



**Partnering for Success:  
Achieving Community Impact through Strategic Collaboration**

**Dr. Michelle K. Murray & Paula Minske, M.S. LMFT**

# Agenda

- ▶ Who Is Nexus
- ▶ Setting the Stage
- ▶ Growth
- ▶ 3 Examples of Innovation
- ▶ Ingredients for Success
- ▶ Strategic Partnerships
- ▶ Innovation
- ▶ Finances
- ▶ Funding
- ▶ Contract Clarity
- ▶ Participant Reflections
- ▶ Lessons Learned



# Our Mission

Changing the course of a child's life by stabilizing families and strengthening mental health.



# Our Vision

Healing the past.

Breaking the cycle.

Changing the future.



# Non-Profit Organization

**50+** years of serving youth  
and families

**1,400+** employees

**36%** of our staff  
identify as BIPOC

**\$126M** consolidated  
operation  
revenue

**4 States** Minnesota, North Dakota,  
Illinois, Maryland

# We Provide...

## + **OUTPATIENT/COMMUNITY MENTAL HEALTH**

In-home, in-school, through outpatient therapy and crisis services.

## + **RESIDENTIAL TREATMENT**

Intensive support and care via short- and long-term treatment programs.

## + **FOSTER CARE/ADOPTION**

Foster care and adoption services to provide loving, stable homes.



# Growth Is Important

- ▶ The organization's purpose
- ▶ Mental health never stands still
- ▶ Continuum of care for families and communities
- ▶ Need for specific & focused services
- ▶ Prevention
- ▶ Financial diversification
- ▶ Greater efficiency



# Our Context

## History:

- ▶ Growth – Drastic increase 2010+
- ▶ Experience with different ways to grow
- ▶ Adaptable legal structures
- ▶ High willingness to do programs that others don't want to do
- ▶ Developed reputation for willingness to try and work with partner wishes
- ▶ Wanted clarity around growth





# Growth Parameters

## Strategic Commitment:

- ▶ Act On and Explore Growth Opportunities

## Growth Parameters:

- ▶ Filling Gaps/ Continuum
- ▶ Innovative Programming
- ▶ Partnerships
- ▶ Continue Expertise
- ▶ Revenue that supports “no margin”



# Approach Started Flourishing

- ▶ Wanted to slow down acquisitions of struggling programs
- ▶ Creativity, innovation, and desire to do things differently was strong
- ▶ Start-ups seemed to fit



# Community Impact Through Collaboration

A common thread:

- ▶ Specific Need
- ▶ Strategic Partnerships
- ▶ Innovative Programming
- ▶ Precise Financial Criteria
- ▶ Tailored Funding



# 3 Innovative Programs

Collaborative Intensive Bridging Services (CIBS)

Southeast Regional Crisis Center (SERCC)

Youth Care Transitions (YCT)



# Collaborative Intensive Bridging Services

- ▶ Solving a Community Need
  - ▶ Keep youth with family
  - ▶ Keep same therapist team
  - ▶ Use residential as intervention versus placement
- ▶ Request for Proposal
  - ▶ County Partnership
  - ▶ Wanted a provider to do something different



# Collaborative Intensive Bridging Services

## Innovation

- ▶ Intensive in-home therapeutic services
- ▶ Phase 2 placement in a residential setting (max 30 days)
- ▶ In-home therapist follows the youth
- ▶ Bi-weekly coordination
- ▶ Core team
- ▶ Uses a specifically designed Systemic Family Therapy model

# Collaborative Intensive Bridging - *Pilot*

- ▶ 2 youth in Traditional RTC
  - ▶ 1 unsuccessful discharge = \$37,248
  - ▶ 1 youth 5 months in placement = \$37,066
- ▶ 2 youth in CIBS
  - ▶ 29 days in placement = \$5,588

Cost Savings = **\$31,660**

# Collaborative Intensive Bridging - *Outcomes*

	COMPARISON YOUTH  Traditional 9-12+ Month Residential Placement (n=29)	CIBS WITH PHASE II  30-45 Day Placement & Services (n=19)	CIBS WITHOUT PHASE II  No Placement – Services/Case Management Only (n=10)
Percentage of Youth with Out of Home Placement 1 – 24 Months Post Program Discharge	50% (15)	26% (5)	0% (0)
Cost of Care/Services Per Youth	\$16,836.41	\$10,675.52	\$1,107

