Case 10321A-14

Case 10321A-14
Rec 10/15/14

Hennepin County
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October 16, 2014

City of Bloomington
Community Development Department
1800 W. Old Shakopee Road,
Bloomington, MN 55431-3027

Dear Sirs,

RE: Application of Conditional Use
8941 Portland Avenue

On behalf of Hennepin County, please accept the attached development application. This application seeks a conditional use permit for the use of 8941 Portland Avenue as an Intensive Residential Treatment Service. The narrative which is attached to this application provides a detailed description of the proposed use.

In support of the application we enclose:

- Development application. You will note that this application has been signed by the state of Minnesota as the owner and Hennepin County as the applicant;
- Application fee
- Narrative describing the propose use
- Plans illustrating the manner in which the property will be improved and used
- CD containing an electronic copy of application material.

We trust you will find all in order. Should you require additional material or clarification please do not hesitate to contact the undersigned.

Yours very truly,

J. Michael Noonan, AICP MCIP
Senior Department Administrator
Real Estate Division

JMN/jmn

encls

Case 10321A-14
Rec 10/15/14

8941 Portland Avenue South
Supplemental Information - Conditional Use Permit

I. INTRODUCTION

In spring 2014, Hennepin County Human Services and Public Health Department (HSPHD) sought proposals from qualified responders to develop and operate a new community-based Intensive Residential Treatment Services (IRTS) program to be located in Hennepin County. The program will serve adults with serious mental illness and will enhance the array of services currently available in Hennepin County, with a focus on treatment needs of individuals admitted, or at risk of being admitted, to an inpatient psychiatric hospital or State Regional Treatment Center. Demand for community-based mental health services such as IRTS has increased as the number of facilities and persons in state operated institutions has declined. In the past two years, the state has closed or re-purposed two programs providing long term residential care to individuals with serious mental illness.

II. IRTS OVERVIEW

The state of Minnesota established Intensive Residential Treatment Services (IRTS) as one essential component of a community-based mental health continuum of care developed to support deinstitutionalization of persons residing in state run psychiatric hospitals. There is a great need for intermediate care beds to assist individuals transitioning from hospital to community placements. IRTS programs are a critical component of the community-based service continuum, especially for persons needing a "safety net" of services. IRTS programs provide a safe, structured, and effective alternative to inpatient hospital care for many individuals; the outcomes reported by IRTS programs consistently demonstrate that most individuals served by IRTS are discharged to a less restrictive level of care. Most residents stay at an IRTS facility for approximately 90 days before being discharged to a more independent setting. Currently, Hennepin County contracts with eight licensed IRTS facilities with a total capacity of 106 beds. All are highly utilized, with waits of up to five weeks to admit new residents. None of the current IRTS facilities are located in southern Hennepin County.

III. SITE HISTORY

The State of Minnesota ran a 16 bed program at this site from 1997 to 2005. The State ran what is licensed as a "Rule 36" facility which allowed for longer lengths of stay and was less structured than the current IRTS program being proposed. Over the past 9 years, there have been numerous discussions between the State and Hennepin County regarding operating a mental health facilty at this address, but none of those discussions came to fruition until now.

IV. PROPOSED SITE OPERATION

The site will house what is know as an Intensive Residential Treatment Services (IRTS) program. These are 16 bed maximum facilities with time limited services (typically 90 days). They are designed to specifically enhance the psychiatric stability of residents, promote the personal and emotional adjustment of residents, increase self sufficiency, and increase skills to live in a more independent setting. Residents have a primary diagnosis of schizophrenia, bi-polar disorder, or major depressive disorder and are pre-screened as

Case 10321A-14 Rec 10/15/14

ready to begin (or resume) working on managing their illness and gain skills to help with their recovery. These are people living in our communities who temporarily need a 24 hour supervised, monitored, and focused treatment approach to improve functioning and avoid relapse.

IRTS are staffed by an interdisciplinary team that includes staff skilled and trained in working with persons with a mental illness, and a registered nurse. They must be staffed for a 24 hour delivery of service, and they must have awake staff at all times. At a minimum they must have at least one staff for every 9 residents. HSPHD currently contracts with 8 licensed providers for 106 IRTS beds in the following municipalities: Minneapolis (4 sites), Golden Valley, Bloomington, Brooklyn Center, and St. Louis Park.

