



Executive Summary

2006 DHS Public Stakeholder Meetings

The North Dakota Department of Human Services invited clients, the public, advocates, and providers to stakeholder meetings in January and February 2006, which took place in Bismarck, Devils Lake, Dickinson, Fargo, Grand Forks, Jamestown, Minot, and Williston. The meetings were organized to engage stakeholders in a discussion about community needs, service capacity, and resources in order to identify broad areas of interest and to seek ideas and recommendations from the department's partners. While comments varied, some common themes and concerns emerged. They are listed below.

- **Capacity issues exist at the State Hospital, the regional human service centers, and in the private sector for both mental health and substance abuse services**
 - Community-based mental health and substance abuse services for adults and children are full
 - Lack of increased funding for human services is a local concern
 - Meth treatment capacity concerns exist (detox, treatment and after care/support)
- **Concerns about the ability to meet the needs of North Dakota's aging population and individuals with physical disabilities**
 - More home and community-based services are needed
 - People experience difficulty accessing supportive services – especially in rural areas
 - Reimbursement rates for Qualified Service Providers are too low to attract providers, which stakeholders feel may cause unnecessary admissions to nursing homes
 - Senior center funding (Older Americans Act funding) is not keeping up with local needs for meals and outreach services
 - Assisted living services are not accessible to low-income persons – gap in continuum of care
- **North Dakota's guardianship system (court system) needs more resources; access is an issue for vulnerable adults and children**
- **Efficiency issues**
 - Entering data into the Single Plan Of Care (SPOC) and Comprehensive Child Welfare Information and Payment System (CCWIPS) is time consuming

- Regulations are burdensome; DHS has influence over some regulations
- Explore combining the assessments for foster care and adoption (under the rationale that the assessments are similar and many foster parents go on to adopt the children in their care)
- **Role of the Developmental Center and the plan for moving residents to community placements** (A statewide task force is working on this matter; the continuum of services may need to be expanded.)
- **Concerns about unfunded mandates** (Child welfare services are requiring more staff time to assure that the state meets Child and Family Service Review standards. Medicare Part D – federal matter)
- **Shortage of family foster care homes and access to other appropriate placements**
- **Transportation impacts access to services for rural and low-income residents - outreach is limited**
- **Issues regarding serving the Corrections population once they are no longer incarcerated**
 - Impact on Human Service Centers and their ability to serve their traditional client population along with this growing client population
- **Homelessness and a shortage of housing options for vulnerable people exists in every region**
 - Impacts people who have low incomes, mental illness, developmental disabilities, substance abuse or other disabilities
 - Need a housing continuum
 - Funding is limited and housing services are fragmented
- **Medicaid Recipient Liability**
 - Comments provided from half of the regions reported that many people can't meet their recipient liability (Medicaid cost sharing amount)
 - Some people are going without needed medication
- **Developmental disabilities providers report they are experiencing staffing issues**
- **Access to treatment services is limited for sexual perpetrators who are minors or children**

NOTE: A Chart Summary of Public Stakeholder Meeting Comments is available.