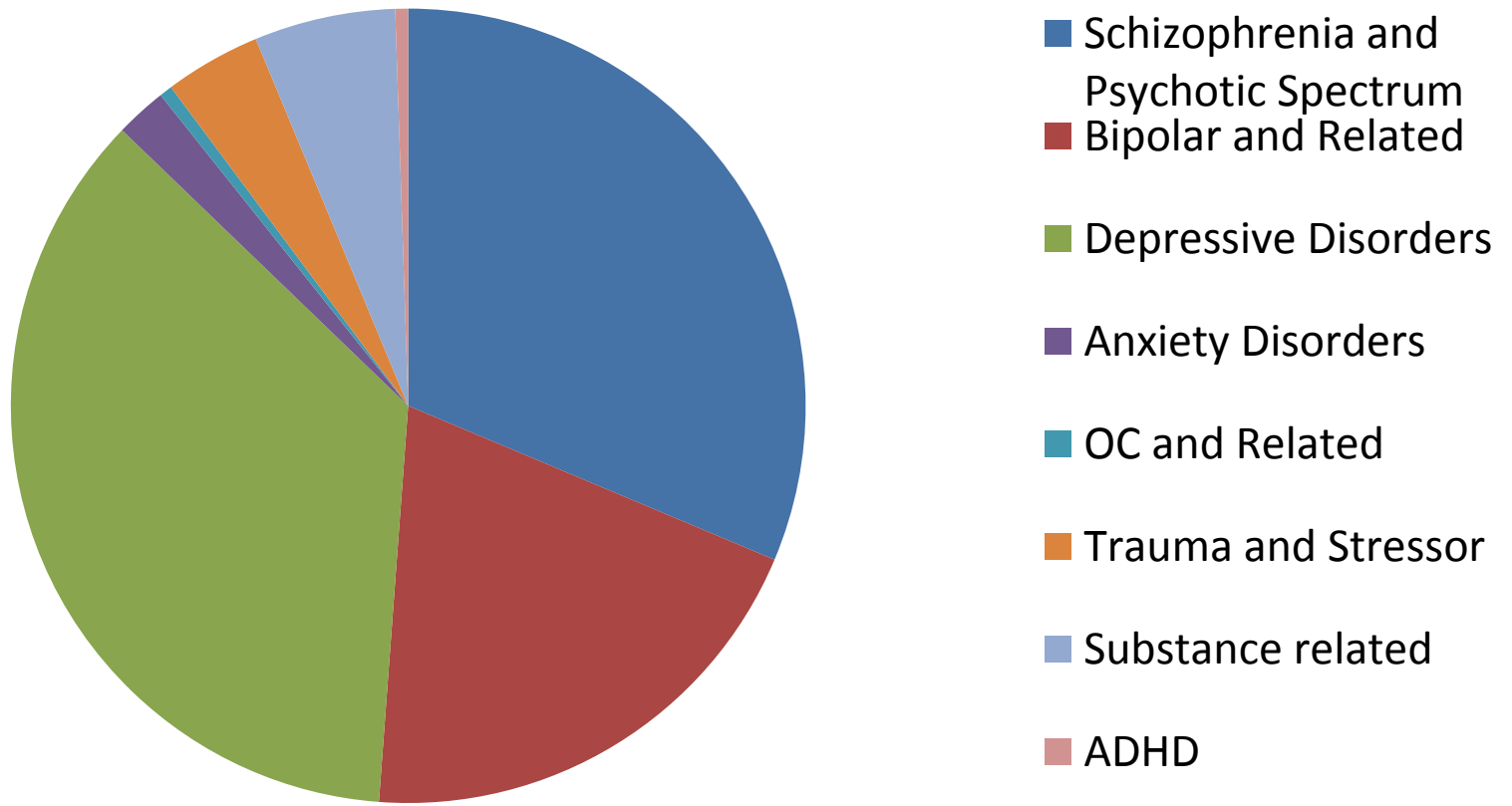


Psychiatric Services Program Larned State Hospital



