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IN LOCAL & STATE, B1 ARNTZ GETS GOOD JOB REVIEW

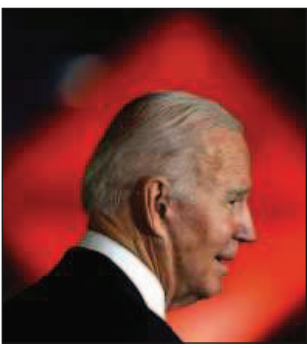


IN NATION & WORLD, A6 TORNADO DISASTER

TODAY'S OBITUARIES

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Some sun

High in the mid 30s. Low in the low 20s.



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Mankato, Minnesota

Mental health services in HIGH DEMAND



Photos by Pat Christman

Tina Olson, treatment director of crisis services at Horizon Homes, talks about what intake looks like when people come to the organization's South Central Crisis Center.

Providers have wait lists of up to eight weeks

By Brian Arola and Trey Mewes

barola@mankatofreepress.com
tmewes@mankatofreepress.com

It took a long time for Angela Anderson to get comfortable standing up for herself when it came to her mental health.

Anderson knew she struggled with mental health issues growing up, but she didn't know how to reach out for help.

"Basically, life had fallen apart," she said. "I wasn't able to work because of panic attacks and depression and what-not. So I had started seeking help."

Even then, her journey wasn't easy. Anderson was misdiagnosed a few times and one mental health professional thought she sought drugs instead of trying to get help.

Since then, Anderson has seen mental health resources grow in the Greater Mankato area and elsewhere in south-central Minnesota.



Angela Anderson looks at artwork she helped paint on one of the windows of the Second Step Clubhouse.

Yet despite more mental health resources available to residents than ever before, advocates and experts alike say it's still difficult for area residents like Anderson to get help fast.

Some local providers are seeing record upticks in people seeking mental health services.

"We've had a lot more people added to our waiting list in the past month than we historically see this time of year," said Mindy Kimmel, a licensed marriage and family therapist at Five Rivers Mental Health Clinic in Mankato.

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City government devises metrics to gauge performance

'Key Performance Indicators' to be tracked in every department

By Mark Fischenich
mfischenich@mankatofreepress.com

MANKATO — In planning next year's municipal budget, Mankato department leaders were contemplating

KPIs along with revenues, expenditures, needed equipment and workforce levels.

From the police department to the civic center, staff created "Key Performance

Indicators" that aim to judge whether progress is being made in serving the public, reaching goals, eliminating waste, reducing long-range expenses and improving the community.

"Almost every department has a few, and we'll add more as time goes on," said Susan Arntz, who just completed her first Mankato

to budget after replacing longtime City Manager Pat Hentges a year ago.

For the city bus system, there are obvious measures like ridership. But KPIs for Mankato Transit also include total number of reportable injuries and average distance between bus breakdowns.

At the civic center, one

key performance indicator will be the rate at which groups re-book a convention, expo or other event — an indicator of their level of satisfaction. Another measure will be average attendance of at least 3,500 at Mavericks men's hockey games. A third is topping

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Advertisement for Lidstrom Commercial Realtors featuring real estate listings and contact information for Tim Lidstrom and Karla Jo Olson.

**“If we want to see more therapists, we have to figure out how to pay them better and help provide student loan forgiveness.”**

MINDY KIMMEL, LICENSED MARRIAGE AND FAMILY THERAPIST AT FIVE RIVERS MENTAL HEALTH CLINIC.

# NEEDS: High schoolers counsel younger students on mental health

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started in the spring and it really hasn't let up much.”

## Pandemic upheaval

Pre-pandemic, Kimmel described the demand for services during her more than 10 years in the industry as following a general pattern. There'd be an uptick in referrals shortly after schools opened each fall, a decline between Thanksgiving and the New Year, another uptick in January, then a decline over the summer.

The pandemic upended the pattern. Referrals went down when the pandemic hit in early 2020 and stayed that way for a while, likely the result of people holding out longer before seeking services.

Starting around spring 2021, a correction of sorts played out. Kimmel noted Five Rivers had about 40 referrals added to its waitlist over the last month, a high number for this time of year.

“It really varies significantly, but I would say typically it would be probably half that or less,” she said.

Although demand has spiked particularly during the pandemic's second year, it was on the rise even before COVID-19 hit the state. Steadily rising demand spurred local mental health resources to grow in recent years, while the stigma around people seeking mental health services waned.