V. COMMUNITY ENGAGEMENT

HSPHD has held two meetings with nearby residents of the building, the first on March 12, 2014, and the second on June 25, 2014. The meeting allowed the county to hear and understand concerns the neighbors of the property have about the proposed use. The concerns can be summarized in the following catagories:

1. Program Management – Neighbors expressed concerns about the previous management of the building. They felt there was a lack of structure which allowed residents to (at times) harrass both neighbors and children – some of whom were walking by the building on the way home from school.
2. Smoking Issues – Residents were often congregating and smoking either on the sidewalk or on the corner at Portland Avenue South and 90th Street. Per reports, at times they would also smoke beyond the property line of the building in the neighbor's yards.
3. Proximity to Valley View Middle and Elementary Schools – A main concern was expressed regarding the safety of children at the school.

Additionally, neighbors were invited to an open house at Touchstone's Minneapolis IRTS to get a better feel about how the program operates and fits into the neighborhood.

HSPHD and Touchstone staff have also met with City of Bloomington staff from the following areas: Police, Human Services, Parks and Recreation, and Environmental Health. The meeting was very positive, with agreements to continue to work together on meeting the needs of the Portland Avenue South residents.

VI. IMPACT ON NEIGHBORHOOD

In response to these concerns, HSPHD has taken the following steps:

1. Program Management: The selection of a vendor with experience and a quality reputation was very important to address the past experiences of the neighbors. HSPHD conducted a Request for Proposals to operate an IRTS program and selected Touchstone Mental Health to manage the Portland Ave site. Touchstone has a rich history in providing mental health services, including the operation of an IRTS program in Minneapolis. It is important to note that IRTS programs are licensed very differently than the former "Rule 36" program that was previously operated at this site. There are more requirements, including: professional staff with educational/experience backgrounds to serve the population living in the building; an active treatment environment that engages residents in their recovery; and staffing levels which include overnight awake staff.

Case 10321A-14 Rec 10/15/14

2. Smoking Issues: The site plan will include a smoking area for residents that is isolated from both the front sidewalk, the corner of 90th and Portland, and the property running along the east side of the property where there is a licensed day care program.

3. School Concerns: HSPHD staff and Touchstone staff met with both Principals from Valley View Middle and Elementary Schools to discuss the proposed use of the building. We are planning a fall meeting with any parents at the school who would like to come and hear more about the program. It is important to note that there are 8 IRTS programs in Hennepin County, and there have been no reported issues related to residents perpetrating crimes of any sort against children. Residents of these programs are persons with mental illness receiving treatment for recovery. They are neither sex offenders nor child molestors.

VII. SELECTED VENDOR - TOUCHSTONE MENTAL HEALTH QUALIFICATIONS

Touchstone Mental Health is an $8.7 million non-profit agency founded in 1982 to serve persons with mental illness, primarily in Hennepin County. Touchstone's mission is "to instill hope, healing, and well-being". Touchstone operates a variety of facilities and programs in Hennepin County, serving approximately 950 individuals annually.

A. PROGRAM OPERATION

1. Clients: The IRTS facility will serve up to 16 adult persons, age 18 and older, with serious mental illness. Most clients will have completed treatment at an inpatient psychiatric hospital or State Residential Treatment Center. Residents may have other medical conditions such as substance abuse or dependency; chronic medical conditions such as diabetes, hypertension, or heart disease; impaired cognitive and/or intellectual functioning; a history of challenging behaviors.

2. Description:

   The Residential Treatment Program will utilize a harm reduction approach within the stages of change model, motivational interviewing, and other stage-wise interventions that match a resident's current level of functioning. The program will emphasize the use of evidence-based practices supporting safety, stability, and progression to more independent living and self-sufficiency. The services will be individualized, with each resident having an Individual Treatment Plan, developed in accordance with the client's needs, goals, and priorities. Services will include individual sessions to assist in developing skills in symptom management, and small group sessions for skill development and practice, independent living skill instruction, and therapeutic recreation.

