



**Update on Osawatomi State Hospital,
Inpatient Community Crisis Centers and
Sexual Predator Treatment Program**

House Social Services Budget Committee

**Tim Keck, Interim Secretary, KDADS
January 26, 2016**

Osawatomie State Hospital (OSH)

- Serves adults from catchment area of 46 Kansas counties, including Sedgwick, Shawnee, Johnson and Wyandotte
- Patients enter the program after having been screened by qualified mental health professionals from one of the community mental health centers (CMHCs) in Kansas, or are referred under an order of evaluation from a judge
- Between 50-70% of people served by OSH also need substance abuse treatment

OSH

- Licensed by KDHE for 206 patients
- OSH was over-census for 9 months from Mar. 3 through Dec. 6, 2014
 - Number of patients reached overall ten-year high on Aug. 23, 2014 with weekly average of 251
 - OSH has maintained census since Dec. 13, 2014
- Increased census during the 9-month period of 2014 triggered CMS survey
 - Dec. 5, 2014 CMS letter cited issues with physical environment that had to be remediated to maintain certification
 - Renovations to complete Plan of Corrections for CMS began Spring 2015

OSH

- May 2015: 60 beds taken offline to complete CMS-mandated construction (Adair A1 and Adair A2)
- Moratorium on admissions declared June 21, 2015 to control census during construction
 - Hospital did not close nor stopped admitting new patients
 - Caps the census at 146 and creates a waiting list
- Waiting List
 - Established through moratorium (K.S.A. 59-2968)
 - Patients are admitted in chronological order
 - As of Jan. 25, 733 patients admitted since moratorium declared
 - Average wait time to be admitted is 24.3 hours

OSH Temporary Census Diversion Funds (OTCDF)

- Approximately \$3.45 million from the legislature in the FY16 Governor's Budget Amendment to support individuals and communities impacted by the OSH reduced census during renovation
 - Inpatient hospital beds
 - Crisis Stabilization Services
 - 24 hour structured care environment
 - Social Detox
 - Sobering beds
 - Intermediate SUD beds
 - Reintegration beds
- KDADS contracted with Kansas Health Solutions (KHS) to administer “bed board” for patients diverted from OSH

OTCDF

- KVC Prairie Ridge in Kansas City is primary OSH hospital diversion taking involuntary patients
 - 12 patient facility
 - No refusal, no early transfer or discharge clause per contract
- Agreements with other community hospitals on a per diem rate but do not have to accept involuntary, violent or aggressive patients
 - Cottonwood Springs (Olathe)
 - Prairie View (Newton)
 - Via Christi (Wichita)
- As of Jan. 15, 2016:
 - 217 individuals received services
 - Approximately \$1.5 million remaining to extend through end of FY16

OSH Medicare Certification

- On Dec. 18, 2015, the Centers for Medicare and Medicaid Services (CMS) de-certified OSH citing survey findings on Nov. 3, 2015, and a revisit completed Dec. 18, 2015
- Terminated federal government reimbursement for Medicare-eligible inpatients admitted to OSH after Dec. 21, 2015
- Payments for existing patients continued 30 additional days, ending Jan. 20, 2016
- OSH is still taking patients; CMS announcement pertains to billing rather than admissions

Rainbow Services Inc. (RSI)

- RSI is a collaborative effort between Wyandot, Inc.; Johnson County Mental Health Center; Heartland Regional Alcohol and Drug Assessment Center; and the State of Kansas
- Services began April 2014
 - 24-hour assessment and triage for individuals experiences a behavioral health crisis
 - Sobering Beds
 - Crisis Observation
 - Crisis Stabilization

RSI Key Goals

- Divert consumers from unnecessary and inappropriate use of state hospitals and jails
- Establish and support alternative community programming that will decrease reliance on Osawatomie State Hospital (OSH) to provide for individuals who may not need inpatient hospitalization, but have no other resources to meet their needs
- Decrease admissions to OSH of individuals who could be stabilized in the community in 10 days or less by connecting these persons to services/resources in their home communities
- Increase 24-hour community options for individuals with co-occurring mental health and substance use disorders

RSI Outcomes

Since opening April 2014 through December 2015:

- 1,854 individuals triaged at RSI a total of 3,189 times. Triage involves a preliminary screen to examine if clients are appropriate for admission and to determine the unit in which they will be admitted.
- Reduction of 3,963 bed days used at OSH from the RSI catchment area (Wyandotte and Johnson County).

