

Governor's Task Force on Mental Health:

Appendices to Draft Mental Health Overview 7/20/16

Appendix I: Governor's Executive Order

STATE OF MINNESOTA

EXECUTIVE DEPARTMENT



MARK DAYTON
GOVERNOR

Executive Order 16-02

Establishing the Governor's Task Force on Mental Health

I, Mark Dayton, Governor of the State of Minnesota, by virtue of the authority vested in me by the Constitution and applicable statutes, do hereby issue this Executive Order:

Whereas, more than 200,000 adults and 75,000 children in Minnesota live with a mental illness;

Whereas, people wait an average of ten years between first experiencing mental health symptoms and accessing treatment;

Whereas, over 50 percent of children and adults in Minnesota who experience homelessness live with a mental illness;

Whereas, Minnesotans who seek mental health services experience gaps in the current mental health system, leading to inappropriate placement in mental health services, or to not receiving care altogether;

Whereas, adults with a serious and persistent mental illness are dying, on average, 25 years earlier than the general public due to heart disease, lung disease, diabetes and cancer;

Whereas, numerous reports have highlighted the cross-sector challenges faced by Minnesotans in need of mental health care, and recommended developing and implementing a more comprehensive continuum of mental health services; and

Whereas, Minnesotans who live with serious mental illnesses can live healthy and productive lives when high-quality and effective mental health services are available to them.

Now, Therefore, I hereby order that:

1. The Governor's Task Force on Mental Health is created to advise the Governor and Legislature on mental health system improvements within the State of Minnesota.
2. The purpose of the Task Force is to develop comprehensive recommendations to design, implement, and sustain a full continuum of mental health services throughout Minnesota.
3. In addition, the Task Force will make recommendations on:
 - a. Developing and sustaining a comprehensive and sustainable continuum of care for children and adults with mental illnesses in Minnesota, including policies, legislative changes, and funding;
 - b. Clear definition for the roles and responsibilities for the state, counties, hospitals, community mental health service providers, and other responsible entities in designing, developing, delivering, and sustaining Minnesota's continuum of mental health care;
 - c. Reforms needed to support timely and successful transition between levels of care, including early intervention services and substance abuse services; and
 - d. Expanding the capacity of Minnesota's mental health system to responsively serve people of diverse cultures and backgrounds.
4. The task force shall consist of members appointed by the Governor, including:
 - a. The Commissioner of the Department of Human Services;
 - b. 4 individuals or family members of individuals with lived experience of mental health issues;
 - c. 2 mental health advocates;
 - d. 2 representatives of community mental health services;
 - e. 2 representatives of hospital systems;
 - f. 2 representatives from law enforcement;
 - g. A representative from the counties; and
 - h. A representative from the judicial branch.
5. The task force shall include four ex-officio leaders from state agencies, who shall be appointed by the Governor:
 - a. The Commissioner of the Department of Health;
 - b. The Commissioner of the Department of Corrections;
 - c. The State Director to Prevent and End Homelessness; and
 - d. The Ombudsperson for Mental Health and Developmental Disabilities.
6. The task force shall include four ex-officio legislative members, who shall be appointed by caucus leadership:
 - a. A Member of the Majority Party in the Senate;
 - b. A Member of the Minority Party in the Senate;
 - c. A Member of the Majority Party in the House of Representatives; and
 - d. A Member of the Minority Party in the House of Representatives.
7. The chair of the Task Force will be the Commissioner of the Department of Human Services.

8. The Task Force will report to the Governor's Office, the Legislature, and the public by November 15, 2016.
9. The Commissioner of the Department of Human Services will provide general administrative and technical support to the Task Force.
10. The Task Force will make its meetings open to the public and provide opportunities for public comment.

This Executive Order is effective fifteen days after publication in the State Register and filing with the Secretary of State, and shall remain in effect until rescinded by proper authority or until it expires in accordance with Minnesota Statutes, section 4.035, subdivision 3.

In Testimony Whereof, I have set my hand on this 27th day of April, 2016.



Mark Dayton
Governor

Filed According to Law:



Steve Simon
Secretary of State



Appendix II: Links to Mental Health Reports

The following list contains recent reports relevant to mental health and mental illness in Minnesota that are available online.

