds at the State Hospital.

Support exists for technology solutions and more technical assistance.

- Counties across all regions requested one public assistance eligibility computer system.
- Counties requested more frequent training on economic assistance policy changes. (Many policy changes are federally mandated.)
- Telemedicine and more expert outreach (from human service centers and the State Hospital) may help address mental health needs in underserved rural areas.
- A Help Desk for Qualified Service Providers (QSPs) would help address billing and reimbursement issues
- Counties support the ongoing development of the child welfare "front-end" system in order to better balance data gathering and paperwork with direct services to clients.

Relationships and collaboration remain strong.

- Providers and other partners expressed appreciation for strong working relationships with regional human service centers and the department.