



July 22, 2025

Pre-Trial Mental Health Services

Ramsey County Social Services



Presenters

- Nadir Abdi, Deputy County Manager, Health and Wellness
- Sophia Thompson, Director, Social Services
- Kenya Walker, Deputy Director, Social Services
- Anna Hewitt, Manager, Social Services
- Krysta Neumann, Mental Health Supervisor, Social Services
- Amira Carter, Planning Specialist, Social Services



Agenda

- Background and Sequential Intercept Model
- Importance of Service Delivery
- Social Services in the Adult Detention Center
- Early Care Coordination
- Partner and Resident Testimony
- Learnings and Considerations
- Steps Taken to Address Gaps
- Future Goals

Goals for Today's Workshop

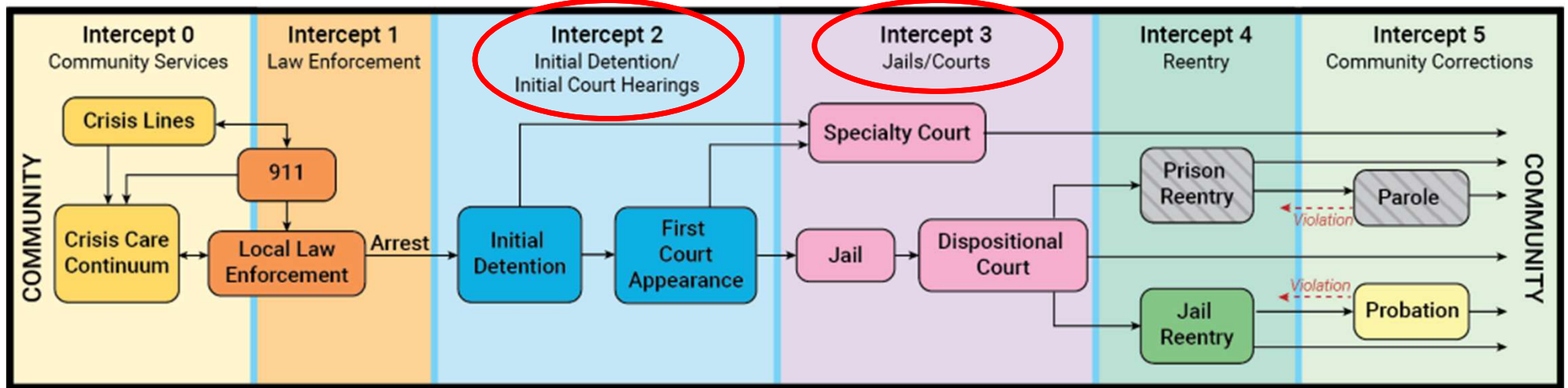
- ↑ Enhance knowledge of mental health supports provided to pre-adjudicated individuals in the Adult Detention Center (ADC)
- ↑ Strengthen awareness of current partnerships
- ↑ Expand understanding of Early Care Coordination for individuals pending a competency determination



Background

- Our work is grounded in the Sequential Intercept Model
- Other areas you have heard from:
 - Adult Mental Health Initiative
 - Appropriate Response Initiative
 - Safety & Justice

Sequential Intercept Model



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Social Services in the Adult Detention Center

Since July 2019, Social Services has provided Mental Health Services

- Mental Health Supervisor (1 Full Time Equivalent, FTE)
- Mental Health Practitioners/Professionals (4 FTEs)
 - 10 hours/day, 7 days/week, including holidays
- Early Care Coordinator (1 FTE)
- Psychiatric providers (contractors)
 - 12 hours/week
- Planning Specialist (0.5 FTE)



Examples of Services Provided in the ADC

- Suicide assessments
- Crisis stabilization
- Facility assessments
- Therapeutic interventions/services
- Training for Ramsey County Sheriff's Office and Public Health staff
- Coordination with community providers
- Resources for clients
- Collateral to assessors
- Transfers to Regions Hospital
- Psychiatric assessments
- Medication management
- Early Care Coordination (competency)

