

fall/winter 2021

ECHOES

UNDER THE RIMS



ADVANCING



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ABIDING & ADAPTING

Building the bridge as we walk on it



SINCE ITS FOUNDING, ST. JOHN'S United has been ever evolving and advancing to provide for the dynamic needs of people it serves. The St. John's of 1963 looks different by many measures than the St. John's of 2021, as it ought.

Streaming from a deep commitment of its ownership congregations, generous stakeholders, capable board and management leaders, and caring employees along the way, St. John's has steadily advanced in its capacities for delivering human services, while faithfully abiding in its mission to provide living opportunities within nurturing environments of hope, dignity, and love. The verb advancing has to do with moving forward in a purposeful way. Without purpose, organizational advancement is difficult at best.

A favorite author of mine on matters of organizational leadership and function is Robert E. Quinn, Professor of Organizational Behavior and Human Resource Management at

the Graduate School of Business, University of Michigan. Quinn has published a number of books, including a trilogy series on the concepts of organizational behavior and change. Although each of his trilogy books includes an ample supply of academic research and constructs, the golden nuggets within Quinn's writings are the personal stories of people who have embraced particular forms of deep change within themselves that eventually led to transformational organizational advancements.

Quinn observes that a striking feature of healthy organizations is that they have courage to adapt and advance in spite of not possessing a precise "map" that reveals how to negotiate a way through a myriad of required changes. Quinn states, "When we commit to a vision to do something that has never been done before, there is no way to know how to get there. We simply have to build the bridge as we walk on it."

I like Quinn's notion of having to "build the bridge as we walk on it" in relation to St. John's prior history and current experiences with evolving and advancing. Although the advancements that St. John's has made during the last half century include a healthy measure of purpose and planning, there has not been a detailed "map" revealing how to negotiate a way through all of the adaptations required for continuing to deliver

the highest quality of human services possible.

Within this issue of Echoes are stories of five St. John's advancements currently in motion. These include a family stabilization initiative related to foster care; an Enhanced Living Services initiative; a new transitional care center; the St. John's Laboratory; At Home program expansion in Missoula; and a Campaign for Resident Care rounding third base and headed for home.

Thanks to all for encouragement and support as St. John's continues to build bridges while walking on them.

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CARE FOR COMMUNITY

TAKING RISKS ON BEHALF OF people in need. Being a leader in innovation and sharing our gifts and knowledge. Two core values of St. John's United.

As a human services organization spanning the arc of life, taking risks and leading the way is historically demonstrated. Seeing no shortage of people in need, St. John's United Family Services (formerly Lutheran Social Services of Montana) is expanding its reach by implementing an innovative program designed to strengthen families throughout the state.

Funded by a grant awarded through Lutheran Services in America (LSA), the Family Stabilization Initiative aims to address the number of children separated from their families through out-of-home placements. SJU Family Services

is one of four participants in the evidence based program using the National Center for Innovation and Excellence CARES (Coordination, Advocacy, Resources, Education, Support) Wraparound model.

Montana ranks number two in the nation for children in foster care at 16.2 per 100,000 children. The national average is 5.8 per 100,000 according to 2019 data from Child Trends. "That's not a ranking where we want to be near the top," says Jamie Rettig, SJU CARES Supervisor. "These kids are not just someone else's kids, or kids from *that* side of town or *that* area of the state – they are **our** kids. 'It takes a village' may be a tired phrase, but the concept is accurate. This is our community and it is up to us to support each other."

The Family Stabilization program

seeks to collaborate with existing community resources and will serve as a wraparound liaison for families. Rettig also notes that this is a family-driven process – the families are active participants in setting goals and outcomes, not the service providers. "I may see things that the family could benefit from, but if that's not what they want, we work towards the things that they do desire."