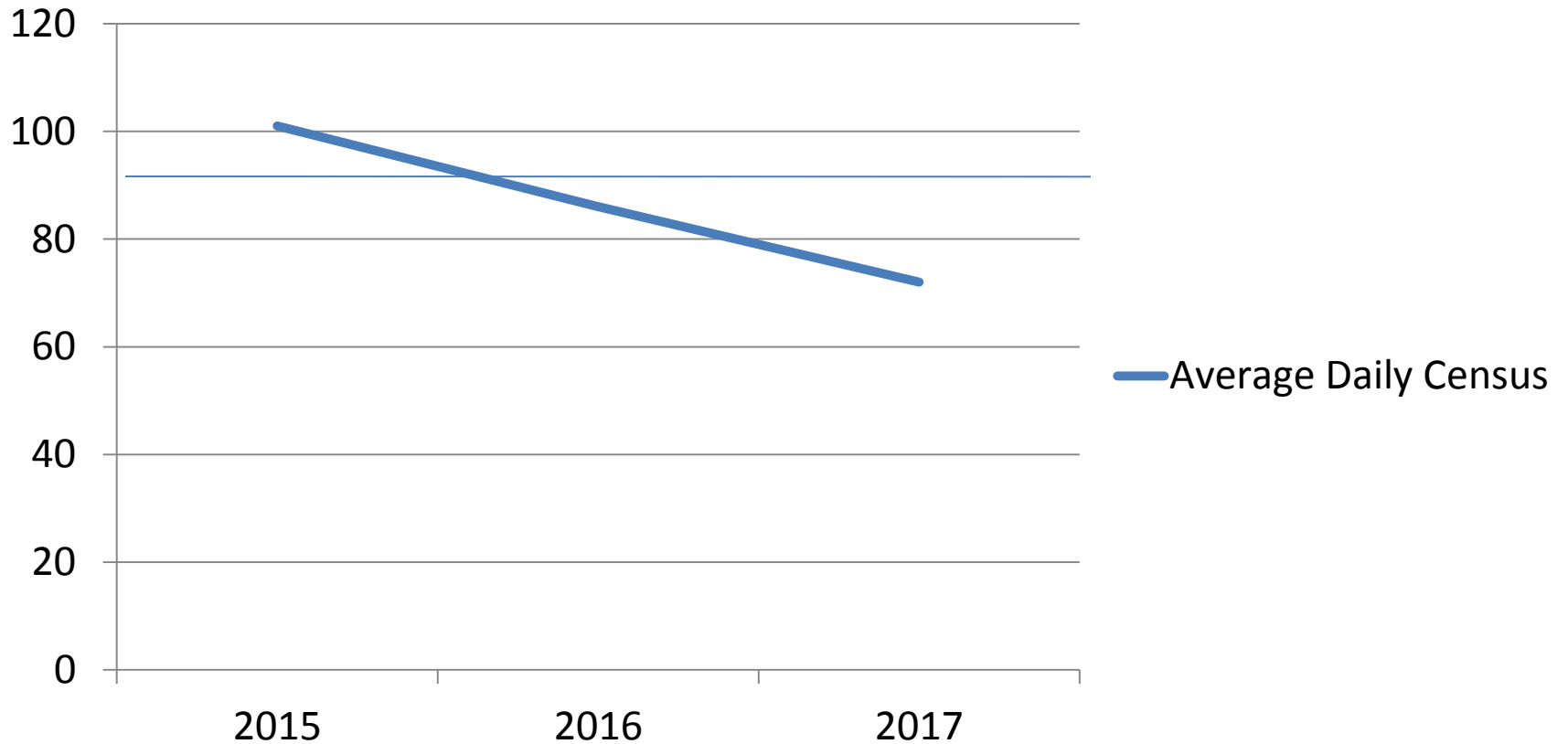
PSP Diagnosis Snapshot

Diagnosis Distribution



PSP Daily Census

