

PHF Expansion and CRT Closure

El Dorado County
Health and Human Services Agency
Mental Health Division

Presented by:
Patricia Charles-Heathers, Ph.D.
Program Manager II
December 11, 2012

PHF Expansion

Psychiatric Health Facility (PHF)

- * An alternative for acute inpatient treatment in a nonhospital setting
- * Provides acute short-term treatment in order to stabilize clients and place them in the next best lower level of care

PHF Expansion

Psychiatric Health Facility (PHF)

- * Board approved decrease to 10 beds on 12/16/08 due to average daily census of 8 beds; staffed for 10 and higher usage was never intended
- * Crisis Residential Treatment (CRT) was created as a short term residential alternative to inpatient hospitalization; opened February 2009

PHF Expansion

Psychiatric Health Facility (PHF)

Expansion to 16 beds is needed because:

- * Placing out of county on a daily basis an average of 1.6 clients at approximately \$837/day
- * Cost for clients from July–August 2012; 53 bed days = \$44,361.00
- * FY 2011 – 2012; out of county bed days utilized = 185
- * Cost for FY 2011 – 2012 = \$151,442.00

PHF Expansion

Psychiatric Health Facility (PHF)

- * Expansion to 16 beds would increase our capacity by 2190 bed days
- * Higher acuity and need due to co-occurring disorders
- * Keep El Dorado clients in their home community, close to family, friends and familiar resources
- * We are currently turning away counties interested in sending clients to El Dorado County PHF; 2 counties have inquired about purchasing a dedicated bed

CRT Closure

Crisis Residential Treatment (CRT)

- * A short-term residential alternative to inpatient hospitalization, for adults experiencing a mental health crisis and require 24 hr. support services for behavioral concerns in a supervised environment that allows freedom of movement in the community.

CRT Closure

Crisis Residential Treatment (CRT)

- * Length of intended stay at the CRT = 30 days
- * Average length of stay = 21 days
- * Clients served have an urgent need for housing and benefits
- * FY 2011-2012 cost \$1.5 million for 56 unduplicated clients
- * FY 2011-2012 utilized average of 4.7 beds/day of the 6 beds

CRT Closure

Crisis Residential Treatment (CRT)

- * 24 hour facility requiring 2 staff at all times
- * Clients are away from the CRT for most of the day
- * The population requiring a CRT level of care can be appropriately maintained in Transitional Housing

CRT Closure

Transitional Housing

- * Currently utilize 3 local Transitional Houses in the community, serving 18 clients
- * Short-term supported housing for clients who are able to live independently with daily check-ins from mental health staff
- * Mental Health Staff provides assistance with grocery shopping, meal preparations, etc.
- * The goal is to move to independent housing

CRT Closure

Transitional Housing Alternative

- * Increase Transitional Houses
- * Provide additional beds for short-term usage
- * Average length of stay 2 – 3 months and on a case by case basis
- * Plan vacancies and manage bed availability

CRT Closure

Intensive Case Management Model

- * Provides a high level of support to help clients live in the least restrictive environment possible
- * Provides a bridge between inpatient and outpatient services
- * Support is available 24 hours a day, 7 days per week
- * Team Members have specialties in Psychiatry, Psychology, Nursing, Social Work, Substance Abuse Treatment, Vocational Rehabilitation and Community Resourcing
- * Cost effective

CRT Closure

Intensive Case Management Model

- * Treatment Services are provided rather than referrals to multiple programs
- * Reduction in institutionalization
- * People are maintained in the community
- * Services are individualized
- * Work with clients in their homes, neighborhoods and other places where their problems and stresses arise and where they need support and skills
- * Team approach; so there isn't dependence on one individual

PHF Expansion

Costs

- * Decrease in out of county placements = \$151,442
- * Likely additional revenue related to the 6 additional beds = \$434,794
- * Billing potential of 2 dedicated beds = \$474,500

PHF Expansion and CRT Closure

Asking the Board to support our request to:

- * Expand the PHF to 16 beds effective 12/31/12
- * Close the CRT effective 12/31/12