1. [2014 Report to the Governor and Legislature by the State Advisory Council on Mental Health and Subcommittee on Children's Mental Health \(PDF\)](#)
2. [2015 Status of Long Term Services and Supports \(DHS\)](#)
3. [Adult Mental Health Reform 2020 Steering Committee and Workgroups](#)
4. [Advancing Health Equity 2014 \(MN Department of Health\)](#)
5. [American Indian Symposium on Mental Health & Chemical Dependency Briefing Book \(PDF\)](#)
6. [Annual Report on the Use and Availability of Home and Community-Based Services Waivers for Persons with Disabilities 2012 \(DHS\)](#)
7. [Blueprint for a Children's Mental Health System of Care \(PDF\)](#)
8. [Chemical and Mental Health Services Administration: Report on the Utilization of the Community Behavioral Health Hospitals \(PDF\)](#)
9. [Chemical and Mental Health Services Transformation Advisory Task Force: Recommendations on the Continuum of Services \(Saint Paul: Children and Adult Mental Health Divisions, Chemical and Mental Health Services Administration, December 2010\).](#)
10. [Chemical and Mental Health Services Transformation Advisory Task Force; Recommendations on the Continuum of Services \(PDF\)](#)
11. [Chemical and Mental Health Services Transformation: State Operated Services Redesign in Support of the Resilience and Recovery of the People We Serve](#)
12. [Children's Mental Health Hospital Discharge/Transition to the Community Action Plan \(PDF\)](#)
13. [Cultural and Ethnic Communities Leadership Council \(CECLC\) Legislative Report 2015.](#)
14. [DHS Gaps Analysis Study 2015 \(Wilder Research for DHS\)](#)
15. [FY2014-15 Substance Abuse and Mental Health Block Grant Report \(DHS\) \(go to very bottom of page for information on how to access the latest Block Grant Report\)](#)
16. [Gaps Analysis Study, DHS](#)
17. [Guidelines for Culturally Competent Organizations \(PDF\)](#)
18. [Improving Mental Health and Well-Being: A Vision for Minnesota's Public Health System](#)
19. [Infant, Child and Adolescent Mental Health Work Group Summary Report \(PDF\)](#)
20. [Law Enforcement in Minnesota Schools: A Statewide Survey of School Resource Officers](#)
21. [Mental and Behavioral Health: Options and Opportunities for Minnesota 2015 \(MN Hospital Association\)](#)
22. [Mental Health Acute Care Needs Report](#)
23. [Mental Health Acute Care Needs Report: A Report to the Chairs of the Senate and House Health and Human Services Committees \(PDF\)](#)
24. [Mental Health Problems and Treatment Receipt among Youth in Minnesota: Data from 2010 Minnesota Student Survey \(PDF\)](#)
25. [Mental Health Service Delivery and Finance Reform: Case Management Roles and Functions of Counties and Health Plans Report to the Legislature \(PDF\)](#)
26. [Mental Health Services in County Jails](#)
27. [Minnesota State Substance Abuse Strategy \(DHS and partner agencies\)](#)
28. [Minnesota Student Survey](#)
29. [Minnesota's Model of Care for Substance Use Disorders 2013 \(DHS\)](#)
30. [Minnesota's Olmstead Plan](#)

31. [MMHAG Evidence-Based Model Benefit Set: Treatments and Necessary Supports for Mental and Co-Existing Chemical Health Disorders \(PDF\)](#)
32. [Offenders with Mental Illness: Legislative Report](#)
33. [Plan for the Anoka Metro Regional Treatment Center 2014 \(DHS\)](#)
34. [Reimbursing Children's Residential Mental Health Services in Iowa, North Dakota, South Dakota and Wisconsin \(PDF\)](#)
35. [Report on Care Coordination for Children with High-Cost Mental Health Conditions \(PDF\)](#)
36. [Report on the Utilization of the Community Behavioral Health Hospitals](#)
37. [Reshaping Mental Health Services for American Indians in Minnesota \(American Indian Mental Health Advisory Council\) \(PDF\)](#)
38. [The Riverwood Centers Closure: A System Analysis](#)
39. [Roadmap to a Healthier Minnesota: Recommendations of the Minnesota Health Care Reform Task Force](#)
40. [The Role of the Collaboratives in the Children's Mental Health System: Report to the 2003 Minnesota Legislature \(PDF\)](#)
41. [Rule 79 Case Management for Children – 2004 Caseload Survey Results: Trends from 1992-2004 \(PDF\)](#)
42. [Rural Health Advisory Committee's Report on Mental Health and Primary Care \(PDF\)](#)
43. [Rural Health Advisory Committee's Report on Tele-mental Health in Rural Minnesota \(PDF\)](#)
44. [State-Operated Human Services, Office of the Legislative Auditor](#)
45. [Task Force on Collaborative Services Report: A Report to the Minnesota Legislature \(PDF\)](#)

Links to reports from mental health task forces in other states (from Paul Goering)

1. New York: <http://www1.nyc.gov/assets/criminaljustice/downloads/pdfs/annual-report-complete.pdf>
2. New Jersey: http://www.state.nj.us/humanservices/dmhas/initiatives/wellness/ACTF_Rept_Sept2010.pdf
3. North Carolina: <http://www.ncdhhs.gov/about/departments/initiatives/task-force-mental-health-substance-use>
4. Virginia: <http://www.dbhds.virginia.gov/individuals-and-families/mental-health-services/mental-health-task-force>
5. Wisconsin: <http://legis.wisconsin.gov/assembly/vos/eupdates/Pages/Task%20Force%20on%20Mental%20Health.aspx>
<http://www.washingtontimes.com/news/2014/jan/22/wisconsin-senate-to-approve-mental-health-bills/>
<http://www.nbc15.com/news/headlines/Assembly-to-take-up-mental-health-proposals-227102551.html>
6. Delaware: [http://legis.delaware.gov/LIS/lis148.nsf/vwLegislation/SCR+29/\\$file/legis.html?open](http://legis.delaware.gov/LIS/lis148.nsf/vwLegislation/SCR+29/$file/legis.html?open) (2015)
7. Oregon: https://www.oregon.gov/gov/Documents/executive_orders/ExecutiveOrder03-15.pdf