Community Crisis Center (CCC)

\$1 million Continuum of Crisis Services grant in 2014 for intervention

Services provided in Wichita through Regional Recovery Center for Region 2 – Butler, Sedgwick and Sumner Counties:

- Crisis Observation Unit
- Children's Crisis Unit
- Sobering Unit
- Detox Unit

CCC Project Goals

- Decrease reliance on State Mental Health Hospitals (SMHH)s as a safety net service provider and establish and support alternative community programming
- Decrease admissions to SMHHs of individuals who could be stabilized in the community in 10 days or less by connecting individuals to services/resources in their home communities
- Increase 24-hour community diversion options for individuals with co-occurring mental health and substance use disorders
- Increase 24-hour community options for individuals who are homeless or at risk of becoming homeless, have self-care failure issues or are at risk for adult/child protective services
- Reduce utilization of the SMHHs and Psychiatric Residential Treatment Facilities (PRTFs)

CCC Services

Since January 2015 to present, a total of 1697 individuals have been served in the various units of CCC:

- Crisis Observation 962 Individuals
- Children's Crisis Unit 83 Individuals
- Sobering Unit 310 Individuals
- Detox Unit 342 Individuals

Inpatient Community Crisis Centers

Evergreen – Emporia

- Mental Health Center of East Central Kansas (MHCECK) in partnership with KDADS provides supervised and supportive housing, employment and treatment supports to adults discharged from OSH
- Chase, Coffey, Greenwood, Lyon, Morris, Osage and Wabaunsee counties

Valeo – Topeka

- Operated without state grant funding

Expansion of Inpatient Community Crisis Centers

- KDADS is expanding RSI-like facilities working with partners in Southeast Kansas (Region 5) and Western Kansas (Region 1)
 - Region 5 accounts for 28% of OSH admissions; Region 1 accounts for 43% of Larned State Hospital (LSH) admissions
 - Southeast Kansas focus on individuals with co-occurring disorder where primary diagnosis is Substance Use Disorder (SUD); Region 5 has state's highest percentage of SUD co-occurring
- Community meetings will be scheduled this month

Sexual Predator Treatment Program (SPTP) Overview

- Established by a 1994 statute that provides for the civil commitment of persons identified by the law as sexually violent predators
- Dual mission:
 - » Provide for the safety of Kansas citizens by establishing a secure environment in which persons identified as sexually violent predators can reside.
 - » Offer treatment with the aim of reducing their risk for re-offending allowing motivated persons who complete treatment to return to society.
- Program serves adult male patients from the state who have been adjudicated through KS sexually violent predator treatment laws and are committed for treatment under civil statutes
- Currently 232 residents on Larned State Hospital (LSH) campus and 25 in reintegration facilities

SPTP Timeline of Events

- **June, 2012** – ERO 41 – Governor transferred authority over the state hospitals to the newly created Kansas Department for Aging and Disability Services
- **December, 2012** – Former Secretary Sullivan appointed a task force to make recommendations, which might improve SPTP at LSH
- **November, 2013** – The SPTP Task Force submitted its written report with recommendations to the Secretary
 - SPTP Post-Task Force team created to ensure implementation of the recommendations

LPA SPTP Timeline

- **March, 2013** – The Legislative Division of Post Audit (LPA) reviewed and approved a legislative request for a performance audit of SPTP. In this audit, the LPA staff were tasked with answering this question:
 - *Is the Sexual Predator Treatment Program appropriately managed to ensure the safety and well-being of program staff and offenders?*
- **August, 2013** – LPA report submitted to KDADS and Legislature
 - KDADS implemented the recommendations of the LPA report and testified to the legislature regarding implementation of those recommendations.

LPA SPTP Part 2 Timeline

- **10/30/2014** – LPA reviewed and approved a legislative request for a performance audit of SPTP. In this portion of the audit, the LPA staff were tasked with answering these questions :
 - (1) *How does Kansas' Sexual Predator Treatment Program compare to similar programs in other states and best practice?*
 - (2) *What actions could be taken to reduce the number of offenders committed to Kansas' Sexual Predator Treatment Program?*
- **4/28/2015** – LPA report submitted to KDADS and Legislature
 - KDADS is working to implement report recommendations as directed by the LPA Committee and appearing before the legislature to testify regarding the recommendations.