A simple, yet concrete, example of how the CARES model achieves results: Imagine a family with a vehicle, but no licensed driver. Knowing the consequences of not being licensed in the event of a traffic violation or fender bender creates anxiety. Every trip to school or the grocery store is fraught with tension, always with a heightened sense of awareness for law enforcement. This anxiety transfers

from parent to child, creating a sense of fearfulness whenever the police are encountered. What if this were the reason for perpetual tardiness or truancy for the school-aged children? The consequence of tardiness or truancy then creates its own set of problems for the family. It's a never ending spiral.

What if there was a program that could help the parent acquire a driver's license – arrange for driver's training, perhaps provide childcare during the training, help coordinate the necessary appointments at the Department of Motor Vehicles, etc? Now imagine that the assistance is accompanied by no judgment about how easy or difficult the license should be to obtain. Tasks that are taken for granted by some are the source of stress and chaos for others. That chaos creates instability which can lead some families down a path of no return.

This is not to say that solving one challenge magically stabilizes a family. It takes work to address the spectrum of issues that at-risk families face – from the lack of adequate housing and

employment to addiction. The Family Stabilization Initiative wraparound model provides a holistic approach to intervention and problem solving. Successful implementation will be realized and measured by fewer interventions by law enforcement, Child & Family Service investigations, a reduction of children in the juvenile justice system, and a reduction in recidivism.

St. John's United Family Services has targeted late-fall 2021 for a soft rollout of the initiative. Connecting with other service providers and ensuring that staff is trained and equipped is under way. The next step will be to identify families who wish to participate in the program. In the near future, staff will seek to identify volunteers who can act as mentors and tutors. Sources for discretionary problem solving funds (refer back to the example of obtaining the driver's license) will also need to be realized.

When asked how this program fits within the scope of St. John's services, SJU Family Services Director Trudi Paulson reflects on the core values: "We say that our

organization's mission is directed by God's word of love for all and hope for humanity. We also say that St. John's is a place that every day, for every age, there is healing, meaning and purpose. My team's focus is on families, from birthparent counseling and adoption services to the Wendy's Wonderful Kids foster care program. We see families in need and in crisis every day and wonder what interventions might have prevented the crises in the first place. I believe in the hope and healing that this program will bring to our communities across Montana." ♦

More information on the CARES model and the Family Stabilization Initiative can be found online:

The National Center for Innovation & Excellence: ncfie.org/cares-replication

Lutheran Services in America: lutheranservices.org/content/family-stabilization-initiative



AT HOME EXPANSION MISSOULA



Five Valleys Senior Services

AT HOME

"IT MEANS A LOT FOR ME TO BE IN my home," says At Home member Diane Jerhoff, "Everything here means something to me." Diane's desire to age in place instead of moving to a senior living community is not unique. While many find downsizing from a home a relief, for some, leaving home is not an option. In 2019, St. John's At Home program began in Billings, welcoming older adults to join the St. John's community from the place they call home. In just two years, the program has grown to 24 members and a waiting list. "For some older adults, the pandemic solidified their desire to stay home," recalls At Home Director, Sarah Schroefel, "and our membership grew quickly."

The desire for an At Home community isn't limited to Billings. Looking to the west, Missoula is a natural place to establish At Home services.

As Missoula expanded during the pandemic, access to senior services grew more limited. "Prior to COVID, the waiting list for most senior living communities was six months; now it can be five to six years," according to Elizabeth Simpson, At Home's newest program manager. In her prior work with another senior services provider, Simpson noted her clients' frustrations in accessing needed services. "In Missoula, there is a large gap between community needs and services available. I am excited about the At Home model of service delivery. It has a lot more choice and is person-centered," says Simpson.

Simpson will oversee the Five Valleys At Home program, a St. John's United community which is housed within St. Paul Lutheran Church by generous invitation of Pastor Chris Flohr and the church council. Five Valleys At Home is

now taking applications for new members. Members will receive personalized service coordination that fits their needs and lifestyle with social events, transportation, housekeeping, and a dedicated personal service coordinator.