8. Maryland:
<http://mgaleg.maryland.gov/webmga/frmMain.aspx?id=sb0074&stab=01&pid=billpage&tab=subject3&ys=2015RS>
<http://msa.maryland.gov/msa/mdmanual/26excom/html/23maternal.html>
9. California: <http://www.courts.ca.gov/mhiitf.htm>
10. New Mexico/Albuquerque: <https://www.cabq.gov/council/projects/current-projects/task-force-on-behavioral-health>

Reports that do not appear to be accessible online:

1. Mental Health Services Summary 2015 (DHS)
2. Minnesota's Mental Health Systems Gaps 2015 (DHS)
3. Needs Assessment 2016: Excellence in Mental Health Act in Minnesota, by Trudy Ohnsorg, Cincinnatus, under contract to the Mental Health Division, Minnesota Department of Human Services, June 13, 2016.

Appendix III: Adult Mental Health Initiative Regions and Children’s Collaborative Regions

Adult Mental Health Initiative Regions:

| Initiative | Counties/Tribes |
|--|--|
| Northwest Minnesota 8 | Polk, Kittson, Mahnomen, Marshall, Norman, Pennington, Red Lake, Roseau |
| Region 2 | Hubbard, Beltrami, Clearwater, Lake of the Woods |
| Region 3 North | Lake, Carlson, St. Louis, Cook, Itasca, Koochiching, Fond du Lac Band of Lake Superior Chippewa, Grand Portage Band of Lake Superior Chippewa, Bois Forte Band of Lake Superior Chippewa |
| BCOW | Becker, Clay, Otter Tail, Wilkin |
| Region 5+ | Crow Wing, Aitkin, Cass, Morrison, Todd, Wadena |
| Region 7 East | Isanti, Chisago, Kanabec, Mille Lacs, Pine |
| Region 4 South | Grant, Douglas, Pope, Stevens, Traverse |
| CommUNITY | Sherburne, Benton, Stearns, Wright |
| Southwest 18 | Cottonwood, Big Stone, Chippewa, Jackson, Kandiyohi, Lac Qui Parle, Lincoln, Lyon, McLeod, Meeker, Murray, Nobles, Pipestone, Redwood, Renville, Rock, Yellow Medicine |
| South Central Community Based Initiative (SCCBI) | Blue Earth, Brown, Watonwan, Faribault, Martin, Freeborn, Le Sueur, Nicollet, Rice, Sibley |
| CREST | Olmsted, Winona, Fillmore, Goodhue, Houston, Mower, Steele, Dodge, Wabasha, Waseca, Prairie Island Reservation |
| Individual county or tribal regions | White Earth Nation, Hennepin, Dakota, Ramsey, Washington, Anoka, and Carver/Scott |

A map of the Children’s Mental Health and Family Services Collaborative regions is available at:

<https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5371-ENG>

Appendix IV: Acronyms in the Mental Health System

ACT: Assertive Community Treatment
 ADA: Affordable Care Act
 ADAD: Alcohol & Drug Abuse Division of the MN Department of Human Services
 AMHD: Adult Mental Health Division (of DHS)
 AMRTC: Anoka Metro Regional Treatment Center
 ARMHS: Adult Rehabilitative Mental Health Services
 CADI: Community Alternatives for Disabled Individuals
 C.A.R.E.: Community Addiction and Recovery Enterprise
 CBHH: Community Behavioral Health Hospital
 CMH: Children’s Mental Health Division (of DHS)
 CMS: Centers for Medicare and Medicaid Services
 CSA: Community Services Administration of DHS
 CSS/Synergy: Community Support Services/Synergy
 CTSS: Children’s Therapeutic Services and Supports
 DBT: Dialectical Behavior Therapy
 DCT: Direct Care and Treatment
 DHS: Department of Human Services
 DRG: Diagnosis-related group
 ED: Emergency Department or Emotional Disturbance
 HCBS: Home and Community Based Services
 HCMC: Hennepin County Medical Center
 IMD: Institute for Mental Disease
 IRTS: Intensive Residential Treatment Service
 ITSFC: Intensive Treatment Services in Foster Care
 MA: Medical Assistance
 MHBA: Mental Health Behavioral Aide
 MHSATS: Mental Health and Substance Abuse Treatment Services
 MMHAG: Minnesota Mental Health Action Group
 MSOCS: Minnesota State Operated Community Services
 NABD: Non-acute bed day
 OLA: Office of the Legislative Auditor
 SAMHSA: Substance Abuse and Mental Health Services Administration
 SED: Severe Emotional Disturbance
 SMHA: State Mental Health Authority (federal term for CSA within DHS)
 SOS: State Operated Services
 SPMI: Serious and persistent mental illness
 SSA: State Substance Abuse Authority or Single State Authority (federal term for CSA within DHS)
 UM: Utilization management