DENDROS GROUP

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Olmstead Plan Public Comment Meeting Report - Crisis Services

April 24, 2026 - 12pm - 2pm

Meeting Summary

The April 24th, 2026, crisis services public comment meeting was hosted by Dendros Group virtually via Zoom. The goal of the conversation was to gather public comment on the draft Olmstead Plan crisis services goals. There was one participant.

Meeting Agenda

Facilitation Team:

- Rich Pennington (Dendros Inclusion Consultant)

Schedule:

- 12:00pm -12:20 pm: Welcome
- 12:20pm - 1:00 pm: Presentation on Draft Olmstead Plan and Crisis Services Draft Goals
- 1:00pm - 1:50 pm: Public Comment in Facilitated Breakout Rooms
- 1:50pm -2:00 pm: Closing, Evaluation and Further Engagement Opportunities

Registration & Attendance

Eleven people registered for the meeting. One person attended and participated in public comment.

The participants identified as follows:

Perspectives

- One works in a disability-related field

MN County or Tribal Nation of Residence

- One in Hennepin County

Age Group

- One 45-54

Gender

- One Woman

Race and/or Ethnicity

- One White

Military/Armed Forces Status

- One is not a member of the military/armed forces

Participant questions from registration:

The registrants were asked “Do you have any questions about the Olmstead Plan or the process that you'd like covered in the presentation?” The following questions were asked:

- What can Olmstead Project do, or does, to get pay increase for SSP [support service providers]?
- diversion procedure before court, how would draft or process addressing the mode of communication like ASL interpreter, CDI, or deaf program?
- Are you going to post the full version of the Plan, or just the plain language version? The goal I am concerned about reads quite differently in both versions. Thank you!

Goals Overview

The following are the draft goals presented to the participants of this public comment meeting.

Crisis Services Goal 1: Fewer children and teens in foster care will experience institutional placements.

- Measurable goal: By 2031, the number of new placements in institutional settings will decrease by 5%.

Crisis Services Data Goal 1: More people will stay in the community after a crisis.

- The goal will track how many children and adults stay in the community after using mobile crisis services. This means they avoid more segregated settings like hospitals or jails.

Summary

Overview

The following discussion questions were presented to the participants of this public comment meeting.

1. What would make these goals more effective to improve the lives of Minnesotans with disabilities?
2. What would make these goals more effective to better integrate Minnesotans with disabilities in community life?
3. What's missing from these goals?

The participant recommended that the first goal should define "institutional placements" more broadly to include corrections and juvenile detention, and should focus on placing children in appropriate settings rather than merely moving them out of institutions. For the second goal, the participant recommended expanding measurement to capture people who attempt but cannot access mobile crisis services, and developing systematic, cross-agency data tracking to replace anecdotal evidence and support resource decisions.

Findings by Goal

Crisis Services Goal 1: Fewer children and teens in foster care will experience institutional placements.

Expand the goal's definition of "institutional placements" to include corrections and juvenile detention.

The participant identified a recurring pipeline whereby children with higher support needs or multiple diagnoses move from foster care into Minnesota Department of Children, Youth, and Families (DCYF) facilities and subsequently into the juvenile justice system. The participant described this pattern as something that "happens regularly" and noted that "the greater the number of support needs that a child has, often the more likely that we'll end up seeing them on the correction side, on the juvenile detention side." While acknowledging that this observation was anecdotal, the participant emphasized that the first goal should not be interpreted narrowly. The participant stated:

"My worry and my concern about this is that it's not just that… children with disabilities are more likely to be institutionalized, they're more likely to be institutionalized not in a DCYF facility, but then… start… their journey in foster care, end up in a DCYF facility, and then end up on the corrections side. So it's not just a… step over to institutionalization or facility care… it continues on."

The participant further recommended that the first goal should incorporate the same awareness of multiple restrictive settings that the second goal addresses regarding hospitals and jails. Specifically, the participant said:

"I wanted to make sure that there was some… thoughtfulness [that] just like in the second goal that identifies segregated settings of hospitals and jails, that the first goal understands that we're not just talking about DCYF institutions, we're also talking about corrections or juvenile detention, or other types of those institutions, which… talk about restrictive environments for youth who might be in deep crisis and really have additional support needs."

Revise the goal to emphasize placement in appropriate settings, not just avoidance of institutional care.

The participant raised a fundamental concern that reducing institutional placements without ensuring appropriate alternatives leads to equally harmful outcomes, such as prolonged hospital stays or hotel placements. The participant noted that the current wording of the goal might inadvertently create a situation where children are moved out of one restrictive environment only into another. The participant explained:

"It's one thing to say 'we're not going to put these foster care youth into… a facility, a DCYF facility, or a corrections facility.' It's another thing to say 'we're placing them instead in appropriate settings', as opposed to, 'we're just placing them in a hospital bed', right? We see that all the time, that youth who have really high support needs, maybe they are avoiding placing them in an institution, but they're not placed appropriately."