Service coordinators are also equipped to help manage daily health care needs including medication management, bathing and dressing assistance,

Service Coordinator Kathy Nguyen with At Home member Sharon Wosnick



Sarah Schroefel
At Home Director



Elizabeth Simpson
Program Manager

and accompaniment to medical appointments. "Many families are attempting to coordinate care for their aging loved ones from out-of-state and they find the local service coordination invaluable," says At Home Director, Sarah Schroefel. Even families who reside locally

appreciate the service – like Leslie Converse, daughter of an At Home member in Billings. She says, "I can finally be a daughter again instead of just the caretaker and the housekeeper." ❖

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CENTER FOR

EXCELLENCE

HISTORY RECORDS THAT ON November 19, 1963, twenty happy residents moved into the first completed residential apartment units within St. John's Lutheran Home – an area identified as Wing One. Two additional apartment wings were completed soon after and a cornerstone was set into place for the entire building on June 7, 1964. As time progressed, seven distinct wings were constructed.

For nearly six decades, Wing One was a beloved home for hundreds of residents. All of the apartment rooms within that wing, however, were recently vacated when residents moved into their new and spacious Chapel Court apartments, located where Wing Two once stood. Wing Three still remains standing and continues to serve as home for a few St. John's residents within enhanced living spaces.

In recent months, St. John's management and the Board of Directors have been contemplating future development possibilities for Wings One and Three. This past summer, decision was made to transform a portion of Wing Three into needed office spaces and to continue considering future use possibilities for the remaining portion. Decision was also made to

transform Wing One into a thirty-six bed Transitional Rehabilitative Care Center – a center for excellence.

The origin of St. John's United providing rehabilitation and transitional health care to patients can be traced back to an employee named Helen Jorgensen. Prior to her death in 1995, Helen was a persistent advocate for St. John's to expand and improve its capacity to provide high quality rehabilitative health care services. In May, 1996, St. John's opened its newly remodeled Rehabilitation Center near the east entrance of the Legacy Building and named it in memory of Helen.

In 2007, St. John's constructed a sixteen bed transitional care cottage and attached rehabilitative spaces on the south end of the campus. In 2012, sixteen resident rooms and related spaces within Wing Six of the Legacy Building were remodeled for transitional care purposes. Although the Wing Six remodel added to the number of St. John's patient rooms, having transitional care services housed in two separate campus locations spawned operational

inefficiencies.

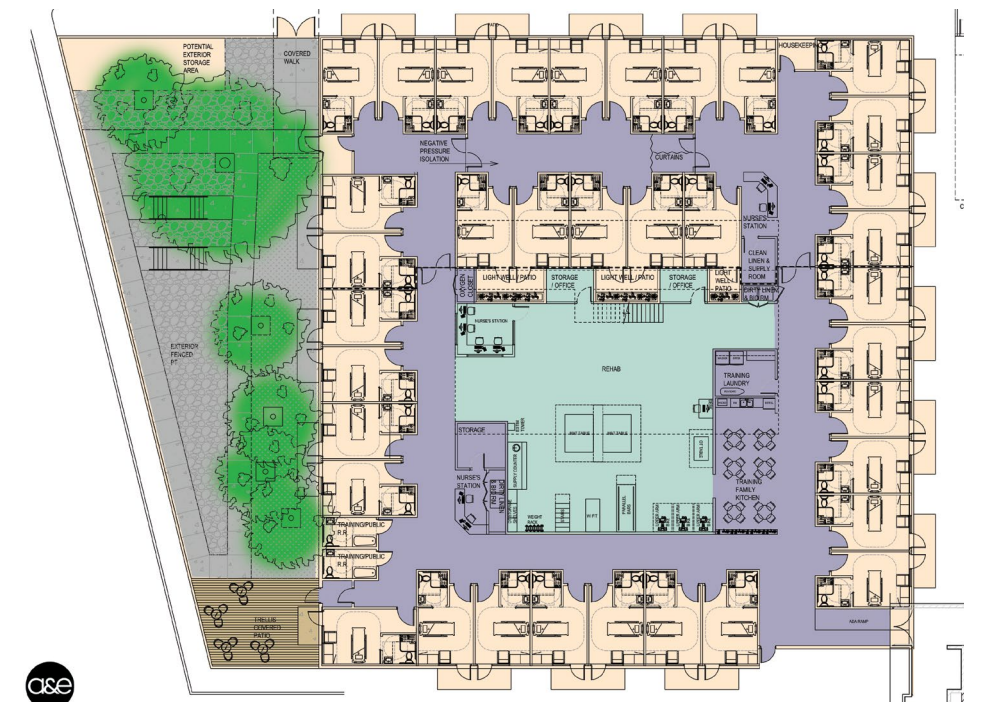
When asked about transforming Wing One into a state-of-the-art transitional care context, Karna Rhodes, Senior Administrative Officer of the St. John's Legacy campus replies, "I'm excited about the advantages of our future Transitional Rehabilitative Care Center being in one location. I'm also excited that the project will have more patient rooms under one roof than in our two prior locations. Our community needs more patient beds; this will elevate us with our partners at both hospitals. Eight isolation area rooms are planned for the project that will allow us to continue to provide best-in-class services. St. John's already has a great reputation for its transitional care services and we want to enhance that."

