

Priority: Basic Needs **Lead Agency:** County Human Services
Program Offer Type: Existing Operating **Program Contact:** Godwin Nwerem
Related Programs: 25055A, 25067

Program Characteristics:

Executive Summary

This program offer focuses on the mental health needs of OHP enrolled children and families by providing the following service types: Psychiatric Inpatient Hospitalization Services, Psychiatric Residential Treatment Services for Children, and Secure Alternatives to Psychiatric Hospitalization for Children. The three program elements provide a continuum of services for 664 children each year who need secure placement outside the home for mental health care.

Program Description

This program contains three distinct levels of mental health service for children and families: Psychiatric inpatient hospitalization is the highest level of treatment for children suffering from mental illness. The Mental Health and Addiction Services Division (MHASD) Call Center coordinates with hospital and community providers to recommend inpatient medical treatment only when community-based care is inadequate to prevent a mental health crisis or manage severe symptoms, based on medical necessity and clinical criteria. The average hospital stay for a child is 7.9 days.

Secure alternatives to psychiatric hospitalization stabilize mental health symptoms for children who would otherwise require inpatient hospitalization. Service is provided at a secure community-based facility that is staffed 24 hours a day with medical and clinical personnel. Treatment includes clinical programming, family therapy, medication management and discharge planning. The MHASD Call Center authorizes the service.

Psychiatric residential services treat children who, because of acute mental illness, are unable to manage their own behavior and who often present a threat to themselves and their parents. Highly trained staff provide 24-hour-a-day service, including psychiatric day treatment, medication management and basic supervision. MHASD's Family Care Coordination Team supervises these services and works with providers to discharge children into the community when appropriate. The average length of stay has been reduced to 47 days.

Program Justification

Consistent with the Basic Living Needs priority, this program offer recognizes that children affected by severe mental illness may require different kinds of care. It matches the child with the most efficient and most medically and clinically appropriate level of mental health treatment.

Performance Measures

| Measure Type | Primary Measure | Previous Year Actual (FY06-07) | Current Year Purchased (FY07-08) | Current Year Estimate (FY07-08) | Next Year Offer (FY08-09) |
|--------------|--|--------------------------------|----------------------------------|---------------------------------|---------------------------|
| Output | Total unduplicated children receiving inpatient, subacute & residential care. *1 | 667 | 0 | 664 | 664 |
| Outcome | Average length of stay in psychiatric residential treatment.*2 | 53 | 0 | 47 | 47 |
| Outcome | Percent of children discharged from inpatient and readmitted within 30 days | 20.7% | 0.0% | 19.0% | 19.0% |
| Outcome | Percent of children discharged from residential and readmitted within 30 days | 16.1% | 0.0% | 18.3% | 18.3% |

Performance Measure - Description

*1 Total unduplicated children receiving inpatient, subacute, and residential psychiatric care. *2 Average psychiatric residential treatment length of stay in number of days. *3 Percent of children discharged from inpatient or subacute and readmitted within 30 days to same or higher level of care. *4 Percent of children discharged from psychiatric residential treatment and readmitted within 30 days to same or higher level of care. Current year amounts purchased for these outputs and outcomes are unavailable as this is a new combined program offer. Previously, these were reported as multiple unduplicated counts for each of the individual offers which now comprise this combined offer. The sum of the combined old offers is not comparable to a single unduplicated count.

Legal/Contractual Obligation

State of Oregon Mental Health Organization (MHO) contract, Statement of Work.

Revenue/Expense Detail

| | Proposed General Fund | Proposed Other Funds | Proposed General Fund | Proposed Other Funds |
|---------------------------|-----------------------|----------------------|-----------------------|----------------------|
| | 2008 | 2008 | 2009 | 2009 |
| Program Expenses | | | | |
| Contracts | \$0 | \$2,900,000 | \$0 | \$2,350,000 |
| Subtotal: Direct Exps: | \$0 | \$2,900,000 | \$0 | \$2,350,000 |
| Administration | \$0 | \$111,165 | \$0 | \$81,931 |
| Program Support | \$0 | \$206,766 | \$0 | \$157,250 |
| Subtotal: Other Exps: | \$0 | \$317,931 | \$0 | \$239,181 |
| Total GF/non-GF: | \$0 | \$3,217,931 | \$0 | \$2,589,181 |
| Program Total: | \$3,217,931 | | \$2,589,181 | |
| Program FTE | 0.00 | 0.00 | 0.00 | 0.00 |
| Program Revenues | | | | |
| Intergovernmental | \$0 | \$2,900,000 | \$0 | \$2,350,000 |
| Program Revenue for Admin | \$0 | \$317,931 | \$0 | \$239,181 |
| Total Revenue: | \$0 | \$3,217,931 | \$0 | \$2,589,181 |

Explanation of Revenues

Oregon Health Plan revenue based on estimated average of 64,205 insured members - \$2,350,000

Significant Program Changes**Last year this program was:**

This program offer includes three FY08 program offers:

25057 Secure Alternatives to Hospitalization for Children

25069 Psychiatric Residential Treatment Services for Children

25103 Inpatient Hospitalization (Verity)