

Direct Care and Treatment

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Who We Serve



DCT's Scope and Impact

- More than 12,000 civilly committed patients and clients served annually.
- Services are delivered at more than 150 sites statewide.
- Services are delivered by more than 5,000 employees.



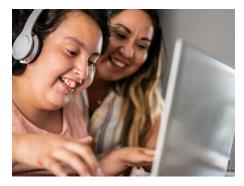
Budget State Fiscal Year 2025

\$736 million

Direct Care and Treatment Divisions











Mental Health and Substance
Abuse
Treatment
Services

Forensic Services

Community Based Services

Outpatient Services

Minnesota Sex Offender Program

DCT Mission, Vision, and Values

- **DCT Missio**n: We support meaningful lives through specialized behavioral health services others do not provide.
- **DCT Vision:** A Minnesota where everyone receives the behavioral health services they need.
- DCT Values:
 - Quality
 - Safety
 - Partnership
 - Equity
 - Accountability

3-Agency Creation - DHS/DCT/DCYF Transition

Agency Transitions Transition Plan

Department of Children, Youth, and Family Department of Direct Care and Treatment Department of Human Services



2024 DCT Creation Legislative Bills

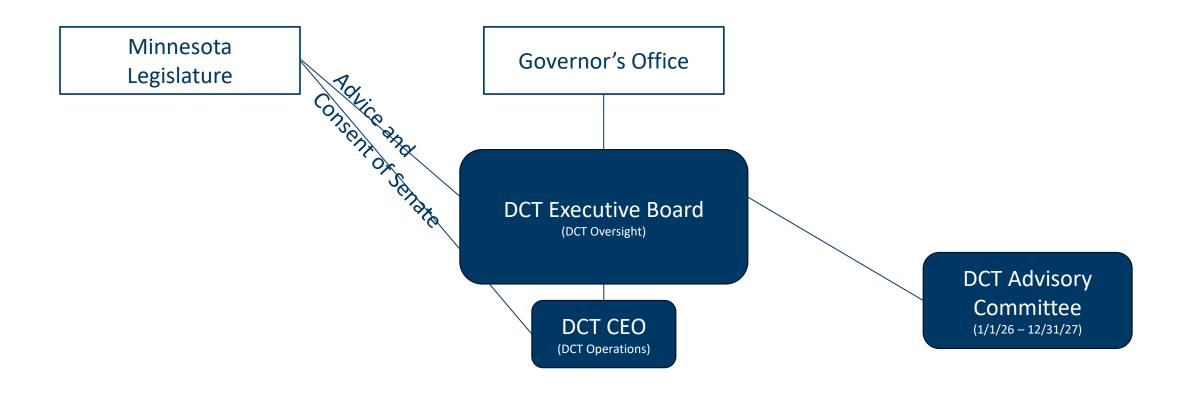
Chapter 79 – DCT codified (Legislative Revisor's Office)

- Moved all DCT statutes in new 246C
- Amends DCT Governance from Commissioner to DCT Executive Board

Chapter 125 – Article 5 – DCT Creation

- DCT Executive Board/CEO Responsibilities
- DCT Creation Language
- Separation moved to July 1, 2025, to align with budget biennium

2024 Legislation



DCT Governance





NEWS RELEASE

July 22, 2024

View previous announcements

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Behavioral health care system seeks board members

Applications are open for people interested in serving on the executive board of Minnesota's stateoperated behavioral health care system.

Known as Direct Care and Treatment, or DCT, the system serves more than 12,000 patients and clients each year at psychiatric hospitals and other inpatient mental health facilities, substance-use disorder treatment facilities, special care dental clinics and group homes for people with disabilities.

Currently part of the Minnesota Department of Human Services, DCT will become a separate state agency on July 1, 2025. A nine-member executive board and a chief executive officer will oversee the new agency.

Governor Tim Walz will appoint six board members. The panel will also include the commissioner of the Minnesota Department of Human Services and two non-voting members, one appointed by the Association of Minnesota Counties and one jointly appointed by labor unions representing DCT staff.

The Secretary of State's Office is managing the application process. For more information about the open board seats and qualifications for each position, or to apply, visit the office's <u>Boards and Commissions</u> <u>webpage</u> or https://commissionsandappointments.sos.state.mn.us/Agency/Details/362.

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DCT Executive Board Makeup

Seven voting members include

- Psychiatrist or other physician experienced in behavioral health
- 1 Commissioner of human services
- 2 Members with experience on a hospital or nonprofit board
- Members with background in traditional healing, behavioral health services, care coordination, health care professional, health care administration, or residential services

Two non-voting members to include

One appointed by the Association of Minnesota Counties, one by DCT labor unions

Voting members **may not** be current DCT or county employees, members of the Legislature, or staff or members of labor unions representing DCT. One voting member represents Greater Minnesota.