Mike Kouwenhoven, Director of Rehabilitation and Transitional Care, agrees with Karna. "The new Transitional Rehabilitative Care Center will definitely increase our efficiencies. We will be able to serve more people with fewer staff by moving into one location. Creating human resource efficiencies is a big

deal in light of the current statewide shortage of nurses."

When asked about the nature of the eight isolation rooms that Karna mentioned, Mike states, "These rooms will be constructed to serve patients with infectious realities, whether those realities are COVID virus related or something else. Specially designed doorways and walls will keep isolation patient rooms safely separated from one another and from the other twenty-eight patient rooms and spaces throughout the building. Each of the isolation rooms will have enhanced air handling capacities and access to outdoor patio space for visitation."

In tandem with A&E Architects, design and layout for a new Transitional Rehabilitative Care Center was born out of many conversations. Once the Board of Directors approved a management recommended go-ahead, a project team was formed. That team included people from each of the following specialties: nursing, transitional care therapy, social work, environmental services, information technology, and culinary services. The project team met with management to surface needs, share perspectives, address questions, and offer ideas on how to create a care center capable of providing optimal function. Mike says, "Staff are feeling positive about the project. Still, any time a team prepares to work within a new



Transitional Rehabilitative Care Center Plans

context there is always some measure of intrigue and anxiety related to the unknown."

Some of the known enhancements that the rehabilitative team is excited about, though, include new and improved rehabilitative equipment; separation of transitional therapeutic care spaces from skilled nursing care spaces; a second floor mezzanine that will include office and work areas for staff; and close proximity to the Chapel Court commons, where the Common Grounds coffee shop is located. Karna adds, "The amenities within the recently refreshed Chapel Court area will enhance the experience of patients and their family members

who come to visit." Patient rooms will have approximately the same square footage as current rooms within the Transitional Care Cottage. There is intent also to include provision of oxygen service within each room and artificial intelligence to monitor for patient falls.

In the eyes of all who have been part of the planning process, the new Transitional Rehabilitative Care Center will be a gain for St. John's United and a center for excellence for those who receive healing support within its spaces. ♦



SW View from Rimrock Road



ENHANCED LIVING SERVICES

MORE THAN A GENERATION HAS passed since the continuing care retirement community (CCRC) concept was conceived and implemented across the country. Opened in 1998, Mission Ridge was Montana's first CCRC and boasted a host of living opportunities that spanned the continuum of care for older adults: independent living, assisted living, skilled nursing and memory care. The CCRC model assumes that as

care needs increase, the resident will physically transition to other levels located elsewhere within the community. This model served senior living residents well for many years, giving specialized care in a designated setting, and while it will always be with us, moving from place to place is less desirable than ever before. Nationwide trends indicate that older adults are more interested in aging in place, which is changing the landscape of senior

living communities.