3. Length of stay: Most residents will stay approximately 90 days.

4. Programs/ Activities:

   a. Living skills development, including medication self-administration, household management, cooking and nutrition, budgeting and shopping, use of transportation, healthy living, and employment related skills;

   b. Utilization of community resources, as well as inter-agency case coordination;

   c. Client transition and discharge planning;

Case 10321A-14 Rec 10/15/14

d. Evidence-based practices, including illness management and recovery, integrated dual diagnosis treatment, and family education;

e. Nursing services;

f. Crisis prevention and planning;

g. Health care directive development when requested;

h. Health and wellness services including management of chronic conditions.

5. Outcomes:

a. Percentage of clients who completed the program and were discharged to a less restrictive setting.

b. Percentage of clients who completed the program and were discharged to a less restrictive setting and maintained it for three months.

6. Supervision: Clients will be supervised 24 hours per day, seven days per week. See the staffing section which follows.

B. Staffing

1. Ratio: 22.7 FTE staff for 16 residents.

2. Types: Treatment Director, Clinical Supervisor, Mental Health Counselors, Certified Peer Specialist, Household Coordinator, Community Resource Specialist, Office Manager, Registered Nurses, Rehabilitation Workers, Rehabilitation Worker Supervisor, consulting Psychiatrist.

3. Staffing hours:

a. **Weekdays 12 am to 8 am**: Two Rehabilitation Workers, one Registered Nurse.

b. **Weekdays 8 am to 9 am**: Treatment Director, Clinical Supervisor, Mental Health Counselor, Community Resource Specialist, Registered Nurse, Office Manager, Licensed Alcohol and Drug Counselor.

c. **Weekdays 9 am to 12 noon:** Treatment Director, Clinical Supervisor, Mental Health Counselor, Community Resource Specialist, Registered Nurse, Office Manager, Licensed Alcohol and Drug Counselor, Household Coordinator.

d. **Weekdays 12 noon to 1 pm:** Treatment Director, Clinical Supervisor, Mental Health Counselor, Community Resource Specialist, Registered Nurse, Office Manager, Licensed Alcohol and Drug Counselor, Household Coordinator, Certified Peer Specialist.

e. **Weekdays 1 pm to 3 pm:** Treatment Director, Clinical Supervisor, Mental Health Counselor, Community Resource Specialist, Registered Nurse, Office Manager, Licensed Alcohol and Drug Counselor, Household Coordinator, Certified Peer Specialist, Rehabilitation Worker Supervisor.

f. **Weekdays 3 pm to 5 pm:** Treatment Director, Clinical Supervisor, Mental Health Counselor, Community Resource Specialist, Registered Nurse, Office Manager, Licensed Alcohol and Drug Counselor, Household Coordinator, Certified Peer Specialist, Rehabilitation Worker Supervisor, Rehabilitation

Worker Lead. **Weekdays 5 to 6 pm:** Mental Health Counselor, Rehabilitation Worker, Rehabilitation Worker Lead, Rehabilitation Worker Supervisor, Registered Nurse, Household Coordinator.

Case 10321A-14 Rec 10/15/14

g. **Weekdays 6 to 10 pm:** Mental Health Counselor, Rehabilitation Worker, Rehabilitation Worker Lead, Rehabilitation Worker Supervisor, Registered Nurse.

h. **Weekdays 10 pm to 12 am:** Mental Health Counselor, Rehabilitation Worker, Rehabilitation Worker Lead, Registered Nurse.

i. **Saturdays and Sundays 12 am to 8 am:** Two Rehabilitation Workers and Registered Nurse.

j. **Saturdays and Sundays 8 am to 5 pm:** Two Rehabilitation Workers, Rehabilitation Worker Supervisor, Registered Nurse.

k. **Saturdays and Sundays 5 pm to 12 am:** Two Rehabilitation Workers, Registered Nurse.

l. **Holidays: 24 hours:** Two Rehabilitation Workers, Registered Nurse.

4. Community liaison: Martha Lantz, Executive Director, and DeDe Van Slyke, Treatment Director, will be community liaisons for the facility.

C. Security

Touchstone plans to install video cameras on the exterior of the building. The building will be staffed 24 hours per day, 7 days per week, 365 days per year. Touchstone builds relationships with local law enforcement and collaborates with them on security needs and concerns.