2024 Mental Health Data

- 4,420 referrals to mental health
 - Average of 368 per month
 - 709 suicide assessments
 - 347 crisis response requests
- 211 psychiatric evaluations
 - Average of 4 per week
- 393 medication management visits
 - Average of 8 per week
- 50 chart checks completed (mid-year start)
- Average response times:
 - Routine referrals: 7 days
 - Suicide assessments: 1 day
 - Crisis response: Immediate

Early Care Coordination Services

- Pilot began July 2023
- Rule 20/611
- One full-time Social Worker position at ADC
 - Bachelor of Arts/Bachelor of Science level interns
- Serving individuals in-custody in Ramsey County who have had a competency assessment ordered in their criminal case



2024 Early Care Coordination Data

- **327** individuals in-custody at time of Rule 20 Order
 - On average, representing 10% of overall population at ADC
- **76** individuals released to Bridge Planning
- Average length of incarceration: 46 days
- **71%** had not returned to custody since their release to placement

Anoka Metro Regional Treatment Center (AMRTC) Diversion Data

- **2024: 89 diversions**
 - Including Community Behavioral Health Hospital (CBHH)/Community Addiction Recovery Enterprise (CARE) placements
 - 58 individuals placed at AMRTC
- **2023: 62 diversions**
 - Including CBHH/CARE placements
 - 50 individuals placed at AMRTC
- **2022: 0 diversions**
 - 92 individuals placed at AMRTC

Microsoft Teams

Mental Health Services Interview

2025-03-18 14:33 UTC

Recorded by

Carter, Amira

Organized by

Carter, Amira

Resident Experience

“I am so thankful to have Robin’s services. She has worked for a long time to get my warrants closed and to get me into a nice place to keep my head clear. She is very nice and helped me a lot, she will help me get clothes and shower things for when I leave and helped me find a nice place to go.”

“Robin helped me get out of jail and got me into treatment. When I left treatment and was going to have a warrant, I called Robin, and she helped me get back into treatment so I did not have to have a warrant and go back to jail.”

“I am the adoptive mother of a young person who entered the Detention center a few months ago after their 3rd psychotic break. I want to write how much I appreciate this program, the communication I had from Robin, and how important programs like this are to the long term outcomes for people struggling with mental health and substance abuse who enter the justice system.

My first phone call to the Mental Health unit, not sure who that was so many months ago, was so reassuring to me that [redacted] was safe and was finally going to get the services needed. Clearly, that wasn't happening on the outside. I was given direction on how to be in communication to help with the Rule 20, was able to explain my concerns about the need for medication, current mental health as well as substance abuse, and continued denial about everything. From then as the long term planning was being put into place, Robin was in contact with me about securing programming, while listening to what [redacted] wanted and was going to be open and willing to accept to be successful in programing. [redacted] was started on meds right away and I could tell from our weekly video chats that they were starting to come back to baseline.

Again, I appreciate all you have done for KC, how much you eased my worries, and now I know they are getting the help they need. Can't thank you enough. Thank you for being there for the temporary residents, but also their families, who just want to know someone has their back.”

Learnings and Considerations

Mental Health

- Request-based referral process
- Diagnostic assessments
- Psychiatric referral limitations
- Release planning
- Group Therapy

Care Coordination

- Response time to referrals
- Barriers to release planning
- Case management involvement
- Transportation to placements

Other

- Facility considerations
- MN Direct Care & Treatment admission changes
- Injectable medications
- Proposed MN Chapter 2911 changes related to mental health
- MN Statute 611 evolution



Steps Taken to Address Current Gaps

- Internships
- Administrative support
- Increased psychiatric resources
- Trainings
- Forced Neuroleptic Treatment (NTP)
- Partnerships with stakeholders and community partners
- Grants

Grant Funding

Grants actively used:

- State Adult Mental Health Initiative Grant
- State Innovation Grant
- Department of Human Services Early Intervention to Civil Commitment Grant

Factors:

- No revenue generated through these services
- Fiscal responsibility through use of grant funding to cover expenses
 - Reduced availability in grant funding opportunities

Future Goals