Those residing within St. John's independent living communities have found comfort in that residence that they now call home, surrounded by peers and friends. To enable their aging in place, St. John's has developed an expanded support service known as Enhanced Living Services (ELS). Introduced within Chapel Court Apartments earlier this year, ELS will be expanded to Mission Ridge in December 2021, and is expected to reach WyndStone in the Billings Heights and The Crossings in Laurel by spring 2022.

"Enhanced Living Services is designed to keep people as independent as possible, for as long as possible," says ELS Coordinator Candice Anderson. "Residents enjoy this freedom and flexibility and it sometimes makes more sense financially to stay in place rather than to move to assisted living." A person can contract for only additional services needed, such as accompanied transportation, homemaker services, or medication management. Similar to St. John's At Home program, ELS users will have one service coordinator assigned to them to care for all of their needs. "When people can maintain their independence," Candice says, "they do better, they live longer, and are much happier overall."

The ELS program continues St. John's mission of providing residents with more options for living opportunities within nurturing environments of hope, dignity and love. ♦



What Happens
When Residents at
St. John's Exhaust
Their Resources?

**THEY STAY
THANKS TO YOUR
GENEROSITY**

We're rounding third, at the two-minute warning, coming down the home stretch... Whatever your favorite sports idiom, the Campaign for Resident Care is nearly complete.

As of October 15, our kind and generous donors have offered gifts and gift commitments of \$7,503,893 toward the \$8,000,000 campaign goal. That is amazing progress!

Our remaining gap to goal is \$496,107 and we need your help.

Would you consider a making a gift or documenting your estate gift intent to help us get across the finish line before April 1, 2022?

There are many ways to participate in the Campaign for Resident Care

- Outright Gifts
- Gifts of Appreciated Assets
- Qualified Charitable Distributions from IRAs
- Gifts with Tax Advantaged Income Potential
- Bequests, Estate & Beneficiary Gifts

We're here to answer questions about the campaign and ways to make a meaningful gift that makes a difference in the lives of others.