D. Controls

The two main entrances will be locked at all times. Staff and residents will have keys/fobs to allow building access. Staff will be stationed on each floor and have immediate access to telephones to call for assistance if needed. Staff will check on residents routinely throughout the day and overnight. At the end of each staff shift, there is a meeting to keep staff informed and up to date on the events and residents of the program.

VIII. FACILITY IMPROVEMENTS

A. General building upgrades

1. The state and county intend to perform additional work on the property to bring the building up to current code, and to correct maintenance deficiencies. This work includes upgrades to the mechanical and electrical system, exterior painting, and repair of the perimeter fencing.

B. Interior remodeling

1. Minor modifications will be made to the existing floor plan to allow the IRTS program to function effectively on the site. The 15 existing bedrooms will remain, with an additional accessible bedroom constructed on the second level, adjacent to the current accessible bedroom.

2. A new commercial kitchen will be constructed on the first (lower) level, and an adjacent area converted to resident dining. The relocation of an accessible toilet room on this level will be required to accommodate the kitchen/dining renovation.

3. The remaining renovations are directed towards integrating staff offices and resident common spaces on all floors, to provide staff presence near all client activities. This will be obtained by selectively walling off portions of former living room areas to provide offices, client counseling rooms, and client common spaces. Apartment doors will be removed, and some new pass-through openings will be constructed, to provide move open and accessible space.

4. The main office area will be located on the lower level, with some minor wall removal and reconstruction required to provide an office suite which works effectively with the adjacent shared staff/client meeting room.

5. Other improvements include minor painting, carpet replacement, and other similar items necessary to the function of the program in the space.

C. Exterior Improvements

1. Building repairs. Exterior building repairs, including painting of the existing building soffit and fence repair, will be made.

2. Signage. No building signage will be provided, beyond the existing building number which identifies the building as "8941".

D. Site

1. Parking. No changes to the parking or driveway area are required. Parking will be for staff and visitors only, as residents generally do not have cars. The existing 10 spots on the east side, and an additional 10 spots in front of the garages, will be sufficient for the 15 staff that is on site during the day.

2. Bicycle racks will be provided, primarily for staff use

3. Exterior improvements include the construction of a Healing Garden on the northwest corner of the building. The infrastructure for this garden, a six foot fence, and landscaping on the street side of the garden, will be constructed by the county. The interior garden design and plantings will be completed by Touchstone at a later time.

4. Garage. The garages will not be used for staff parking. They may be used for storage by Touchstone and the county. Trash. Dumpsters will be kept in an enclosed area, and brought out on scheduled pick-up days.

IX. Building Ownership and Operation. The site will be initially be leased by Hennepin County from the State of Minnesota, and subsequently subleased by the county to Touchstone. According to the lease terms with the state, the county will be fully responsible for all aspects of the building's operation, including all required capital improvements and ongoing maintenance. Subsequent ownership by the county is anticipated.

X. Preliminary Develop Review

Case
10321A-14
Rec 10/15/14

A. In December, 2013, representatives from the county met with the City of Bloomington's Development Review Committee, to review the project and get guidance on requirements which may be applicable.

B. Updates to action items are listed below:

1. Environmental Health:

   a. Construction Guidelines for the commercial kitchen will be met.

   b. Trash will be kept in an enclosed area.

2. Building and Inspection:

   a. The State of Minnesota will close out all old permits from the recent remodeling, and a new Certificate of Occupancy pursued.

3. Fire Prevention:

   a. All fire protection systems, including sprinklers, fire alarms, detectors, and emergency lighting will be tested, repaired/upgraded as required with appropriate monitoring provided. Master keys will be placed in the Knox Box for emergency access.

4. Engineering:

   a. A SAC determination will be made.

5. Public Health

   a. Tobacco policy update: Touchstone, the service provider that has been selected to operate the program, has requested that their clients be allowed to smoke on site, since they are not always at a point in their treatment when it would be feasible for them to go without smoking. It is now expected that clients will be able to smoke within the fenced area of the Healing Garden.

XI. SCHEDULE. A preliminary schedule for the project is:

1.	January, 2015	County's lease with state commences
2.	January – May, 2015	Project design and bidding
3.	June – September, 2015	Construction
4.	October, 2015	Occupancy