DCT Executive Board Members

Carol Olson, Chair

- Seat: Member with Experience in the Delivery of Behavioral Health Services
- Term: January 1, 2025 January 1, 2029
- Former Executive Director of DCT Forensic
 Services

Dr. Paul Goering – Vice Chair

- Seat: Member with Experience Serving on a Hospital or Nonprofit Board
- Term: January 1, 2025 January 3, 2028
- Fellow at the Leadership Institute of Healthcare

Dr. Prachi Striker

- Seat: Licensed Physician who is a Psychiatrist or has Experience in Serving Behavioral Health Patients
- Term: January 1, 2025 January 4, 2027
- Child and Adolescent Psychiatrist at Children's Minnesota

Mary Maertens

- Seat: Member with Experience Serving on a Hospital or Nonprofit Board
- Term: January 1, 2025 January 3, 2028
- President of M4Resources, LLC.

John Dinsmore

- Seat: Member with Experience in the Delivery of Behavioral Health Services
- Term: April 16, 2025 January 1, 2029
- Retired Otter Tail County Administrator

Catherine Chavers

- Seat: Member with Experience in the Delivery of Behavioral Health Services
- Term: April 16, 2025 January 1, 2029
- Retired Chairwoman of the Bois Forte Band of Chippewa

Commissioner DHS

- Seat: Commissioner of Human Services, or designee
- Commissioner of the Department of Human Services

Lynn Butcher

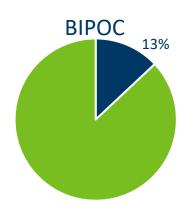
- Seat: Member who has an Active Role as a Union Representative Representing Staff at Direct Care and Treatment
- DCT Quality Officer

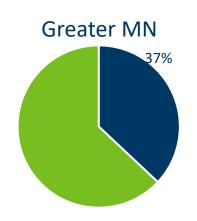
Commissioner Laurie Halverson

- Seat: Member Appointed by the Association of Counties
- Dakota County Commissioner

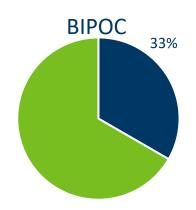
DCT Executive Board Demographics

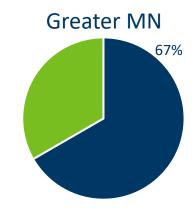
Applicant Pool





Executive Board

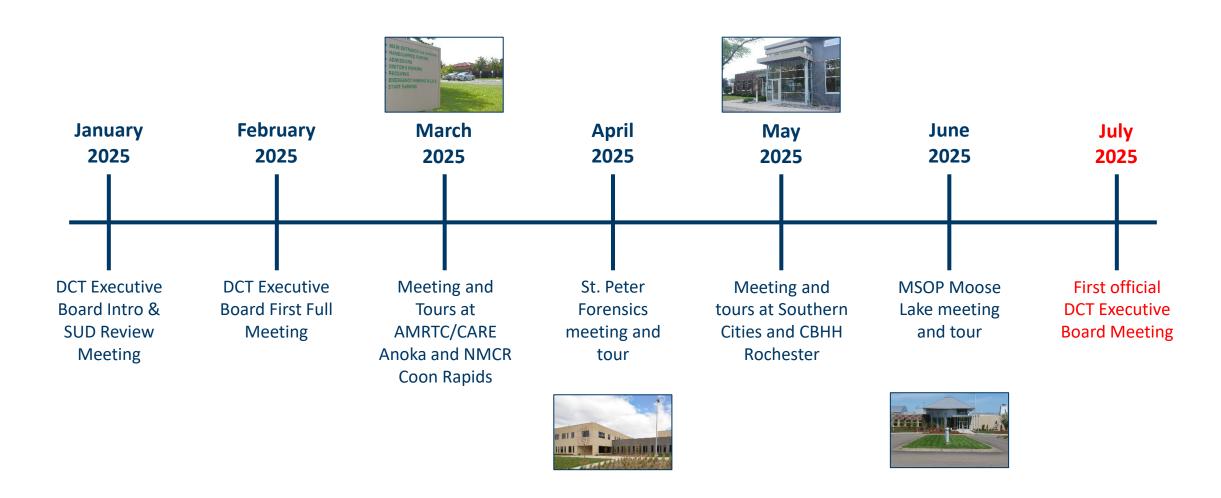




Board Make Up

- Two Medical Doctors
- One Nurse
- Two County Experience
 - One voting
 - One Non-Voting
- One Union Experience
 - Non-Voting
- Two+ Lived Experience, as shared by board members