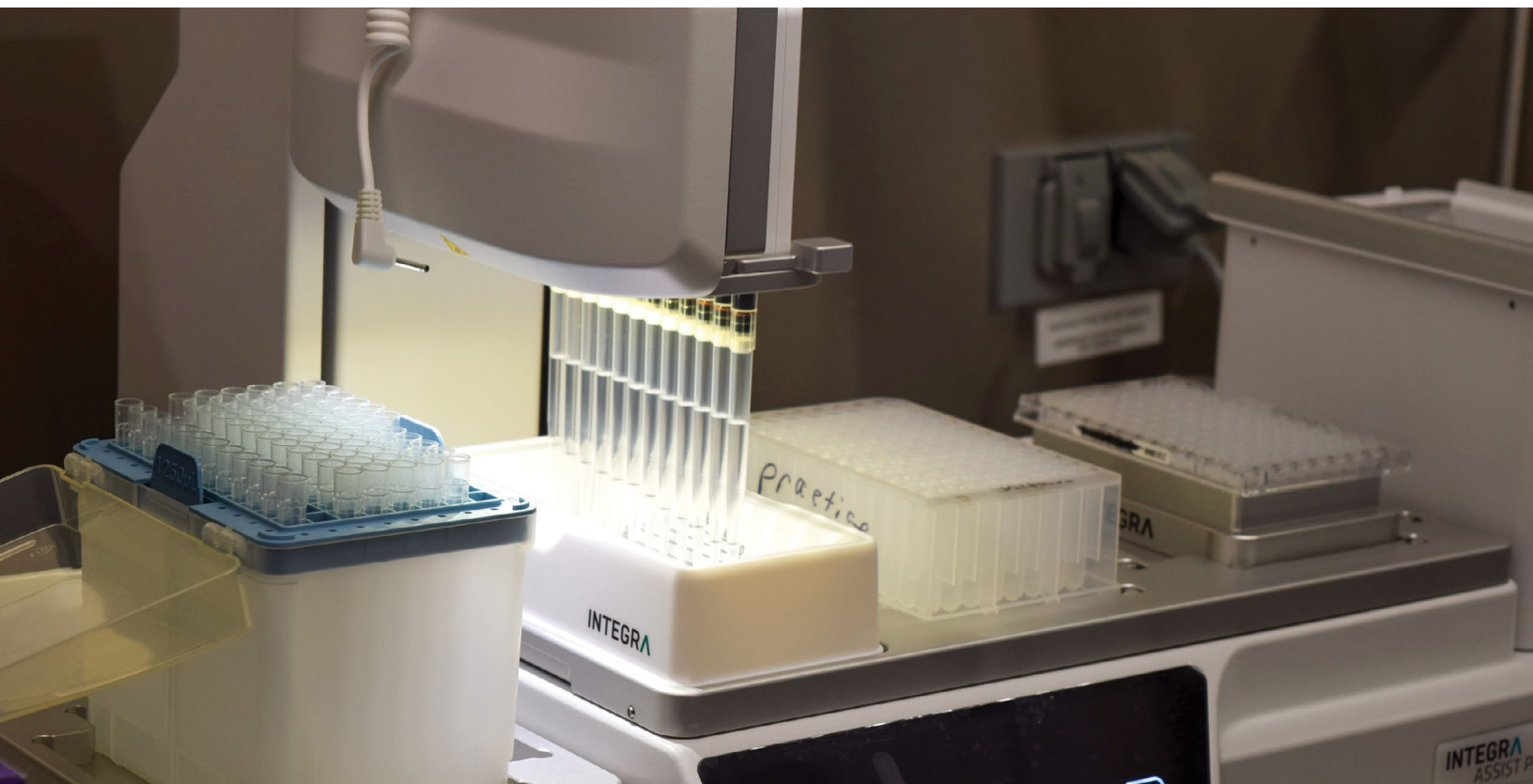


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A YEAR OF RAPID RESPONSE

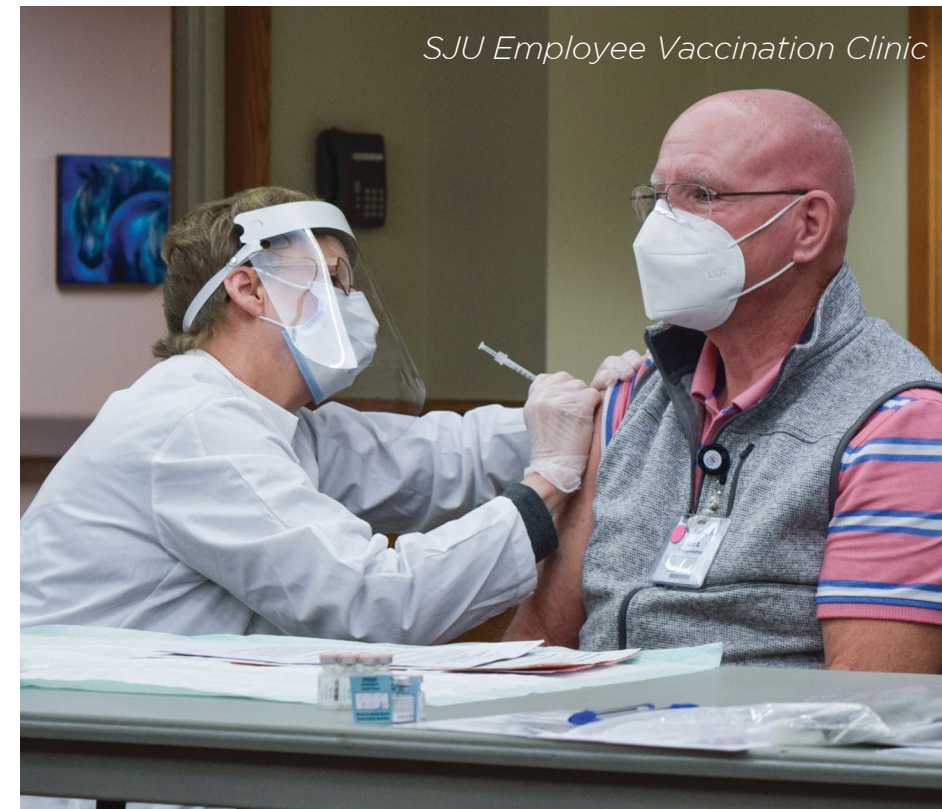


THE ST. JOHN'S UNITED Laboratory continues to drive excellence in rapidly responding to COVID-19. Since its inception in September 2020, the complex clinical laboratory has been dedicated specifically to COVID-19 and augments testing services provided by the State of Montana, thus assuring more timely, point-of-care COVID test results for residents, staff and the Yellowstone County community at large. The lab provides rapid antigen, rapid PCR, and high output PCR testing. In January 2021, the laboratory began offering COVID-19 vaccination clinics to residents and staff of

long term care facilities, including but not limited to SJU, as well as to the general public. The impact of the lab has been tremendous. At times when COVID is surging through the Yellowstone County community, test results from the state lab may take up to two weeks to be returned – far too long for residents living in congregate settings such as St. John's or students in the public schools to wait. The SJU Lab is able to return test results within 24 hours, many within 15 minutes, quickly allowing for containment and isolation of infectious

