

## North Dakota Human Services Interim Committee

May 10, 2016, Grand Forks, ND

Testimony submitted by Debbie Swanson, MS, RN, Director, Grand Forks Public Health Department

Chairwoman Hogan and Members of the Committee:

My name is Debbie Swanson and I am the Director of the Grand Forks Public Health Department. It is my privilege to appear before you today to provide you with information on the efforts of the Grand Forks Public Health Department to enhance behavioral health services in Grand Forks County, and also the significant collaborative efforts that exist to address the behavioral health needs of our residents.

Behavioral health, as a significant need, came to our attention with the completion of a community health assessment in 2013. The Alliance for Healthcare Access, a group which was established to improve health care access in the community supported efforts to bring a community health center to Grand Forks. Once that goal was achieved, the Alliance turned its attention to the behavioral health needs of residents of our region to address the community assessment findings. The Alliance has prepared a list of community coalitions and groups working on various behavioral health challenges. This information was provided to you in your packet of welcome materials. As you can see, it is a lengthy list and demonstrates the highly collaborative nature of our community. We fully recognize the problems are complex and they involve partners working together to find solutions.

The Grand Forks Public Health Department is embarking on a new service delivery borne out of a crisis situation. We have been challenged as a community by not having a provider of social setting detoxification services in Grand Forks for more than 20 years. While Altru Health System has met the need for medical detox during this time, many residents not needing medical intervention, yet needing monitoring and lacking a safe place to sleep for the night will soon have an option. The current situation of intoxicated residents sleeping in shelter entryways, riding in law enforcement vehicles for hours, and committing crimes simply to find care in a correctional facility should become a thing of the past. We can do better as a community to care for our residents who suffer from the chronic and progressive disease of addiction. Social setting detox is about more than observation. It is about engagement. It is about engaging clients in treatment options that are most appropriate, helping them to find stable housing, and accessing behavioral and other health services that are needed. Fortunately, in the City of Grand Forks, we have many of those supports available in the same general location on South 4<sup>th</sup> Street, which you were able to tour this morning. Many of the agencies provide services at outreach locations in Grand Forks County and Region IV. The City of Grand Forks has undertaken the responsibility of operating the social detox with the commitment of these organizations to engage clients in life changing solutions to their addictions. We have hired a coordinator who will begin on May 23 and services will be available when adequate staff are hired and trained and the licensing requirements have been met.

Social setting detox does not come with third party payment, so sustainable funding from a mix of governmental organizations is needed. We would request that this continue to be available and increased as state resources allow. It is my understanding that this has been identified as a critical need in other regions of North Dakota and as recently as this month, the Substance Abuse and Mental Health

Services Administration (SAMHSA) was providing technical assistance to Region VII on the topic of social detox. Investments are needed to ensure that social detox services are robust and available in all regions. Our social detox committee has worked hard to leverage funding from a variety of public and private sources and will continue to share in the responsibility of caring for our own residents.

Behavioral health services and substance use disorder treatment and support services should not be dependent solely on grants. They are basic health needs that should be treated with the same sense of urgency as other chronic illnesses. In most situations, we don't ask our citizens to pay for their emergency care, cancer treatment or heart disease rehabilitation out of their pocket and we don't add their names to waiting lists to see providers. Thanks to the North Dakota Legislature, we have expanded Medicaid in North Dakota as a safety net for those who are not able to obtain employer sponsored health insurance. Thank you to the North Dakota legislature for supporting an expanded Medicaid program in our state. You have truly saved lives. The Affordable Care Act (ACA) has done more to improve the health of North Dakotans than just about any public health intervention could achieve. The ACA has made health care available to more people in North Dakota, thus reducing health disparities. Actions taken to increase the behavioral health and addiction counseling workforce during the last legislative session are appreciated and will hopefully continue – also ensuring greater access.

Lastly, I would like to take a few moments to talk about the growing problem of opioid addiction – often leading to heroin and other dangerous drug overdoses in our region. Overdose deaths have now surpassed motor vehicle crashes as the number one cause of injury deaths. The impact in our region is staggering: 226 hospital admissions for overdoses at the Altru Emergency Room in 2015; 51 overdose deaths reported by the coroner in 2014 from the Northeast region of ND and Northwest Minnesota; 50% of new foster care admissions in 2015 were due to parental drug abuse; and countless days of lost productivity and potential years of life lost. The full report containing this information is attached to my testimony. I would like to recognize MPH student Laura Ahmed for her work with our committee to help us define the impact of this public health crisis.

This is a complex problem and finding the right mix of solutions will be equally challenging. One treatment that can be a life – saving and cost saving intervention is medication assisted treatment. By providing specific medications, under the supervision of a specially licensed provider, and with counseling and other therapies, many people can and do recover. The authorizing infrastructure is in place, but incentives are needed to train and encourage more providers to take on this responsibility. Without this treatment more widely available across the state, taxpayers will continue to pay the costs through law enforcement and housing in correctional facilities.

In order to build awareness and begin to find community driven solutions, the Prescription and Synthetic Drug Abuse Community Partners invite you to attend our community forum this evening, “Deadly Dose” where the documentary “Faded” will be shown. This film, produced by Grand Forks native MeiLi Smith, examines the devastating consequences of drug overdoses from drug abuse. A panel representing law enforcement, health care, public health, human services and education will follow the film and take questions from the audience. We look forward to the support of the ND Legislature in the future, as we seek to find solutions to this challenge. Thank you for your attention.