

LONG TERM PSYCHIATRIC BEDS

SUMMARY

The County of San Diego Behavioral Health Services (BHS) contracts with two Institution for Mental Disease (IMD) facilities, Alpine Special Treatment Center (Alpine) and Crestwood Behavioral Health, Inc. (Crestwood) for long-term inpatient¹ treatment of the seriously mentally ill under court ordered conservatorship.² The 2015/2016 San Diego County Grand Jury found there are at least twenty such patients at any given time waiting for transfer to a long-term treatment facility. Many of those patients are languishing in psychiatric beds in local acute care hospitals and costing BHS considerably more than a treatment bed at either Alpine or Crestwood.

The Grand Jury found that Alpine has 75 beds under contract with BHS and 50 beds under contract with Los Angeles County at a higher rate than BHS provides. The Grand Jury also found that once treatment at an IMD is completed, housing for many patients becomes problematic. This impacts the ability to discharge patients and admit new patients.

On August 24, 2015, the Grand Jury visited the Psychiatric Hospital of San Diego County (aka County Mental Hospital [CMH]) and observed it had a closed thirty-two bed wing now being used for training.

The Grand Jury recommends that BHS revise the contract with Alpine to increase the number of long-term beds, explore the availability of post-care housing, and determine what would be required to re-purpose the closed wing at CMH for long-term patients.

INTRODUCTION

The Grand Jury investigated the availability of long-term psychiatric treatment beds for seriously mentally ill patients under conservatorship in San Diego County. They also investigated post-care housing needs for patients ready for release from IMDs.

PROCEDURE

The Grand Jury interviewed executives from:

- Behavioral Health Services
- Mental Health America of San Diego County
- Jewish Family Service Patient Advocacy Program
- Alpine Special Treatment Center
- Crestwood Behavioral Health, Inc.

¹ Long-term care refers to patients under treatment longer than six months.

² In conservatorship, the Superior Court places a patient incapable of caring for themselves under the legal authority of a designated guardian.

- Optum Health San Diego

They also visited CMH and reviewed data and reports from the California Hospital Association and Behavioral Health Services.

DISCUSSION

In the 1970s most state mental hospitals were closed and several thousand³ mentally ill patients in California were discharged into the community for treatment, on the theory that mentally ill patients would be better off in community mental health care programs. That decision created housing and health care problems which still exist today.

BHS is responsible for the care of mentally ill patients under court ordered conservatorship. In 1995, BHS contracted with Alpine to provide secure long-term treatment beds for such patients. In 2014, BHS recruited Crestwood to provide 40 more secure long-term treatment beds. In 2015, Crestwood agreed to open another facility in Chula Vista to add 42 beds.

Today there are 195 long-term inpatient treatment IMD beds available in the county. BHS contracts for 145 of those beds. Currently there are 50 beds at Alpine contracted to Los Angeles County at a substantially higher rate (\$396 - \$478/day) than BHS is paying (\$270 - \$310/day).

The Grand Jury found that, in San Diego County, there is an ongoing long-term treatment waiting list of at least twenty people. Many of these patients are in acute care hospitals where therapy is limited and the daily bed rate significantly higher than either Alpine or Crestwood.

One reason given for the waiting list is the lack of facilities to receive patients once therapy is completed. This creates a backlog that prevents IMDs from discharging current patients and accepting new ones. Many of these patients require a more structured discharge plan with continued supervision, often referred to as a Step-Down Program⁴. For example, some patients cannot be placed in a board and care facility due to their violent or suicidal history.

Step-Down facilities would provide the support services needed for a patient to move from a long-term facility. These Step-Down facilities could include onsite counselors, social workers, and closer family contact. At present San Diego County has no such facility. BHS should consider establishing at least one Step-Down facility.

³ <http://www.nytimes.com/1984/10/30/science/how-release-of-mental-patients-began.html?pagewanted=all>

⁴ A short-term, sub-acute residential rehabilitation program for those being discharged from a long-term psychiatric care program.