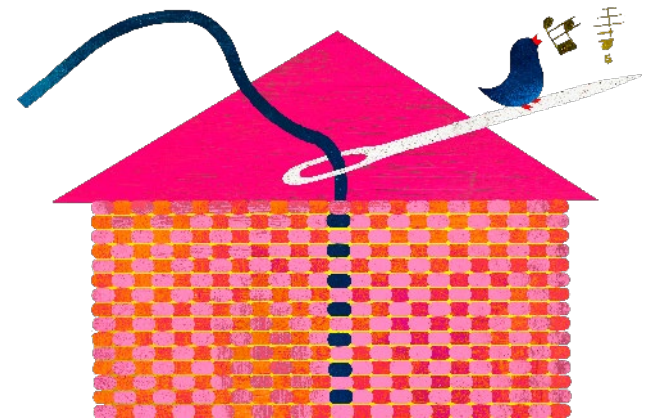


# CIBS is Gateway to More Innovation

- ▶ Incorporated into other residential programs
- ▶ Expansion of Services
  - ▶ Systemic Family Therapy
  - ▶ System of Care Grant
- ▶ Partnership
  - ▶ Department of Human Services
  - ▶ Other Service Providers

# Southeast Regional Crisis Center

- ▶ Solving a Community Need
  - ▶ Address crisis in the community
  - ▶ Overuse of emergency room / backlog
- ▶ Request for Proposal
  - ▶ 10-County Consortium and Hospital
- ▶ Partnership
  - ▶ Local Hospital (Mayo)
  - ▶ Payers (Blue Cross / UCARE)
  - ▶ County Partnerships
  - ▶ Other Service Providers



# Southeast Regional Crisis Center

## Innovation

- ▶ Crisis Stabilization
- ▶ Mobile Response
- ▶ Youth and Adult Residential
- ▶ Case Management and Support Resources
- ▶ Funded by hospitals and payers to cover under and non-insured individuals

# Southeast Regional Crisis Center - *Results*

**2,109** unique individuals served, largest age group 10-18

**66%** paid for by community resources

## Top Three Reasons:

- ▶ Depression
- ▶ Anxiety/Panic
- ▶ Suicidal Ideation

## Referral Source:

- ▶ 39% self
- ▶ 27% hospital/ER
- ▶ 23% family/friend

**74%** youth were discharged needing lesser level of service

# Southeast Regional Crisis Center- *Outcomes*

## Impact from Intake to Discharge

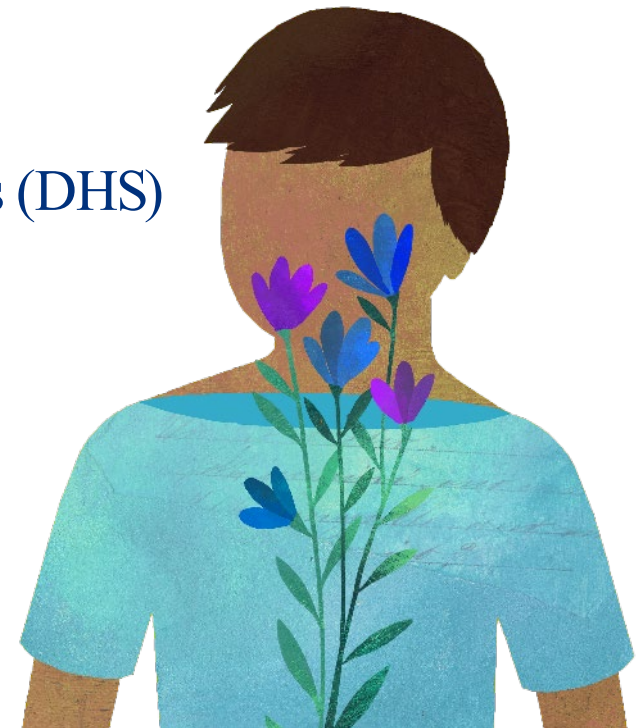
- ▶ Psych Ache Scale – Levels of pain dropped
- ▶ Columbia Suicide Rating Scale –Ideation and prep behaviors dropped
- ▶ Crisis Assessments (CAT) – Presenting concerns dropped

# Southeast Regional Crisis Center



# Youth Care Transition Program

- ▶ Solving a Community Need
  - ▶ Youth lingering in higher levels of care, creating backlog
  - ▶ High rate of recidivism due to lack of mental health treatment
  - ▶ Boarding in emergency rooms
- ▶ Request for Proposal
  - ▶ MN Department of Human Services (DHS)
- ▶ Partnerships
  - ▶ DHS
  - ▶ Residential and hospital providers
  - ▶ Other Service Providers
  - ▶ Providers doing same service



# Youth Care Transition Program

## Innovation

- ▶ Started as transfers from psychiatric residential
- ▶ Expanded to include inpatient psychiatric hospitals
- ▶ Two levels of services depending on needs
  - ▶ Placement Coordination
  - ▶ Intensive Transition Support
- ▶ The Team – Use of advocates / wrap-around
- ▶ Flexibility of Services
- ▶ Use of Systemic Family Therapy
- ▶ Utilization of Nexus Services



