MDHHS: FY23 Budget Executive Recommendation

State Hospital Administration

March 9, 2022

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Michigan's Public State Hospitals

GOGEBIC

BARAGA

MARQUETTE

Caro Center

• CY 2021 average census: 102 patients

• Serves adult patients residing in the Upper Peninsula and northeast Lower Peninsula.

Kalamazoo Psychiatric Hospital

• CY 2021 average census: 155 patients

• Serves adult patients in western and the central Lower Peninsula.

Walter Reuther Psychiatric Hospital (Westland)

• CY 2021 average census: 168 patients

• Serves adult patients in Livingston, Washtenaw, Wayne and Monroe counties.

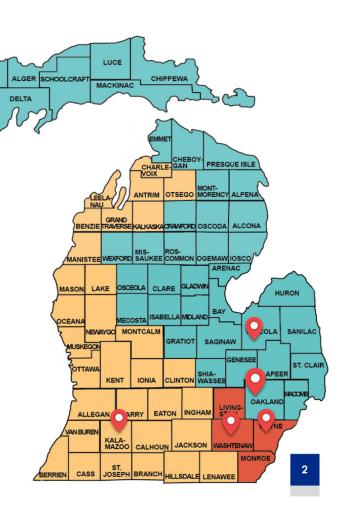
Hawthorn Center (Northville)

- CY 2021 average census: 49 patients
- Serves children & adolescent patients across Michigan.

Center for Forensic Psychiatry (Saline)

- CY 2021 average census: 224 patients
- Serves adult forensic patients across Michigan.







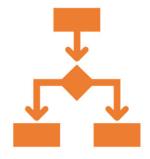


Development and implementation of a **community transition program** for adults consistent with Section 962 of Public Act 67 (2019)

FY 2022 Strategic Accomplishments

Expansion of **higher educational opportunities** and relationships in state hospitals.





State Hospital Administration **Throughput Outcomes**.



FY 2022 Progress: Caro Center

- September 2020 site work commenced.
- December 2021 building enclosure.
- Project on pace for spring 2023 opening.
- Patient capacity -100 beds.
- Approximately 114,000 square feet.
- Physical plant encompassing 27 acres.
- Construction/design team has been successful in forecasting supply chain issues and remains on schedule and under budget.





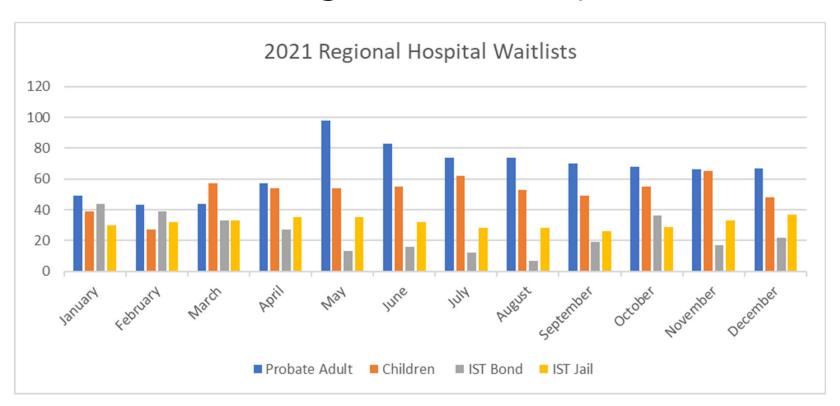


FY 2022 Progress: Psychiatric Residential Treatment Facilities

- Public Act 285 (2020).
- Provider of inpatient psychiatric treatment services to Medicaid-eligible individuals under the age of 21.
 - 42 CFR 441.151 through 441.182 & 483.350 through 483.376
- Must be accredited by The Joint Commission, or any other state-approved accrediting organization.
- Anticipated implementation spring 2023.



FY 2022 Challenges: State Hospital Waitlists







Build a New Combined Psychiatric Hospital

Context

- Excessive demand and persistent waitlists for inpatient psychiatric services at state operated hospitals.
- Aging physical plant infrastructure at both Walter Reuther Psychiatric Hospital and Hawthorn Center has necessitated significant short-term investments to maintain necessary safety standards.
- Discontinuity in both hospitals' physical plants do not reconcile with current behavior health standards.
- Significant future investments to infrastructure will be needed in the coming years to maintain status quo.

Response

- Design and construct a modern facility that reconciles with current behavioral health standards.
- Keeping populations separate.
- Make treatment and living spaces contiguous.

Expected impact

- Operational efficiencies are gained by combining two facilities into one.
- Provision of treatment in a modern setting.
- Contiguous living spaces will maximize therapeutic and staffing efficiencies as well as improve patient and staff safety.



Behavioral Health Capacity and Access

Context

- **Excessive demand** and persistent waitlists for inpatient psychiatric services at state operated hospitals.
- Lack of community-based psychiatric beds or facilities to immediately respond to patients transitioning out of state psychiatric hospitals.
- Long admission delays resulting in patients waiting in emergency rooms pending placement in a state facility.
- Michigan ranks third in the nation with the highest shortages of mental health professionals.

Response

- Expand behavioral health inpatient **community-based** treatment programs.
- Extend behavioral health and opioid health **homes** to additional counties.

\$55M GF

- Fund staff and operational costs for two new units at the **Hawthorn Center**.
- Fund staff and operational costs for a new **Center for Forensic Psychiatry** satellite facility.

Expected impact

- Increased access to and quality of behavioral health services.
- Improved patient outcomes.



Occupational Health Clinics

Context

- The State of Michigan hospitals do not have an occupational health clinic.
- The COVID-19 pandemic exacerbated compliance issues with occupational health and infection control requirements, e.g., data entry, reporting, inventory, and surveillance, as well as flu vaccine and tuberculosis test administration.

Response

 Establish an occupational health clinic in the five state psychiatric hospitals.

Expected impact

• An occupational health clinic in each hospital will operationalize workplace safety, infection control, and medical and behavioral training and improve health metrics for all through quality control.



Centralized Administrative Support for State Psychiatric Hospital Activities

Context

- DHHS manages statutorily supported programs that facilitate placement of patients into community settings when community mental health cannot readily find placement.
- Additional FTEs are needed to manage, monitor, and oversee Careflow, MDHHS Community Transition Program (MCTP), and psychiatric residential treatment facilities (PRTF).

Response

Expand staffing infrastructure and supervision within the department.

Expected impact

- Admissions, discharges, and placement efforts will increase.
- Better utilization of limited state hospital beds and resources.



Completion of Caro Center project.

Increase throughput.

Wrap Up

Expansion of **education opportunities** Kalamazoo Psychiatric Hospital, Walter Reuther Psychiatric Hospital, and Caro Center.

Ongoing assessment of system-wide administrative and clinical processes.

Establishment of **Psychiatric Residential Treatment Facilities**.

Formal review of hospital operations for **forecasting trends** in physical plant management, bed capacity, and facility safety.



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