The participant offered concrete examples of inappropriate placements observed in practice, emphasizing that these settings fail to meet the standard of the least restrictive environment. The participant stated:

"I think any of us as… citizens and community members can say, 'we don't want to see a youth placed in a hospital bed… [or a] youth placed in a hotel setting… [for] weeks or months on end, that that would not be the best setting, or the least restrictive environment for that child.'"

The participant also acknowledged structural barriers that contribute to this problem, including fragmented governance and a lack of appropriate placement options. The participant observed:

"We don't have enough placements for youth… they end up… in these challenging settings, whether they end up in a hospital or institution or in… hotel settings… [we create a] pipeline to carceral settings."

The participant recommended that the goal be revised to reflect that the objective is not simply fewer institutional placements, but rather placement in settings that are genuinely appropriate and least restrictive for each child.

Crisis Services Data Goal 1: More people will stay in the community after a crisis.

Expand measurement to include people who attempt to access but cannot access mobile crisis services, not only those who successfully use them.

The participant expressed strong support for the goal, particularly praising its inclusive definition of segregated settings including both hospitals and jails. However, the participant raised a critical concern that the current tracking framework captures only successful mobile crisis interventions, thereby missing a larger population of people who attempt to access services but are turned away or interrupted. The participant provided context based on frequent observations:

"We often see people… say, 'you know, we try to get help for a long time'… [then] involve crisis response teams or 911, because we weren't able to have interventions earlier on. Law enforcement ended up getting involved… [and then] we were brought to the hospital. But then… when [we were] discharged from the hospital… [or] the hospital wouldn't keep us discharged… that's when [people are] ending up in… jail settings."

The participant acknowledged that collecting data not currently tracked, is "outstanding" and "exciting." However, the participant specifically recommended broadening the scope of measurement. The participant stated:

"The goal will track how many children and adults stay in community after using mobile crisis services. My hope is that [it] also would include people who are attempting to use mobile crisis services, and it's either not available to them, or law enforcement kind of intervenes in the process… Not just that they effectively have utilized it, but have attempted to utilize it, and for some reason… were not able to, because I think we see that more often."

The participant elaborated on the specific barriers that prevent successful access, noting that these interruptions are routine and affect a significant number of individuals. The participant explained:

"People have attempted these processes… [but] for some reason… they're not the ideal candidate, [or] there's some type of ongoing criminal review happening. There's something happening that interrupts [the process]… [or] there's not enough mobile crisis staff… [The question is] what… interrupts their ability to access those mobile crisis services… [because] those people are also ending up in hospitals or jails… [and] I think we see that more often than… people who have successful interactions with mobile crisis."

Develop systematic data tracking across agencies to replace anecdotal information and inform resource allocation.

The participant identified a fundamental infrastructure problem: the current system relies heavily on anecdotal evidence rather than systematically tracked data. While acknowledging that anecdotal information is valuable, the participant argued that actual numbers are necessary to drive policy decisions and legislative action. The participant stated:

"I think… we all have seen a lot of these situations where we have [only] anecdotal [evidence]… and anecdotal is powerful. I don't want to dismiss [it]… but to have actual numbers of… how often [these situations occur]… [that] will help better inform where additional resources or interventions are needed… because the number one thing… the legislature likes is… 'okay, if you're saying that this is [a problem]… where's the numbers to support what you're asking for here?'"

The participant noted that some agencies have attempted self-tracking, but called for a coordinated approach to aggregate data across the system. The participant said:

"I think this idea around… having… [a way to track data]… again, I know there's been some attempts… [and] there's been some agencies that are… trying to self-track, but [we need] a way that all of this data is… absorbed and tracked."

The participant drew a parallel to challenges observed on the corrections side, quoting a commissioner's formulation to illustrate the widespread nature of this data problem. The participant explained:

"We see that all the time on the corrections side… [agencies are either] information rich and data poor or data poor and information [rich]… one or the other… That idea that [an agency] has a lot of information, but [doesn't] have a great way to… coalesce and track that data… is probably an across-the-board issue for a lot of agencies."

The participant's recommendation implicitly calls for a unified data infrastructure that can capture attempted access, failed access, reasons for interruption, and eventual outcomes, enabling both better understanding of system gaps and stronger justification for additional resources.

Participant Exit Survey

Participants were invited to complete an exit survey. One participant responded to the survey.

Evaluation Metric 1: This meeting was a valuable use of my time.

- One strongly agrees

Evaluation Metric 2: I was able to participate fully in this meeting.

- One strongly agrees

Evaluation Metric 3: What would have improved your experience today?

- n/a