Crisis Stabilization Unit
Legislative Summary
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PREPARED BY:
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Rapid City, SD
EXECUTIVE SUMMARY

The proposed Crisis Stabilization Unit at Pennington County’s Care Campus would house the existing Crisis Care (maximum 24 hour stay) and a new 16 bed Stabilization (up to 5 days) Unit to serve the acute behavioral needs in Western South Dakota. The projected cost is $4.6 million, with a one-time request from the State of South Dakota to fund the full projected design and construction cost of the Crisis Stabilization Unit.

The Western South Dakota service area primarily consists of rural counties and four Native American Reservations. Currently individuals not able to be immediately stabilized in their communities are sent to the Human Services Center (HSC), located in Yankton, SD, approximately six hours from Rapid City. HSC has limited beds and operates at full census a majority of the time. The distance creates isolation for the client and challenges the discharge planning process, while placing undue burden on law enforcement agencies in transporting mental health clients hundreds of miles to receive treatment.

Our community has a demonstrated history of forming public/private partnerships to better serve the residents in Western South Dakota. In 2011, Behavior Management Systems, City of Rapid City, Pennington County, Monument Health and private philanthropy partnered to create the Crisis Care Center, a first in the state. Crisis Care provides up to 24 hour care for adults suffering from an acute mental health or substance abuse crisis.

In 2018, a $16.3 million investment by the community built the Care Campus, bringing all the providers under one roof with some 50,000 admissions in the first two years of operation.

The need to improve access and comprehensiveness of the mental health delivery system has been recognized for a number of years and has undergone a number of studies, task forces and committees. This need has also been recognized by the Legislature and has resulted in a number of interim legislative summer studies as outlined under the Demonstrated Need section.
SUSTAINABILITY

Collaboration is key to the success of innovative projects addressing some of the most difficult challenges in society. As we did with the Care Campus, we again have committed partners at the table willing to do what it takes to succeed. We have a track record of forming strong public-private partnerships. Years of study and research make NOW the time to launch this project. Potential revenue streams have been identified to support the annual operating costs. In addition, we anticipate savings from a costly and inefficient system now in place.

Care Campus Awards:
· South Dakota Association of County Commissioners – 2019 County Achievement Award
· National Association of Counties – 2020 Achievement Award for ‘Criminal Justice and Public Safety’
CRISIS STABILIZATION UNIT SUMMARY

The Crisis Stabilization Unit would improve the continuum of mental health care by providing a regionalized approach to crisis intervention services, allowing clients to stay for up to five days while stabilizing their mental health crisis and adjusting their psychiatric medications as needed, reducing the reliance on the Human Services Center for these services. Using a regionalized approach allows clients to access natural supports including their families, and provides a seamless transition into ongoing community-based services, reducing the likelihood of people falling through the cracks and entering the revolving cycle of inpatient services. This solution would also result in a more efficient and effective use of law enforcement time when responding to mental health crisis calls and reduce transportation time.

Behavior Management Systems (BMS) currently provides clinical services at the Crisis Care Center and will be the primary provider of clinical services at the Crisis Stabilization Unit. BMS is one of 11 community mental health centers in South Dakota serving over 11,000 people from a 20,000 square mile area. BMS’s comprehensive counseling services and treatment programs treat addictive behavior, disabling anxiety, schizophrenia, stress, suicide and much of what falls in-between.

Crisis Stabilization Unit Services

- Outpatient Crisis Intervention
- Case Management
- Medication Stabilization/Psychiatric Coverage
- Involuntary Commitment Processing
- Qualified Mental Health Professional onsite 24 hours a day
- Petition Assessment
- Initiate Therapeutic Interventions
- Mental Health and Substance Use Therapies
- Treatment Groups
- Develop Safety Plan and Comprehensive Discharge Plan for continued community based care

Crisis Stabilization Unit Partners

- Behavior Management Systems
- Monument Health
- Great Plains Tribal Leaders Health Board
- John T. Vucurevich Foundation
- Pennington County
- Pennington County Sheriff’s Office
- Pennington County Health & Human Services
- City of Rapid City
- Rapid City Police Department
- State of South Dakota
- South Dakota Department of Social Services
- Partnership agreements to be formed with other Western South Dakota counties
PROPOSED SITE

The Crisis Stabilization Unit would be built on a 1.77 acre parcel of land currently supporting the Care Campus. A 70,000 square foot, single point of entry facility housing the following programs:

- Crisis Care Center
- Detoxification Unit
- Residential Treatment (Substance Use Disorder)
- Veteran Services

- Safe Solutions
- Outpatient Treatment
- Case Management Services
- Economic Assistance
TIMELINE OF DEMONSTRATED NEED

2015 - Leona M. and Harry B. Helmsley Charitable Trust presented the findings from “Focus on South Dakota-A Picture of Health.” Research looked at mental health needs in rural areas and barriers to accessing care. More than half of the respondents reported they would have to travel more than 20 miles to receive mental health care. Respondents from rural, isolated, and reservation areas reported significantly farther distances than urban counterparts.

2016 - Chief Justice Gilbertson formed Task Force on Community Justice in Mental Illness Intervention. Of primary concern was the backlog of mental health competency evaluations of criminal justice defendants and the delays in restoring competency for those found to be incompetent to stand trial.

Task Force Recommendations and Resulting 2017 Legislation:
1. Provide tools to law enforcement to address mental health crises early and prevent jail admissions
2. Expedite competency exams ensuring speedier court processing and shorter jail stays
3. Divert people from the criminal justice system into mental health treatment
4. Improve access to mental illness treatment in criminal justice system
5. Require stakeholders to identify ways to improve criminal justice responses for those with mental illness
   (HB 1183 - provide and revise certain provisions regarding mental health procedures in criminal justice, to make an appropriation therefor, and to declare an emergency.)