individuals, minimizing the potential community spread. With the mid-year surge of COVID-19 in Yellowstone County, and the state in general, testing needs outpaced expectations. SJU has responded by adding additional laboratory personnel – now standing at three full-time and one part-time staff – with an additional two full-time positions yet to be filled. Year-to-date, the lab has performed over 5,000 PCR and antigen tests and, as of this writing, is performing more tests per day than any other entity in Yellowstone County.

The work of the lab will continue into the foreseeable future. Billings School District 2 recently received a grant to contract for testing directly with the SJU Lab, ensuring that teachers, students, and their families have direct access to timely testing due to an outbreak or exposure. St. John's United also expresses deep gratitude to First Interstate Bank and other donors for making this valued resource available to our community. ❖



SJU Employee Vaccination Clinic



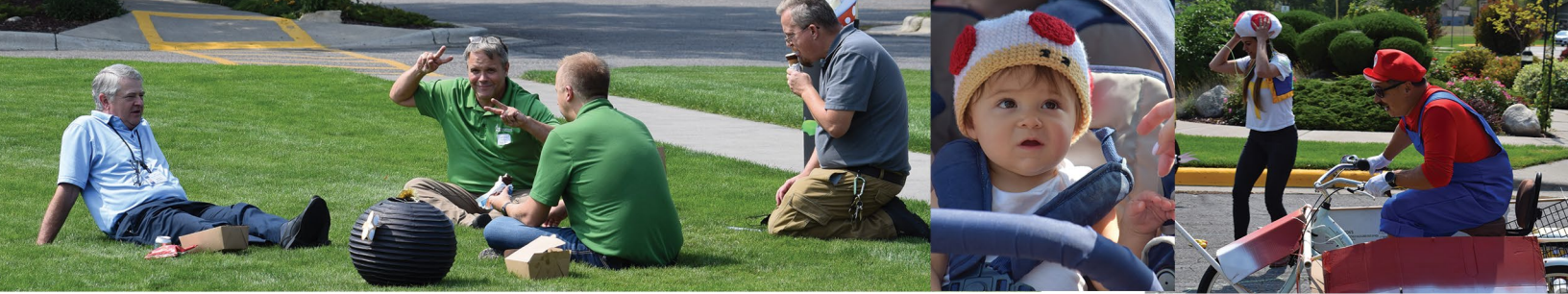
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