

Access to Health & Human Services Workgroup of the
CJCC Early Intervention & Prevention Committee
February 2, 2022 at 1:00 p.m. via Zoom

Present: Andy Kranz, Chris Meyer, Rachel Stoll, Amy Sixty, Deb McClellan, Katie Schild, Trish Chandler, Kalene Engel, Naomi Morris, Aimee Buckmaster, Karin Sonneman, Dave Glithero, Erik Sievers, Steve Buswell, Anne Vandeberg, Linda Soderstrom

Minutes by: Kalene Engel

Introductions: Persons present introduced themselves and their role.

History of the Workgroup: Kalene reviewed the history and purpose of the workgroup. She discussed the Sequential Intercept Map (SIM) Workshop that was held earlier this year which identified criminal justice system gaps for persons with mental health and/or substance abuse issues. The current workgroup (and six others) were formed to address some of these gaps. This workgroup reports to the Early Intervention and Prevention (EIP) Committee which reports to the CJCC Main Council. This purpose of the Access to Health and Human Services Workgroup is to improve access to Winona County Health and Human Services (HHS) programs and services.

Review of Workplan: A draft workplan was distributed with the Agenda. Erik asked for clarification on the goal of the workgroup. Kalene noted that the SIM Report did not provide specifics about difficulty of accessing HHS programs and the workplan included activities aimed at figuring out IF there are difficulties and if so, what could be done about them. Chris noted that the workplan is merely a draft which includes several proposed activities and it is up to the workgroup to determine the course of action. She also noted there are state and federal rules and processes that HHS must be followed by HHS and that understanding some of those limitations would help her be a better advocate for policy change or additional funding. (As an example of such limitations, see the attached “Restrictions on Applying for Health Insurance for Incarcerated Individuals which was provided by Naomi Morris in advance of the meeting). Attendees reviewed the workplan and considered two of the proposed actions, as follows:

- *Expand Knowledge of Existing HHS Structure and Programs:* Discussion was held on the benefits of knowing more about the numerous different programs that are administered by HHS, perhaps via a mapping of the department, including what department or group is responsible for the administration of each program. Hence, sequentially the approach would be as follows: determine what programs currently exist, who administers the programs, how are they administered, what are the gaps or issues in the delivery of services and what can be done to improve the service delivery. There was general agreement that the number of programs and complexities involved in the programs can be overwhelming. Naomi stated that her staff does try to connect people with all of the services and supports to which they are entitled, but there some programs

are siloed. Naomi stated that she could bring a request from this group to the HHS supervisors to create a flowchart of the HHS structure/organization including who supervises the administration of what programs. The supervisor group meets weekly, so she will bring this up at the next meeting. Going forward, the supervisors could possibly provide additional education about the programs that they supervise.

- *Surveys/Focus Groups – of Navigators/Employees and Consumers:* The workplan includes possibly surveys or focus groups of consumers, HHS employees and people who help others access services (collectively referred to as navigators). Naomi noted that certain programs are audited by the state, which includes surveys of community partners and consumers. SNAP is a program that is audited frequently. A common response from consumers to the surveys is that they feel that all HHS workers do everything and touch everything and should know everything about all HHS programs. Thus, providing education about service delivery to the public to manage their expectations could become part of the workplan. Chris noted that the County Human Resources Department was uncomfortable having a survey of county employees as part of this workgroup. However, if this was something that HHS decided they wanted to approach internally, that may quell those concerns. Insofar as a survey of the navigators is concerned, the HHS Advisory Committee members of the workgroup created a draft survey for the navigators, along with an introductory letter and a page with program explanations and hyperlinks. Collectively, the group agreed to “test drive” the survey over the next week to have it ready in time for the next meeting of the Navigator Network on February 8th. The final survey could then be administered to the Navigator Network prior to the next meeting of this workgroup. Link to survey: <https://forms.gle/4XCyCbW77pbSXEuw8>

Other: Naomi shared the link to a new website from Minnesota Department of Health and Human Services where people can go to apply for benefits, with the exception of health care benefits: <https://mnbenefits.mn.gov/>. Applications for healthcare for persons who are not aged and disabled can be completed at <http://www.mnsure.org>. There is currently no online application for aged or disabled persons who are seeking health insurance.