DCT Executive Board Onboarding Schedule



DCT Executive Board Meetings

- Jan-June Meetings
 - Board engaged and very active and participatory onboarding process.
 - Reviewed all the clinical and support service areas.
 - Toured: MSOP in Moose Lake, Forensics in St. Peter, AMRTC in Anoka, the Southern Cities Clinic in Faribault, CBHH Rochester, CBS Anoka Site
- DCT Executive Board meetings begin on July 17th and are "public meetings"
- Future meetings will be held at the Vadnais Heights Office, unless otherwise noted

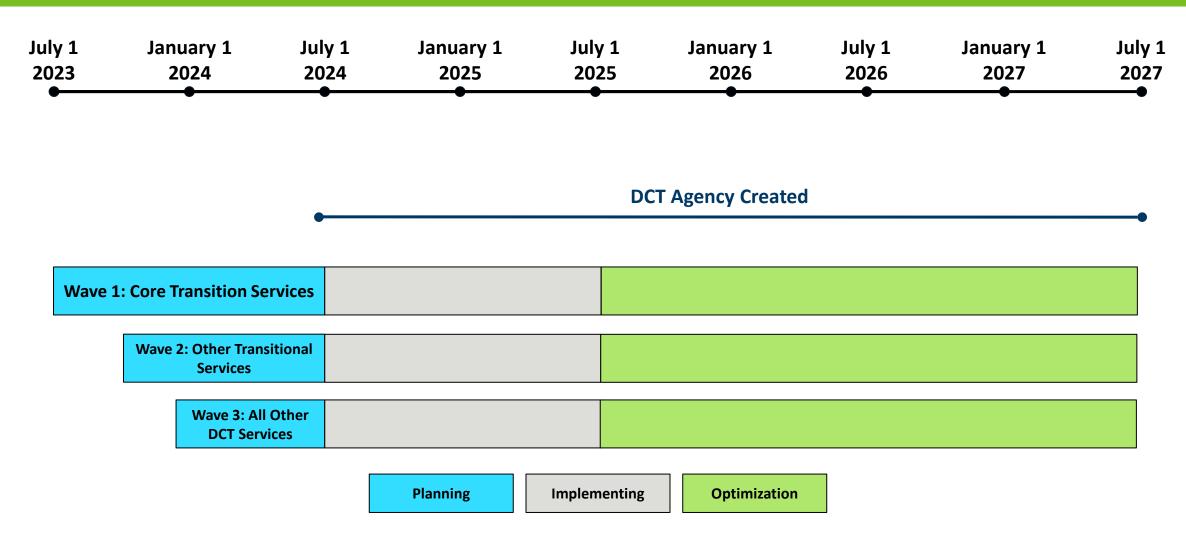
DCT Advisory Committee

- The legislature appointed an Advisory Committee to the DCT Executive Board hat begins on January 1, 2026, and will remain in effect for 2 years
- DCT Board Work Group Recommends:
 - Begin working with and following the Secretary of State Committee Member Process in July 2025
 - It would be DCT's preference to have all the Advisory Committee Members appointed by Oct 1, 2025
 - Like the DCT Executive Board, DCT executive staff will work with the advisory committee members to provide learning sessions prior to January 1, 2026
 - DCT will Offer educational and onboarding meetings between October-December 2025 that will cover DCT topics and offer onsite tours.

DCT Executive Board Advisory Committee Legislation

- Advisory Committee membership includes:
 - 4 legislators 2 members from House and 2 from Senate
 - 1 member from Association of Minnesota Counties (AMC)
 - 1 Union Representatives
 - 1 member from the National Alliance of Mental Illness Minnesota
 - 2 members with lived experience and served by DCT
- Advisory Committee timelines:
 - Appointments made by January 1, 2025
 - First Meeting to be held by January 15, 2026
 - DCT Executive Board shall regularly consult with the advisory committee
 - The Advisory Committee will end December 31, 2027

DCT Creation Project Priorities



DCT Creation Action Plan Status - All Waves Mission Accomplished!

