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## Impact of the Crisis on Children's Mental Health Providers February 2022

AspireMN surveyed 17 children's mental health service providers between January 26 and February 7, 2022 regarding the impact of the current workforce crisis on their ability to serve children, youth and families. (See Appendix 1 for a list of participating organizations and appendix 2 for a list of the survey questions.) These organizations provide community-based outpatient services and children's residential mental health services. The top concern cited by *all* providers is a decreased capacity to serve clients at a time of incredible need across the entire state. Organizations are cutting programs, decreasing client numbers within programs, and seeing waitlists and wait-times grow to unprecedented lengths.

100% of Day Treatment providers surveyed cited closure of programs or significantly decreased capacity to serve children.

We reduced capacity from 30-36 clients at a time to 16, and went from 4 groups to 2 groups due to staffing shortages. We are experiencing extreme staffing challenges in day treatment, with a particular difficult time finding children's therapists willing to work in a day treatment setting during the pandemic.

There are incredible wait times for CTSS Skills, Day Treatment and outpatient services. We have found that when clients lose a provider, they do not receive coverage services as they would in the past. They have to wait, sometimes several months, for a new provider to start.

Families need Day Treatment and other more intensive services, but are not able to access them due to transportation issues, quarantines, and staffing issues.

Incredible need in the community, plus a lack of capacity, plus staffing shortages – it's a disaster.

100% of DHS-licensed Children's Residential Mental Health Treatment providers surveyed cited closure of programs or significantly decreased capacity to serve children.

5 out of 7 Children's Residential Mental Health Treatment units are closed, as well as both a transitional residential program and a DOC residential program being temporarily closed. We still have one closed Children's Residential wing and a 2 to 10 week wait depending on the program.

We just can't accept new referrals at all and have a 6+ week wait. The number of children we can serve is limited.

We have had to constrain capacity by nearly 15-25% at times. This means our hospital went from 71 beds to 60 beds, and our Partial Hospitalization Program went from nearly 200 slots to 150.

16 out of 17 providers surveyed have waitlists and longer than normal wait times before intake. Several have opted to close their waitlists in the hopes that clients can be seen elsewhere, sooner.

Families calling our intake office are more distressed than we have ever experienced. It is heartbreaking to hear their stories and not be able to respond with immediate appointments.

Our referrals from other community partners is at an all-time high, especially from groups that historically haven't made many referrals. This reflects the exploding demand for children's mental health care.

We have had multiple schools reach out for school based mental health work on site to benefit the students that they are seeing with mental health concerns, and we do not have the staff to meet these community needs.

We have 80 kids on our Autism Day Treatment waitlist – they can expect a 4 to 8 month wait.

## Appendix 1 – Participating children's mental health providers

- Amherst Wilder Foundation
- Catholic Charities of St. Paul and Minneapolis
- 3. Fernbrook Family Center
- 4. Fraser
- 5. Headway Emotional Health Services
- 6. Lakeside Academy MN Adult and Teen Challenge
- 7. Milwaukee Academy Clinicare
- 8. Nexus FACTS Family Healing

- North Homes Children and Family Services
- 10. People Inc.
- 11. PrairieCare
- 12. St. David's Center
- 13. The Village Family Service Center
- 14. Therapeutic Services Agency
- 15. Valley Lake Boys Home
- 16. Village Ranch
- 17. Volunteers of America

## Appendix 2 – Survey questions

- 1. Please report your waitlist(s) by your term of measurement. (E.g.: Number of clients on current waiting list for appointments. Number of weeks of waiting to access residential treatment.)
- 2. Have you had to decrease capacity or close programs serving children and families? (E.g.: Closing day treatment classrooms, closing residential treatment wings, etc.)
- 3. Part one: How many staff does your organization normally employ?
- 4. Part two: How many open staff positions are you currently needing to fill?
- 5. Please share any other information regarding how this crisis is actively limiting children and families' access to Mental Health care.