2018 - Leona M. and Harry B. Helmsley Charitable Trust provided $116,921 to study mental health services in Western South Dakota. Between November 2018 and September 2019, the National Council for Behavioral Health worked closely with Pennington County Health and Human Services, the Western South Dakota Behavioral Health Alliance, and other key stakeholders to develop key recommendations for a comprehensive behavioral health care continuum to best serve adults with mental health and substance use disorder challenges in Pennington County. #1 recommendation of the National Council for Behavioral Health was to develop a Crisis Stabilization Unit in Pennington County to serve Western South Dakota.

2018 - Access to Mental Health Services Legislative Summer Study Committee
Committee Recommendations and Resulting 2019 Legislation:
1. Provide for a statewide resource information system - SB 8
2. To provide for legislative task forces to study, report, develop and consider recommendations and proposed legislation regarding sustainable improvements to the continuum of mental health services available in the state - SCR 2
2019 - Redefine Acute Mental Health Hospitalization Summer Study Committee  

*Committee Recommendations and Resulting 2020 Legislation:*  
1. In order to successfully regionalize the manner in which mental health services are provided to the residents of this state, the task force recommended that the Department of Social Services undertake an in-depth study and comprehensive review of existing and potential delivery models. The task force determined that the regionalization of services would necessitate an expansion of service delivery capacity at various locales throughout the state - **HRC6004**

2019 - Reduce Overall Use of Acute Mental Health Hospitalizations Summer Study Committee  

*Committee Recommendations and Resulting 2020 Legislation:*  
1. Requirements for mental health facilities to be designated as “appropriate regional facilities” by the Department of Social Services - **SB 4**  
2. Require follow-up mental health examinations every 24 hours for individuals awaiting involuntary commitment hearings - **HB 1011**  
3. Provide notification to the chair of a county board of mental illness whenever an individual violates an outpatient commitment order - **HB 1009**  
4. Extend civil immunity to qualified mental health professionals at appropriate regional facilities - **SB 5**  
5. Clarify who can provide testimony during an involuntary commitment hearing - **HB 1010**  
6. Allow qualified mental health professionals at appropriate regional facilities to initiate a 24-hour hold of an individual who needs immediate intervention - **SB 5**

2019 - Leverage Telehealth and Telemedicine Summer Study Committee  

*Committee Recommendations and Resulting 2020 Legislation:*  
1. An Act to revise certain provisions regarding the use of telehealth technologies - **HB 1005**  
2. An Act to provide for the use of electronic communication in the involuntary commitment process and to declare an emergency - **SB 1**  
3. An Act to require the Department of Social Services to fully support a statewide centralized resource information system - **SB 2**

2020 - Leona M. and Harry B. Helmsley Charitable Trust fund Virtual Crisis Care  
In October, 18 South Dakota sheriff’s offices joined this unique and innovative pilot program. With the use of a tablet, a mental health professional assists law enforcement through safety assessment, stabilization and de-escalation during a crisis situation. Virtual Crisis Care is a partnership between Avera eCARE® and the South Dakota Unified Judicial System in collaboration with the South Dakota Sheriffs’ Association and community mental health centers with funding from The Leona M. and Harry B. Helmsley Charitable Trust.

2020 - Mental Health Services Delivery Summer Study Committee  

*Committee Recommendations and Resulting 2021 Legislation:*  
TBD
TESTIMONIALS AND ACKNOWLEDGMENTS

Fred Lamphere  
Butte County Sheriff  
“The need for a regional mental healthcare facility has never been more critical. The burden on law enforcement and county budgets is mushrooming. The current system, requiring long trips across the state, is backlogged, inefficient, costly and not a good option for anyone involved. Having a regional facility would not only benefit the agencies dealing with these individuals, but also the clients and their families, and our taxpaying citizens.”

Paulette Davidson  
Monument Health President & CEO  
“Monument Health supports the request and validates the need for a Crisis Stabilization Unit in Rapid City, as a collaborative effort to meet the mental health needs of our region and state. Most individuals suffering a mental health crisis can be stabilized within five days. Currently individuals that can't be immediately stabilized are transferred to the Human Services Center in Yankton. A Crisis Stabilization Unit in Rapid City would allow individuals to be cared for and stabilized closer to family and friends. This local support results in better patient outcomes, while also preserving capacity at the Human Services Center in Yankton for higher need clients. The Crisis Stabilization Unit would also reduce the need for and costs of inpatient hospitalizations in situations when stability can be achieved in a more appropriate care setting.”

Gary Drewes  
Pennington County Commission Chairman  
“Citizens facing mental health challenges is a major concern and needs effective attention at a more local or regional level, to better and more affordably care for their evaluation and treatment. Many of these individuals require continued services and distance of services is a critical factor. A Crisis Stabilization Unit in Pennington County would serve a large population center in western South Dakota.”

Linda Reidt Kilber  
Behavior Management Systems CEO  
“As the largest provider of behavioral health services in Western South Dakota, Behavior Management Systems recognizes that the best care happens when people can be served in their community and close to their natural supports. The Crisis Stabilization Unit provides an innovative solution to improve the standard of care through this public-private partnership. Western South Dakota has a long history of forming similar successful public-private partnerships bringing efficient and effective services to our most vulnerable population.”
Thank you
for your consideration of the request to fund the
Crisis Stabilization Unit