The South Central Community Based Initiative, which provides mobile crisis services throughout south-central Minnesota, consistently saw the number of people receiving services rise over the years leading up to the pandemic.

In 2004, area crisis services reported about 200 contacts per month on average. That number grew to about 566 people in 2019, significantly higher than the 283 monthly average contacts in 2018 and well past the previous high of about 472 average contacts per month in 2012.

More statistics underscore the increased demand during the pandemic.

At Mental Health Minnesota, which offers mental health screenings and helplines to connect people with resources and providers, staff saw screenings increase 400% during the pandemic, and 600% among youth.

“We've also seen use of our helpline double during the pandemic, and that's really that information and referral resources piece we help people with,” Shanah Mulvihill, executive director of Mental Health Minnesota, said.

Amid the uptick, Mulvihill said people across the state, including in south-central Minnesota, struggle with getting access to providers in a timely manner.

Every mental health provider that The Free Press heard back from confirmed they had waitlists for services. Seven to eight weeks was about the conservative estimate on how long turnarounds are between getting on a waitlist and getting mental health services — it widely varies depending on the type of care a patient needs.

“The referrals have grown,” said Tom McNeely, executive director of Counseling Services of Southern Minnesota. “And I think just about every agency that we're aware of have pretty long waitlists.”

Schools are one of the major sources of referrals. Mental Health America, the national affiliate to Mental Health Minnesota, found the majority of people who used its mental health screenings during a



Photos by Pat Christman

Tina Olson, treatment director of crisis services at Horizon Homes, gives a tour of the South Central Crisis Center's tranquility room, a quiet space for clients at the 16-bed facility in Mankato.



Katie Farmer, a mental health practitioner at Horizon Homes' South Central Crisis Center, works Thursday. For her job, Farmer connects with clients in need of mental health care. Providers regionwide report seeing an uptick in clients this year.

three-month stretch in 2020 were younger than age 24, while screenings rose by 9% among the 11-17 age group compared to 2019.

School districts are searching for more ways to get mental health access. Aside from more referrals to places like Counseling Services of Southern Minnesota, there's been a demand for more peer-to-peer help through Project For Teens, which serves the Mankato, St. Peter and Lake Crystal school districts.

Kate Cox, a licensed counselor who oversees Project For Teens, said there's been an increased demand for high schoolers who volunteer with the organization to come into classrooms at the elementary and middle-school level to help teach basic mental health coping skills for students, beyond what district counselors and mental health professionals are already doing.

“There's just such a need,” Cox said. “There's so much more need than you can possibly give in an eight-hour day.”

## Responding to the flood

Keeping up with the demand, which can result in waitlists lasting for weeks or months, is an ongoing challenge that mental health providers are responding to with the help of expanded telehealth services, more collaboration and attempts to hire more people despite a difficult job market.

Christian Family Solutions added two therapists to its Mankato office in response to the rise in people seeking services. The organization has mental health services ranging from outpatient counseling, day treatment and intensive outpatient programs — it integrates Christian faith principles into its services if clients request it.

“We have seen an absolute flood of intakes,” said Jessica Smith, clinical director at Christian Family Solutions in Mankato. “We're



A shelf in the South Central Crisis Center's tranquility room promotes kindness. The center, along with other mental health resources, is experiencing higher demand for services during the COVID-19 pandemic.

getting record numbers of calls to our intake department every week.”

She's noticed a rise in depression, anxiety and substance use among clients during the pandemic. It's heartbreaking, she said, when people who've been sober for years or never previously abused drugs or alcohol come in struggling.

Staff at Horizon Homes say they're dealing with more serious requests for help during the pandemic as well.

“People are stressed out, they're experiencing things that they've never experienced before, and there is a shortage of resources out there right now,” said Ricki Prybil, clinical director of Horizon Homes.

“There's waitlists for programs and it's just very difficult for people to access the things that they need, and some people haven't experienced any of this before. It's all new to them.”

Horizon Homes provides services to about 1,000 clients a year throughout

south-central Minnesota between its in-home and community treatment, intensive residential treatment programs, and its short-term crisis bed program at the South Central Crisis Center in Mankato, among other services.

A walk-in to the crisis center, located at 2100 Bassett Drive, prompts a screening and meeting with mobile crisis services. From there, a person could stay in one of the crisis center's 16 beds if appropriate, receive follow-up care back home while they look ahead to treatment at a local provider, or, in the most serious cases, be brought to the local hospital's emergency room.

