Senate Human Services Committee March 19, 2025 HOUSE CONCURRENT RESOLUTION NO. 3029

Madam Chair Lee and members of the Senate Human Services Committee, my name is Rebecca Quinn, and I serve as an associate director at the Center for Rural Health at the University of North Dakota School of Medicine and Health Sciences.

North Dakota has made many strides in expanding the continuum of care available for individuals, but there continues to be populations either unserved or receiving inappropriate services. Examples include those with complex co-occurring neurological and behavioral health needs or individuals with co-occurring substance use disorder, criminal justice history, and/or sex offender registry.

During the last interim, a coalition of professionals from diverse organizations, including the ND Department of Health and Human Services, geropsychiatric providers, and hospital and medical associations, began working to address behavioral health challenges in LTC and psychiatric facilities. This work made great strides, and the current geropsychiatric facility bill came out of this process. However, it was identified that there was more to be done on examining community-based options for this unique population. This continuing resolution would continue this needed work and determine the best avenues for the development of appropriate services and prevent inappropriate placement, homelessness, or even incarceration.

Thank you for your consideration and I stand for any questions,

Rebecca Quinn; LMSW, CBIST Associate Director Center for Rural Health 1301 N Columbia Road, Stop 9037 Grand Forks, ND 58202-9037

Behavioral Health and Long-term Care Continuum

Inpatient

- State Hospital
- Psych Hospital
- Hospital Inpatient

Skilled Nursing Facilities (SNF)

Community Based Intensive Behavioral Long-Term Care

Currently Unavailable

- Needed for:
- Younger individuals with neurological/behavioral needs
- Need options for cooccurring w/substance use & criminal justice history

Geropsych Facilities

- Currently 3 facilities
- Average age 67
- Both SMI & Medical need
- Seeing younger; co-occurring w/ substance use & criminal justice history

Basic Care

- Basic Care Facilities
- Specialized Basic Care:
 - o 2 Brain Injury Group Homes
 - o Memory Care Units

Home and Community Based Services

- Agency Adult Foster Homes
- 1:1 Services in home up to 24 hrs
- Other QSP services

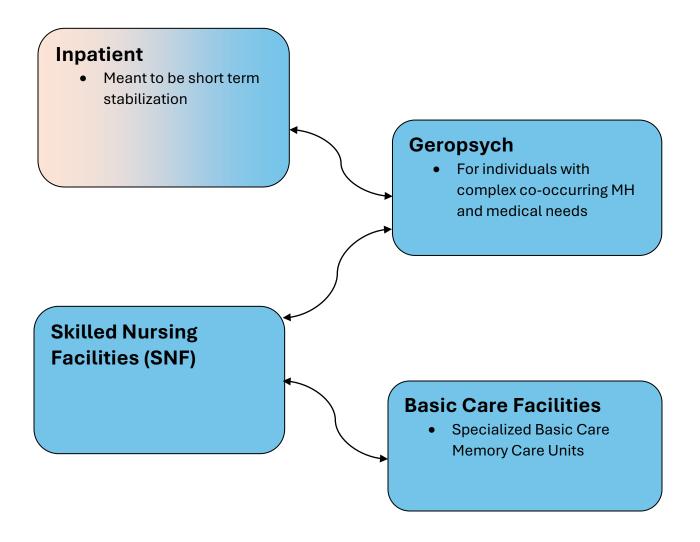
Various Community Based Services

Services based on individuals needs and eligibility

- Human Service Centers
- 1915l
- SUD Voucher
- Etc.

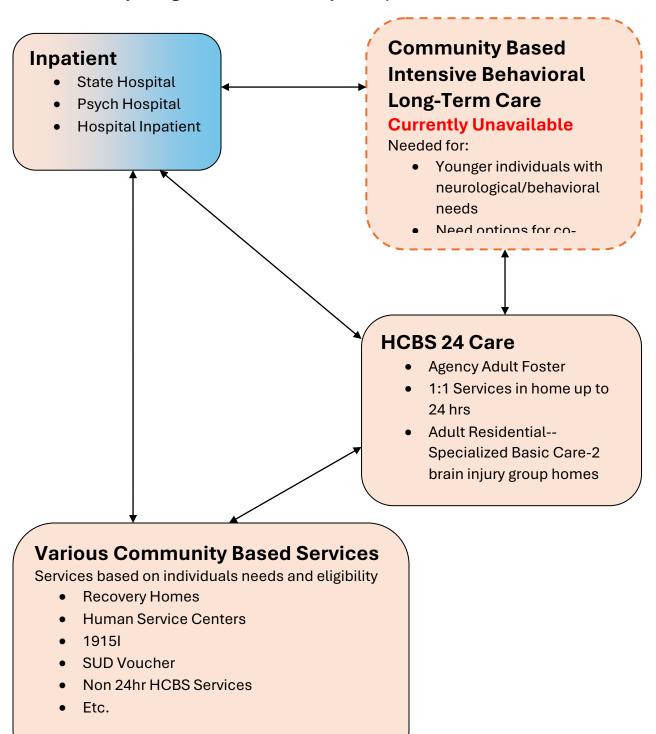
Facility Based Continum

Best suited for older adults with co-occuring needs, complex medical needs



Community Based Continuum

Better fit for younger, less medically complex



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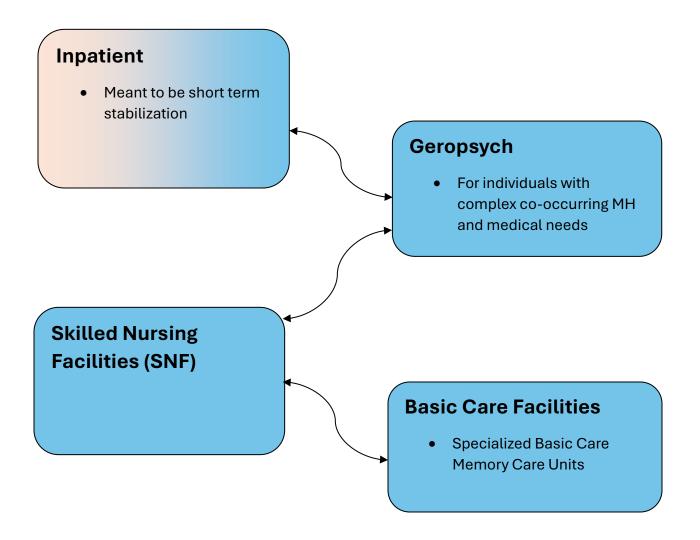
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