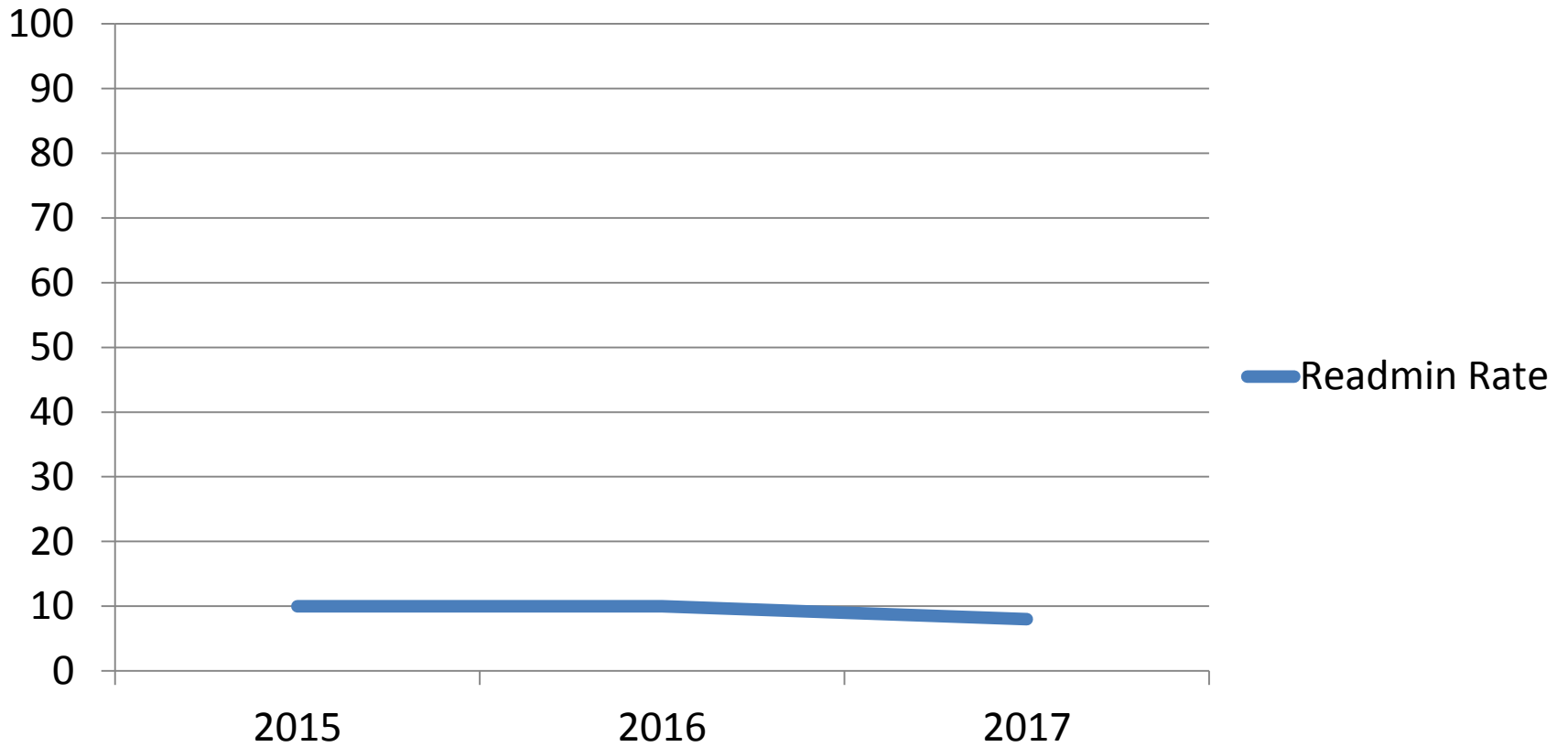
Average Daily Census



Licensed/certified max is 90. 2017 - 85 patients optimal census.