Next Steps:

- Naomi will communicate the request for HHS supervisors to create a flowchart of the HHS structure/organization including who supervises the administration of what programs
- Members of this workgroup will “test drive” the survey and provide feedback to Kalene (either on the survey or separately) by February 7th. Administration of the survey will be discussed at the Navigator Network and, if approved, can begin at that time.

Next Meetings: Workgroup meetings will occur on the 1st Tuesday of the month at noon. The next meeting is 3/1 at noon.

Adjournment: Meeting adjourned at 1:50 p.m.

RESTRICTIONS ON APPLYING FOR HEALTH INSURANCE FOR INCARCERATED INDIVIDUALS
FROM NAOMI MORRIS 2/1/22

1. Healthcare

- Can apply for healthcare in advance of release but we do need to verify release date. Cannot apply more than 45 days prior to release. If the individual is aged (65+) or disabled, Winona County will process. If not aged or disabled, DHS will process the application.
 - Confirm the individual has been released via one of the options below and document the details in the case notes:
 - The Facility Section on the DHS-5038
 - Phone or fax contacts with the facility
 - Official correspondence from the facility with the confirmed release date listed
 - Official lists provided to the county agency by the facility containing the incarcerated individual's name and release date
 - Department of Corrections web site
 - Official jail roster
 - Verbal or written attestations are acceptable forms of verification for incarceration status only if:
 - One of the above types of verification cannot be provided.
 - The incarceration was previously unknown to the agency and where the entire incarceration period happened in the past.

2. SNAP and Cash Programs

- People under control of the penal system are not eligible for these programs.
- People are under the control of the penal system from the time of arrest. They cease to be under the control of the penal system when they are released:
 - On own recognizance
 - On bail
 - As not guilty
 - On probation
 - On parole or supervised release
 - On pardon
 - Upon completing sentence

Winona County Sequential Intercept Map
Strategic Plan (updated 2.1.22)

Goal: Improve access to county health and human services programs and services.		Intercept: -1	Reports to: HHS Advisory Committee; CJCC EIP
Objectives	Actions	Who	When
Expand knowledge of existing HHS structure & services (gain familiarity)	<ul style="list-style-type: none"> • Presentation(s)/overviews on programs administered by HHS 		
	<ul style="list-style-type: none"> • Organization/structure chart for HHS, including programs that fall under each supervisor? 	HHS Supervisors	March Meeting
	<ul style="list-style-type: none"> • Review statutes re: mandated services 		
Expand knowledge of how HHS services are communicated to the public by HHS	<ul style="list-style-type: none"> • Review HHS website & Facebook page 		
	<ul style="list-style-type: none"> • Visit to HHS offices to review publicly accessible information/documents 		
	<ul style="list-style-type: none"> • Receive presentation on outreach efforts by HHS to other organizations 		
Expand knowledge of how services are accessed by the public	<ul style="list-style-type: none"> • Staff explanation of how services are accessed 		
	<ul style="list-style-type: none"> • Written policies or other documentation (flowcharts/workflow analysis) on access 		
	<ul style="list-style-type: none"> • Walkthrough using sample case/fact situation 		
Identify bottlenecks or gaps in access	<ul style="list-style-type: none"> • Walkthrough using sample case/fact situation (above) 		
	<ul style="list-style-type: none"> • Survey/focus groups/interviews of individuals who have attempted accessing system for themselves or family 		
	<ul style="list-style-type: none"> • Survey/focus groups/interviews of “navigators” who have attempted accessing system on behalf of/with others 	Access to HHS Group “test drive” survey	2/7/22
	<ul style="list-style-type: none"> • Survey/focus groups/interviews of employees working in HHS with direct contact with consumers & their supervisors 		
Identify strategies for improving access (could be	<ul style="list-style-type: none"> • Research on what other jurisdictions have done to address gaps 		

combined with above objective)	<ul style="list-style-type: none"> • Survey/focus groups/interviews of individuals who have attempted accessing system for themselves or family 		
	<ul style="list-style-type: none"> • Survey/focus groups/interviews of “navigators” who have attempted accessing system on behalf of/with others 		
	<ul style="list-style-type: none"> • Survey/focus groups/interviews of employees working in HHS with direct contact with consumers & their supervisors 		
Evaluate strategies for improving access	<ul style="list-style-type: none"> • Identify the persons affected by the suggestion & include them in the discussion 		
	<ul style="list-style-type: none"> • Identify cost of proposed strategy 		
	<ul style="list-style-type: none"> • Weigh pros/cons of strategy 		