For people who stay on-site at the crisis center, a pilot program can connect them to a psychiatric provider from the Blue Earth County Mental Health Center for medication management three times per week. The pilot, said treatment director of crisis services Tina Olson, has been help-

ful in starting clients on medication or adjusting existing medications.

Instead of clients having to make appointments and wait weeks for medications, the program speeds it up to a matter of days.

“You can adjust to your meds while you're here,” she said. “Then we can continue to have them follow-up (with the mental health nurse practitioner). It's an amazing program.”

Partnerships like this, many mental health providers say, are part of the solution to meeting higher demands for services.

“We really rely on our collaborative efforts with other agencies and other providers so we can make sure the person is getting comprehensive programming and treatment,” Pribyl said.

There's more outreach and collaboration among area providers, hospitals and law enforcement this year than before, which Pribyl called a “huge plus for our community.”

The collaboration includes encouraging clients to check around for the fastest available providers. Kimmel and Smith both said their organizations regularly encourage people to get on multiple waitlists in case a spot opens up sooner somewhere else.

“The bottom line is, and we say this to our clients, we want you to get help,” Smith said. “We want to help you, but we want you to be wherever you can get help.”

## Shifting approach

Despite staffing challenges, Smith and other leaders at area organizations praised their mental health professionals for responding to the increased demand during a tumultuous time. Among the many adjustments they had to make, greater telehealth usage was perhaps the biggest shift.

Some local providers had concerns over telehealth at first, but those concerns were dispelled after many local clients embraced counseling sessions over the phone or video conference.

“That's been the biggest adjustment I think for therapists and clients,” Beth Quinby, a former chair of the Blue Earth County Mental Health Task Force, said. “It's a totally different feel and I think it was an unexpected surprise. I had a lot of clients who were very resistant to it, very hesitant about it when it started, but once it started opening back up a little more my clients said, ‘This is actually really convenient, I would prefer to stay.’”

Five Rivers shifted to tele-

health exclusively for more than a year after the pandemic started, Kimmel said. In-person appointments were phased back in earlier this year, but telehealth was useful enough to warrant usage for those who want it going forward.

“Telehealth has been a way in which we've been able to continue to provide therapy services regardless of their location,” Kimmel said. “I think a lot of families have appreciated that.”

Remote appointments prove especially helpful when a client has transportation barriers, or inclement weather keeps someone home. Some clients also just feel more comfortable using telehealth, although the opposite is true for others.

Some people don't have access to the high-speed internet required for telehealth, an issue more pronounced in rural areas.

Therapists can also have a harder time picking up on body language cues over video than they would if a session is in person. Telehealth is more tricky with children, too, therapists say.

What it comes down to, Smith said, is what fits best for the client.

Telehealth and in-person sessions numbered 30,332 at Christian Family Solutions' 52 clinics in six states in 2019. The total rose to 37,829 in 2020, and is on pace to reach 46,800 this year.

Group sessions at Christian Family Solutions are mostly back in person. If someone is feeling ill or needs to quarantine, though, telehealth gives them a chance to remain involved that week.

Expanded telemedicine reimbursement during the pandemic made the shift possible, a change that some providers want to be permanent. Historically, telehealth sessions weren't reimbursed at the same rates as in-person sessions.

Prior to COVID-19, patients also had to travel to a clinic or other medical facility for a telehealth session in order for it to be covered by insurance. The set-up essentially defeated the purpose of telehealth.

Continuing to fund telehealth at the levels seen during the pandemic would be a welcome move, Kimmel said.

“I think it's here to stay,” she said. “I hope it's here to stay, but I think ultimately that decision will either reside in the Legislature or insurance companies to determine payments.”

As for the mental health field's staffing issues, which workforce reports project to worsen in the future, Kimmel called for more student loan forgiveness programs and retooled reimbursement rates to draw and keep graduates in underserved areas. One such student loan forgiveness program helped Kimmel stay in the field.

“If we want to see more therapists, we have to figure out how to pay them better and help provide student loan forgiveness,” she said. “And until reimbursement rates increase we'll see a shortage in a lot of underserved communities.”

Despite the challenges facing the industry as referrals continue to pour in, Kimmel and the other local providers urged people in need to reach out for services as soon as possible. Waitlists aren't ideal, but they don't mean people should give up hope.

“If they need mental health care, call right away,” Kimmel said. “The longer they wait to get on the list, the longer it can take to get services.”

Follow Brian Arola @ BrianArola