PSP Readmission Rate

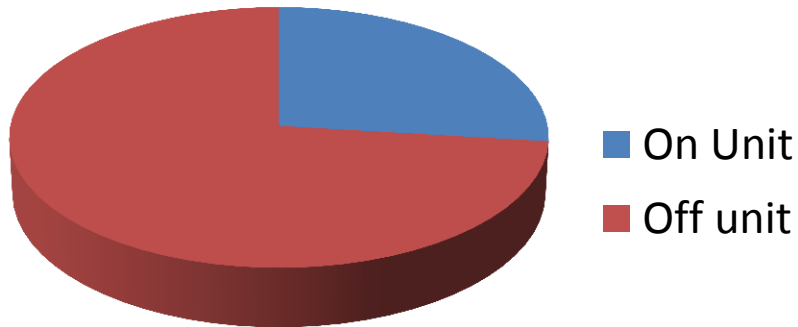
Readmission w/in 30 days of discharge



Active Treatment-Activity Therapy

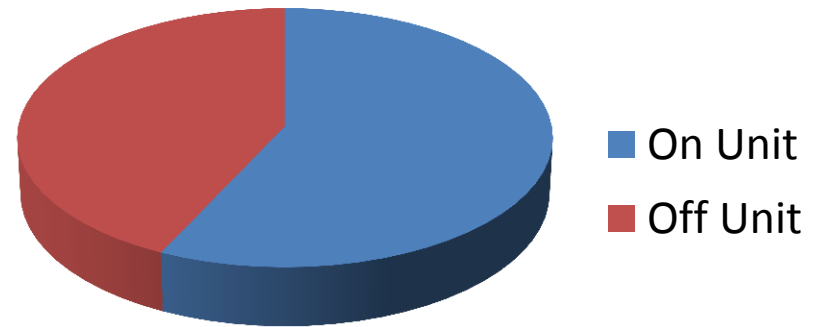
Activity Therapy Hours

Distribution Pre-10/1/2016

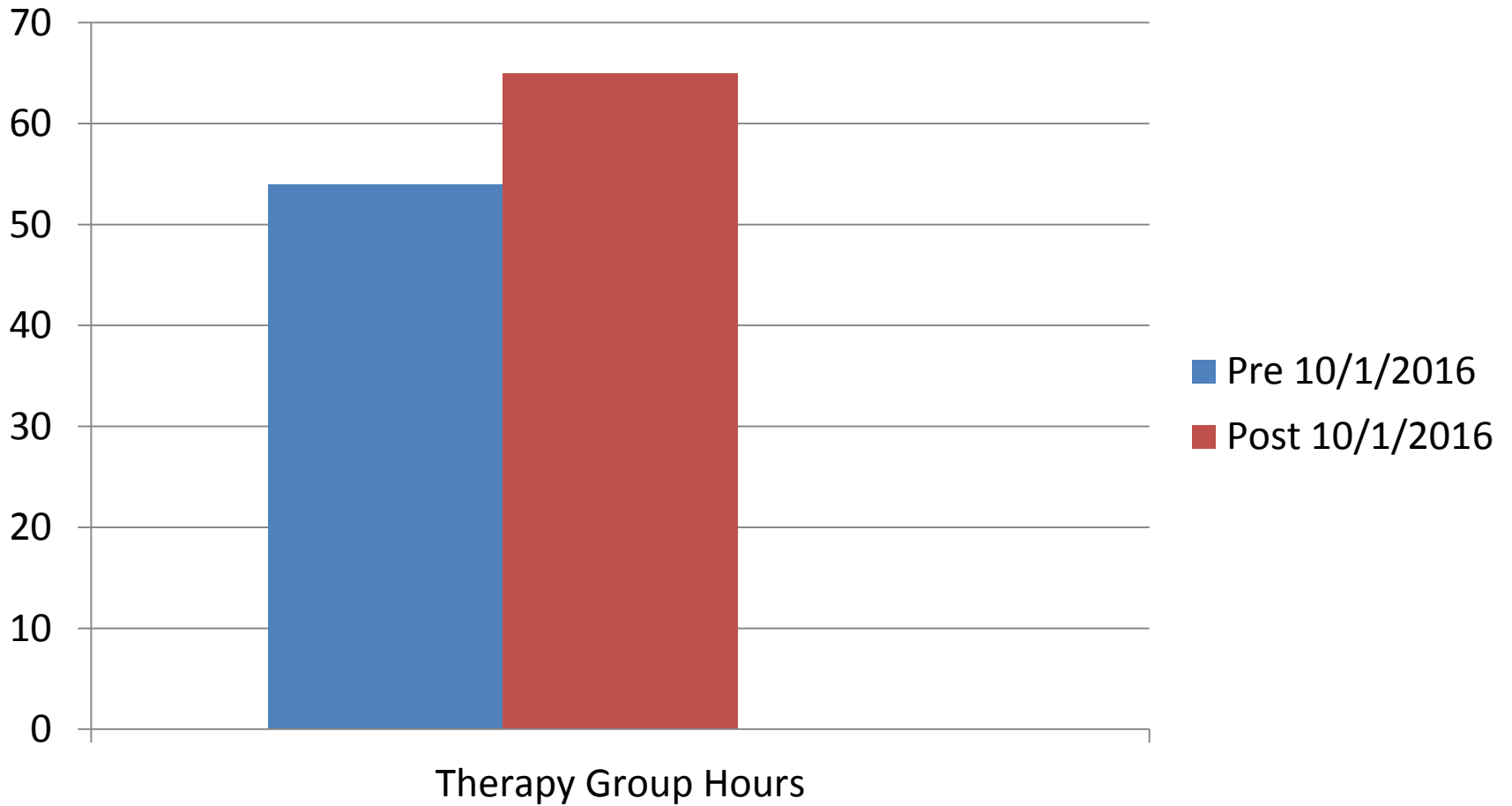


Activity Therapy Hours

Distribution Post-10/1/2016



Active Treatment-Treatment Groups



Group Therapy

- Illness Management and Recovery *
- Coping Skills
- DBT Mindfulness *