BHS has the potential to address the need for such a facility through the Mental Health Services Act (MHSA)⁵. These funds are to be used to expand mental health services to the seriously mentally ill through innovative programs.

Another option BHS should explore is a suitable use for the closed thirty-two bed wing at CMH. Devoting a hospital wing for training seems inappropriate given the shortage of long-term mental health beds. While the jury understands there could be obstacles to changing the status and licensing of the wing, it is worth the effort for the county to thoroughly explore what would be needed to repurpose the wing.

COMMENDATION

The Grand Jury commends San Diego County Behavioral Health Services for procuring additional Institution for Mental Disease long-term beds.

FACTS AND FINDINGS

Fact: In 2014, BHS contracted with Crestwood to provide 42 long-term psychiatric beds for inpatient care.

Fact: In 2015 Crestwood opened a second facility with 40 beds, bringing its total to 82.

Fact: Alpine contracts for 75 beds with BHS at \$270-\$310 per day and 50 beds with Los Angeles County at a higher rate of \$396-\$478.

Fact: At any given time there are at least twenty patients waiting to be placed in an IMD facility.

Finding 01: The County of San Diego needs more long-term psychiatric treatment beds.

Fact: CMH has a wing of thirty-two beds currently being used for training purposes.

Finding 02: The County has under-utilized resources for psychiatric beds.

Fact: MHSA provides funding to BHS for innovative programs to improve services for the seriously mental ill.

Finding 03: San Diego County has resources for establishing much needed Step-Down facilities.

RECOMMENDATIONS

The 2015/ 2016 San Diego County Grand Jury recommends that San Diego County Behavioral Health Services:

⁵ In 2004, California passed Proposition 63, which funds increased services to seriously mentally ill and at-risk persons by imposing a 1% tax surcharge on taxpayers with over one million dollars in income.

- 16-70: Revise the contract with Alpine Special Treatment Center to increase the number of long-term beds available to San Diego County residents.**
- 16-71: Explore options for the closed wing at CMH to provide more long-term psychiatric beds.**
- 16-72: Explore options using MHSa resources to support the establishment of Step-Down facilities for patients leaving long-term treatment centers.**

REQUIREMENTS AND INSTRUCTIONS

The California Penal Code §933(c) requires any public agency which the Grand Jury has reviewed, and about which it has issued a final report, to comment to the Presiding Judge of the Superior Court on the findings and recommendations pertaining to matters under the control of the agency. Such comment shall be made *no later than 90 days* after the Grand Jury publishes its report (filed with the Clerk of the Court); except that in the case of a report containing findings and recommendations pertaining to a department or agency headed by an elected County official (e.g. District Attorney, Sheriff, etc.), such comment shall be made *within 60 days* to the Presiding Judge with an information copy sent to the Board of Supervisors.

Furthermore, California Penal Code §933.05(a), (b), (c), details, as follows, the manner in which such comment(s) are to be made:

- (a) As to each grand jury finding, the responding person or entity shall indicate one of the following:
 - (1) The respondent agrees with the finding
 - (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefor.
- (b) As to each grand jury recommendation, the responding person or entity shall report one of the following actions:
 - (1) The recommendation has been implemented, with a summary regarding the implemented action.
 - (2) The recommendation has not yet been implemented, but will be implemented in the future, with a time frame for implementation.
 - (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a time frame for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This

time frame shall not exceed six months from the date of publication of the grand jury report.

(4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefor.

(c) If a finding or recommendation of the grand jury addresses budgetary or personnel matters of a county agency or department headed by an elected officer, both the agency or department head and the Board of Supervisors shall respond if requested by the grand jury, but the response of the Board of Supervisors shall address only those budgetary or personnel matters over which it has some decision making authority. The response of the elected agency or department head shall address all aspects of the findings or recommendations affecting his or her agency or department.

Comments to the Presiding Judge of the Superior Court in compliance with the Penal Code §933.05 are required from the:

<u>Responding Agency</u>	<u>Recommendations</u>	<u>Date</u>
Helen Robbins-Meyer, CAO County of San Diego	16-70 through 16-72	9/7/16