

Senate Human Services Committee**January 8, 2025****Senate Bill 2271****Financial Challenges in Adult Residential/Specialized Basic Care**

Chair Lee and members of the Senate Human Services Committee, my name is Rebecca Quinn, and I serve as the associate director for behavioral health at the Center for Rural Health at the University of North Dakota School of Medicine and Health Sciences. My testimony today is on behalf of all the individuals and families impacted by brain injury in North Dakota.

North Dakota has two 10 bed adult residential facilities serving individuals with brain injuries. These are Dakota Point in Mandan and HI Soaring Eagle in Valley City. There currently is not a waiting list for these facilities, but only because a waiting list is not practical due to shifting needs and the timely need for the services. Do not think this is because these facilities are not in high demand because they are. At least a few times a month we at the North Dakota Brain Injury network will receive a call needing these services. It has been this way since I become director of NDBIN in 2007.

With this level of demand, I have asked many times if the two agencies running the existing facilities would please open another. I have been told that it is just not cost effective. Since the current facilities run in the negative there is no incentive to open any more. Regrettably, this means that many individuals are going without care or receiving care in inappropriate placements.

An additional factor impacted by the current rate methodology is there is no avenue for advancement or improvement of services. Research regarding brain injury and effective care has drastically changed in the last 20 years.

Unfortunately, 25 years ago during the 56th legislative session that Senate Bill 2036 established Dakota Point. Twenty-five years later individuals with brain injury deserve to have services that have the ability to adapt and be responsive to current treatment trends.



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We have made strides in expanding the continuum of care available for individuals with brain injury by developing new services such as residential habilitation and community supports. Despite this there is still the need for adult residential services for individuals needing those services. Ensuring their viability will safeguard that this level continues to be an option. Please support this proposal as an avenue to move how North Dakota provides services for this unique population into the 21st century.

Thank you for your consideration,

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