- Co-Occurring Disorders
- Integrated Psychological Therapy *
- Process Group *
- Interpersonal Therapy*
- Cognitive Behavioral Therapy-Depression*
- Cognitive Behavioral Therapy-Anxiety *
- Life After Trauma
- Mood Regulation
- Drama Therapy
- Competency Group

•Evidence-based Practice

Active Treatment

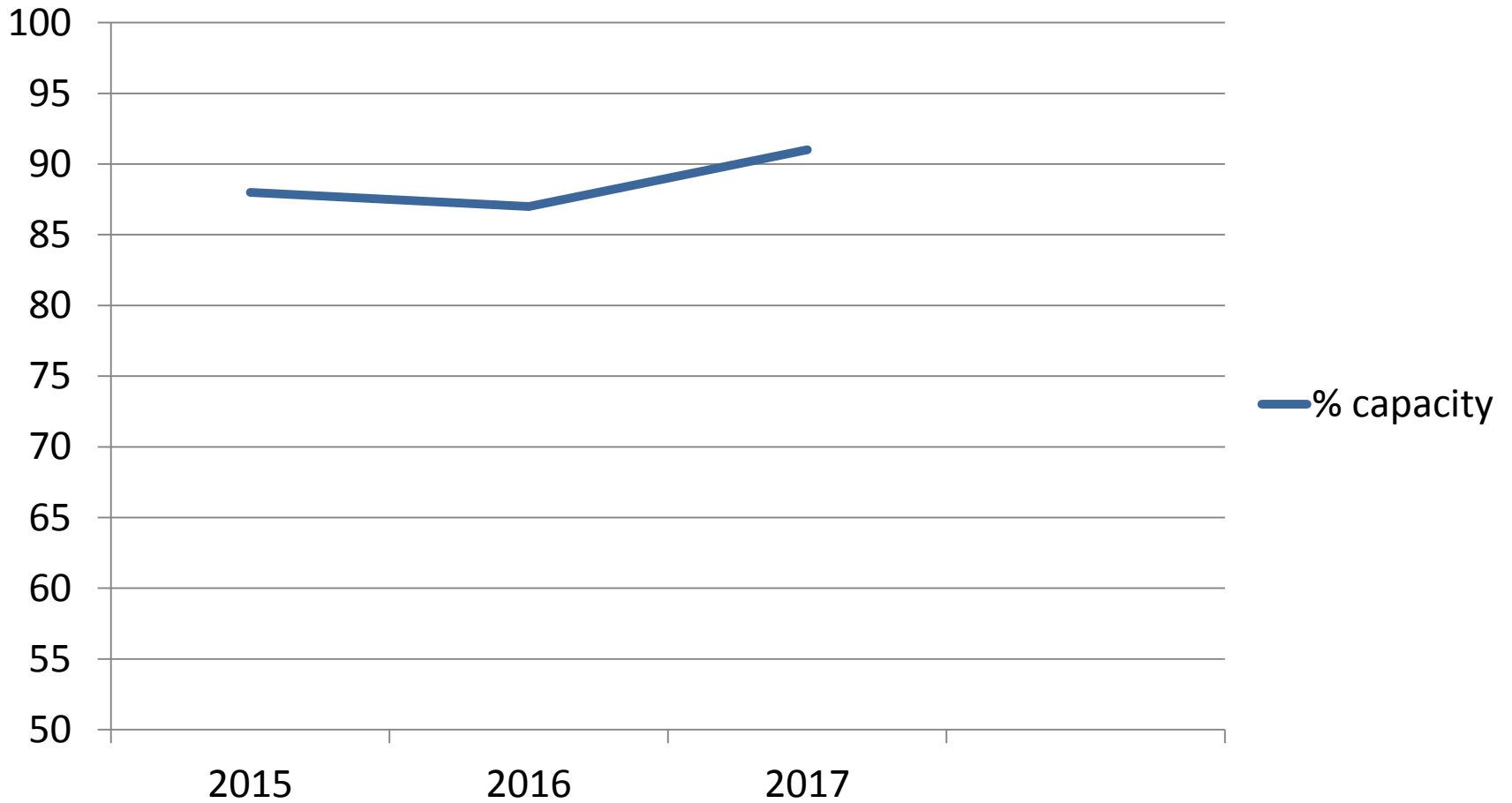
- Group Therapy now available 6 hours/day, 5 days/week, all units, on unit
- Individual therapy still available on unit
- More activity therapy provided on the units, increasing availability to our most acutely ill patients
- Increased group therapy availability on all units simultaneously. Goal is to provide a minimum of 4 hours of group therapy, on units, per day, per patient.
- Not just more hours of group therapy now available, but expanding variety to better meet patient treatment needs.
- Improves individualization of treatment.

