

National Alliance on Mental Illness of Minnesota

January 2009

NAMI Minnesota

- Grassroots non-profit since 1976
- Members: people with mental illnesses, family members, service providers
- 23 affiliates in MN
- \$1 million budget

Education

1. Hope for Recovery
2. Family to Family
3. Kidshops
4. Children's Challenging Behaviors
5. What Works, What Helps?
6. Parent Education Series
7. Keeping Families Together
8. Recognizing Early Warning Signs
9. When a Crisis Occurs

NAMI Resources

Booklets:

- Hope for Recovery
- Involving Families
- Advocating for a Loved One in the Criminal Justice System
- Civil Commitment
- Postpartum depression

Fact sheets:

- Mental illnesses
- Special issues with children and adolescents
- Treatments

Support

- Family support groups
 - Open to family members
 - For parents of children with illnesses
- NAMI Care groups
 - Open to anyone with any diagnosis
 - Veteran-to-veteran
- Open Door anxiety support groups

Advocacy

- Teaching members to self-advocate
- Legislative advocacy
 - More release planners
 - Suspending, not ending benefits during incarceration
- Policy implementation

Family Involvement Law

- Data practices law: passed in 2006; an alternative to signing a full privacy release (MN Stat. § 144.294, subd. 3)
- Goal: expand access to mental health care information

Who Can Request Info?

Someone who:

- Lives with the person
- Cares for the person
- Is directly involved with monitoring well-being

Who Is a Provider?

- Person who gives health care services
- Home care provider
- Health care facility
- Physician's assistant
- Unlic. mental health practitioner

Info That Can Be Disclosed

- Diagnosis
- Treatment admission/discharge
- Name, dosage & side effects of meds
- Consequences of not taking meds
- Summary of discharge plan

When Can Info Be Disclosed?

- Request is in writing;
- Patient is informed of the request;
- Patient agrees to the disclosure or is unable to object; and
- Disclosure is medically necessary

When Can't Info Be Disclosed?

- Harmful to the patient's health
- Likely to cause the patient to inflict self harm or harm to another

Other Ways to Access Info

- Medical emergency
- Patient cannot consent due to condition
- Patient signs the regular release of information

Preparing Ahead of Time

- Keep documentation to show you share the patient's address
- Have a signed note from an M.D. or mental health professional
- Maintain a folder of records

Jail Discharge Planning

- Only two counties have formal programs
- NAMI working with Olmsted County
- Plans to work in Ramsey and Crow Wing early this year

Stearns County

- Since 2003
- Multi-disciplinary team does the planning
- Goals: Address post-incarceration needs and reduce recidivism

Stearns County Process

- Referrals: from jail admin, public health nurses and inmates
- Initial meeting and assessment
- 1-hour session with the inmate
- Designated contact and action plan

Stearns County Outcomes

- 81 inmates went through program
 - 40% had CD issues, 37% had MI issues
- 70% decrease in incarcerations
(2003-2006)
- Avg. incarcerations pre-RAP: 6.64
- Avg. incarcerations post-RAP: 1.53

Steele County Model

- One person instead of a team
- Liaison between the inmate and the community
- Work with inmate 90 days post-release
- Began in '07, so no results yet

Contact

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