# Youth Care Transition Program - *Results*

**July 2023** Program Started

**44** Referrals YTD

Youth coming from:

- ▶ 11 different hospitals
- ▶ 2 different psychiatric residentials

Current Status:

- ▶ 8 in Intensive (4 from Coordination to Intensive)
- ▶ 8 in Placement Coordination
- ▶ 10 Successful in Placement Coordination
- ▶ 3 Successful in Intensive Transition Support

# Ingredients for Success

- ▶ The right mindset
- ▶ Board support
- ▶ Willingness AND ability to take risks
- ▶ Adaptable, Quick
- ▶ Tolerance for multiple approaches, varied contracts
- ▶ Cash - carry through timing of payments
- ▶ Tie to long-term strategic plan
- ▶ Solid financial criteria
- ▶ People resources
- ▶ Be realistic – might not stick
- ▶ Have exit strategy



# Strategic Partnerships

- ▶ Work with those seeking to be cutting edge
- ▶ Seek RFPs - Partners that want change
- ▶ Willingness to share decisions
- ▶ Humility - let go of “owning it”
- ▶ Share ownership for program & outcomes
- ▶ Partners that allow for creative funding
- ▶ Relationships, trust, transparency



# Innovation

- ▶ Solve a real problem in the community = usually lowers c
- ▶ Innovation happens at program and finance level
- ▶ One size does not fit all / Individualized approaches
- ▶ Allow for creativity
- ▶ Trust your expertise
- ▶ Give something never done before



# Financial Criteria

- ▶ Determine property ownership
- ▶ Start-up costs
- ▶ Margin
- ▶ Administrative expense
- ▶ Expenses for ramp up
- ▶ Guaranteed beds / daily cost reimbursement
- ▶ True-up, annual or another timeframe
- ▶ Schedule for rate increases
- ▶ Build a pro forma – No apologies for true costs
- ▶ Schedule for rate increases
- ▶ Payment schedule



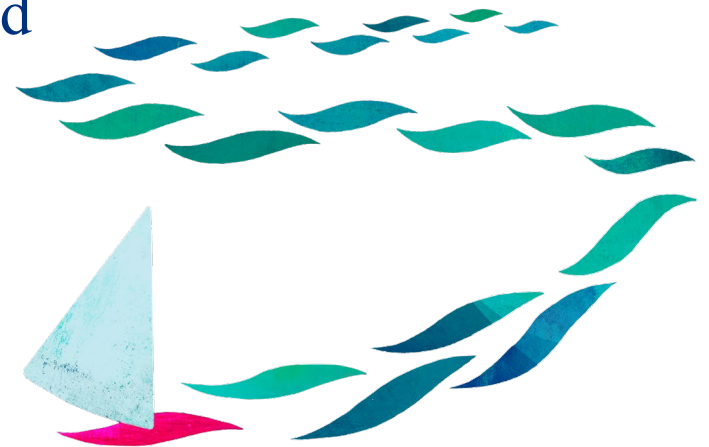
# Funding Options

- ▶ Fee-for-Service (Medicaid, 3<sup>rd</sup> Party, Private)
- ▶ Grants or philanthropic funds
- ▶ Direct county or state billing
- ▶ Expense Reimbursement
- ▶ Values-based
  - ▶ Pay for Performance
  - ▶ Bundled Pricing
- ▶ Braided Funding
  - ▶ Combination of different funding streams



# Contract Clarity

- ▶ Build in ongoing checks for 1<sup>st</sup> year
- ▶ Being clear what everyone needs and who's role is what
- ▶ Decide who makes decisions about expenses
- ▶ Ensure all financial elements included
- ▶ Agree on outcomes and metrics



# Participant Reflections

To create more impact through innovation and strategic partnerships . . . .

- ▶ What does your organization already do that supports innovative growth?
- ▶ What would your organization need to add to support innovative growth?
- ▶ What is an innovative practice your organization has wanted to implement, and what can you do now to make it happen?





# Lessons Learned

- ▶ Margin is not administrative fees
- ▶ Developing without joint ownership
- ▶ Contract reiterations – track it
- ▶ Consider Trademark
- ▶ Project management



# Questions

▶ Dr. Michelle K. Murray, President and CEO  
[mmurray@nexusfamilyhealing.org](mailto:mmurray@nexusfamilyhealing.org)

▶ Pula Minske, M.S., Vice President of Clinical Services  
[pminske@nexusfamilyhealing.org](mailto:pminske@nexusfamilyhealing.org)