Wave 1 Workgroups	Status	Wave 2 Workgroups	Status	Wave 2 Workgroups (continued)	Status	Wave 3 Workgroups	Status
MNIT	5/6/2025	A - DHS/DCT Commissioner Responsibilities	6/10/2025	C - DHS/DCT Data Privacy	6/25/2025	Committee Structure	3/12/2025
Legislature	6/10/2025	A - Dept. Administration	6/16/2025	C - DHS/DCT Asset Management	6/16/2025	Continuous Improvement	12/12/2024
Legal	6/16/2025	A - MMB Activities	6/30/2025	C - Attorney General's Office	6/16/2025	Core Divisions	4/22/2024
Communications	6/30/2025	A - DHS/DCT Business Continuity	6/30/2025	C - DHS/DCT Contracting/Procurement	5/21/2025	HIMS	6/17/2025
Fiscal	6/30/2025	A - Governance/Licensing and Regulation (Quality)	6/16/2025	C - DHS/DCT Facilities Management	6/16/2025	Medical Services	5/12/2025
HR	6/30/2025	B - DHS/DCT Data Management	5/6/2025	D - DHS/DCT Equity, Diversity & Culture	1/8/2025	Mission, Vision, Goals	3/10/2025
DCT Board	6/10/2025	B - DHS/DCT Rule Making	6/16/2025	D - DHS/DCT Internal Audits	6/16/2025	Pharmacy	3/14/2024
Policy	6/24/2025	B - DHS/DCT Labor Management	12/10/2024	D - DHS/DCT OEO Office of Equal Opportunity	6/16/2025	Quality	6/16/2025
Technology	6/30/2025	B - DCT Corp Compliance Infrastructure	6/16/2025	D - DHS/DCT Emergency Mgt/BIA/COOPs	6/16/2025	Tribal Government to Government	12/12/2024
DCT Creation Language	5/22/2024	B - DHS/DCT Learning & Development	6/17/2025	D – Admissions and Clinical	5/12/2025	County & Other Stakeholder Relations	10/28/2024
Revisors Office Review	3/25/2024			D – IRB/Data Analytics/Research	10/30/2024	Strategic Planning	5/14/2025
Incident Command/ Project Oversight	7/19/2023					Support Services	6/16/2025
DCT Org Structure	12/10/2024					Badge Committee	6/17/2025
Branding	12/10/2024						

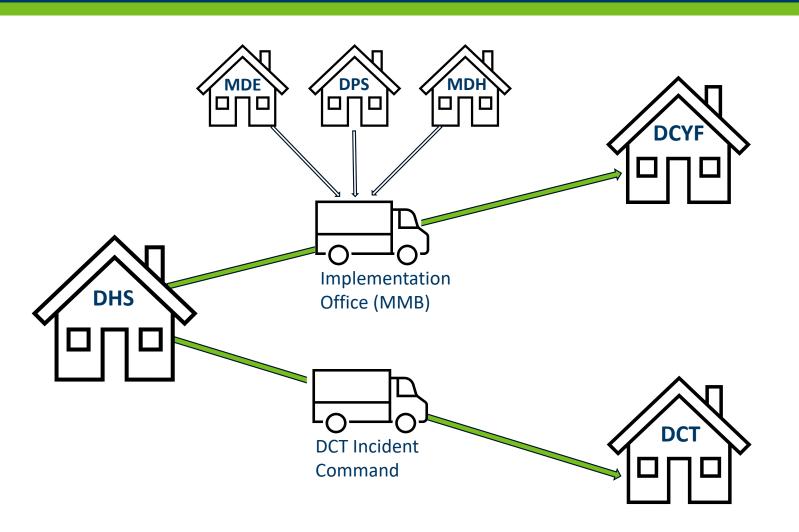
	KEY		
33%	Action Plan Documented and 0-24% complete		
50%	Action Plan 25-49% Complete		
67%	Action Plan 50-74% Complete		
84%	Action Plan 75-94% Complete		
95%*	Action Plan 95-99% Complete or Dependency		
MM/DD/YYYY	Action Plan 100% Complete		
	Small Issue		
	Large Issue		

7/01/2025 Talking Points

100% (48) of the 48 workgroups are either complete or complete except for a dependency which is beyond their control (>95%* to 100% complete).

2% (1) of the 48 workgroups are at 95%*.
98% (47) of the 48 workgroups are 100% complete

Transition Oversight and Management





DCT Agency Structure Created

DCT Executive Board July 1, 2025

DCT

DCT



DHS Separation

DCT Executive Board July 1, 2025



DCYF Commissioner July 1, 2024



DHS Commissioner
On-Going



DCT Programs and Services are NOT Changing

Same Programs

- Mental Health and Substance Abuse Treatment Services
- Forensic Services
- Community-Based Services
- Ambulatory Services
- Minnesota Sex Offender Program

Same Services

- Psychiatric hospitals and other residential mental health treatment
- Residential SUD treatment
- Outpatient mental health services, telehealth and special-care dentistry
- Residential and vocational services for people with disabilities
- Sex offender treatment

Employment Conditions for Staff are NOT Changing

Workplaces and Operations

- Same focus on quality and safety
- Same work locations
- Same operational structure and site leadership
- Same human resources structure and support
- Same working relationships with key partners and stakeholders

Staff will have ...

- Same employment status and jobs
- Same job classifications
- Same union representation
- Same union agreements in full force
- Same salaries and benefits
- Protections for staff working in temporary, unclassified positions



Questions?