PSP Active Treatment

- Next steps
 - Group therapy available on unit, 7 days/week
 - Increased availability of individual therapy
 - Advancing implementation of more trauma-informed practices
 - Reinvigorate more advanced activity therapies that had to be put on hold to cover staffing needs for shift to on unit service provision

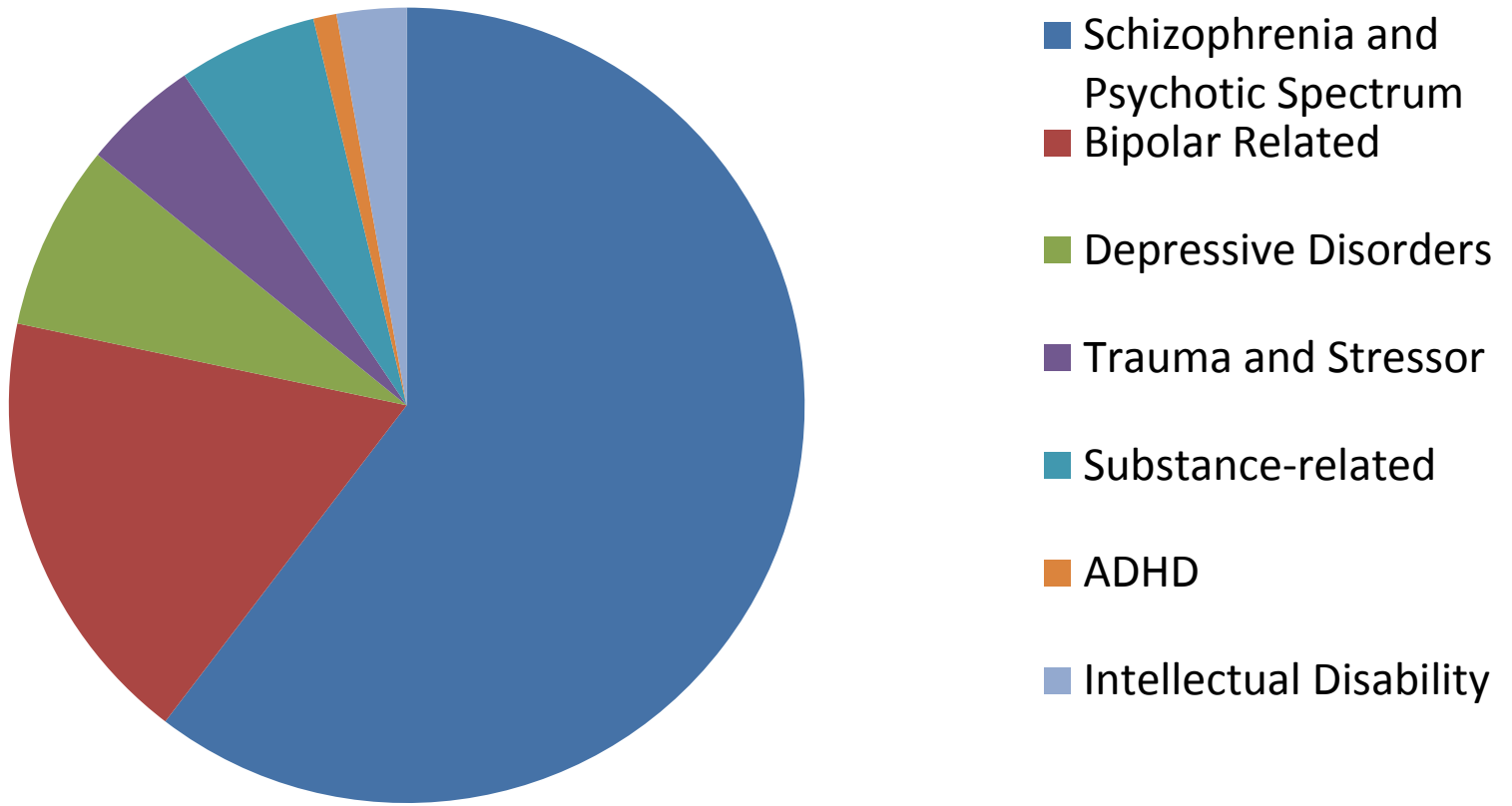
State Security Program

SSP Daily Census



SSP Diagnosis Snapshot

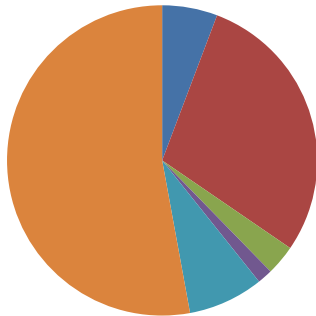
Diagnosis Distribution



SSP Legal Status

2015

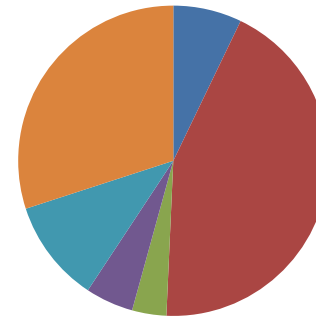
Patients



- Lack of Mental State Eval/Tx
- CST Eval and/or Treatment
- Pre-Sentence Evaluation
- Sexual Predator Evaluation
- Treatment in Lieu of
- Correctional Transfer

2016

Patients



- Lack of Mental State Eval/Tx
- CST Eval and/or Tx
- Pre-Sentence Eval
- Sexual Predator Eval
- Treatment in Lieu of
- Correctional Transfer

SSP

- Staffing shortage created shift to nearly exclusive evaluation for providers on SSP, with limited treatment offerings beyond competency restoration and behavioral consultation to treatment teams.
- Some treatment still in place
- Next Steps:
 - Reintroduce more mental health treatment services on SSP to assist with symptom management

Recruitment Efforts

All Departments

- Essential and In Need
 - Chaplaincy -1 for entire hospital
 - Activity Therapy – sharply reduced, long-term staff, high percentage nearing retirement, represent essential services on all 3 programs
 - Social Services – significantly reduced and struggling to recruit, essential for admission, discharge, and service provision
 - Psychology – has system in place to bring in new potential hires, staffing currently too low to address demand for evaluation and treatment across PSP and SSP long term.

Training Initiatives

- All 4 clinical programs are in various stages of implementation for plans to becoming a site for professional training
 - Identify requirements and begin putting elements in place to become a desired training site for finishing students
 - Practicum
 - Clerkships
 - Internships
 - Post-master training toward licensure
 - Post-Doctoral training