Oregon Health Authority Oregon State Hospital



Presented to House Behavioral Health Committee February 17, 2022 Dolly Matteucci, OSH Superintendent





#### 2021 Census

In 2021, Oregon State Hospital provided treatment for 1,424 people committed by the courts or the Psychiatric Security Review Board.

Commitment Type	Salem (ADP)	JC (ADP)	<b>Total</b> (ADP)	% Pop	Admits	% Admits	Median LOS
Civil (civil commitment, voluntary, voluntary by guardian)	10.3	7.0	17.4	2.9%	4	0.4%	314
Guilty Except for Insanity / PSRB	140.9	87.1	228.0	37.4%	53	5.7%	968
Aid and Assist	357.8	0.0	357.8	58.7%	870	93.9%	91
Other (corrections, hospital hold)	4.7	1.3	6.0	1.0%	0	0.0%	N/A
Total	513.7	95.4	609.2	100.0%	927	100.0%	119

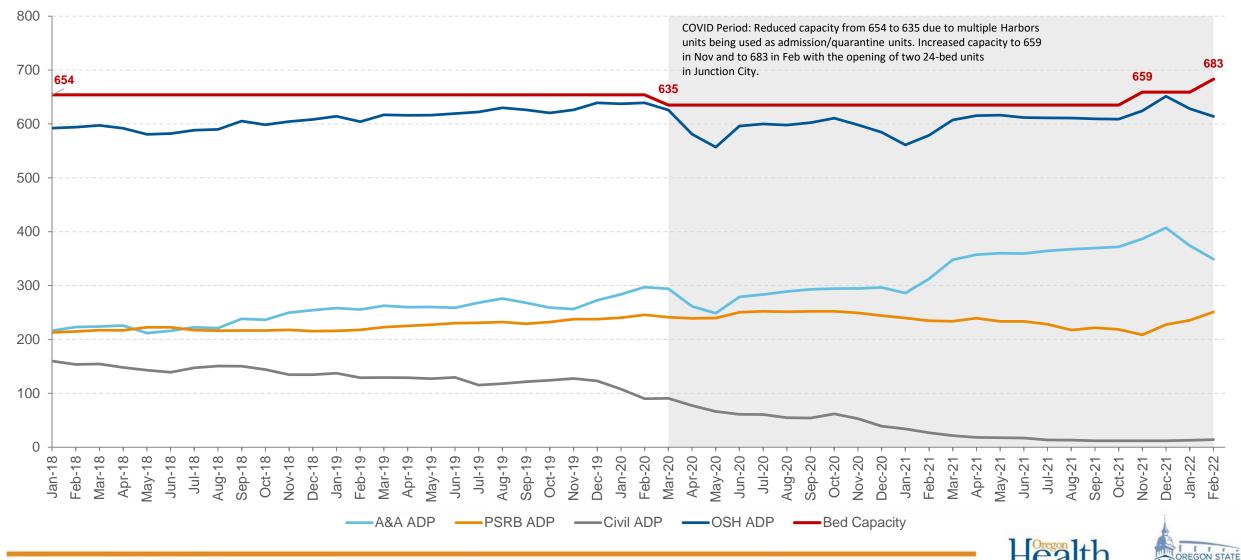






#### **Oregon State Hospital Capacity**

#### Oregon State Hospital Bed Capacity and Average Daily Population by Legal Status Type



#### Increased capacity- the path we are on

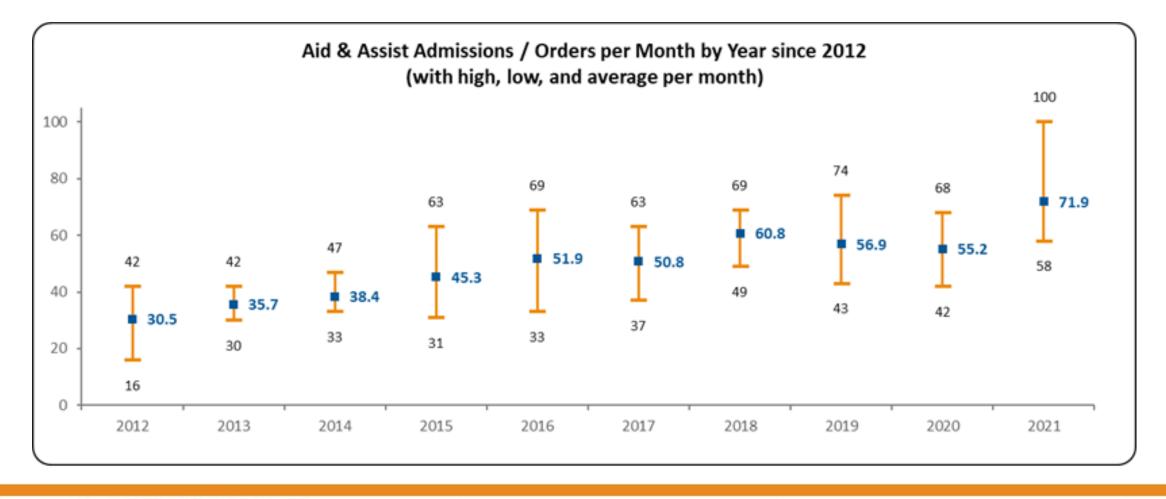








#### **Aid and Assist orders**









#### **People waiting for admission to Oregon State Hospital**



People waiting for admission and discharge: Updated February 15, 2022





## **People waiting for discharge from Oregon State Hospital**

Salem - RTP (Aid and Assist)	Salem - RTT (Civil)	Salem/JC - CRR (PSRB)
78 Patients are Ready to Place	5 Patients are Ready to Transition:	32 Patients listed as CRR
7 Patients with LOCUS score of 6	<b>3</b> Patients being considered for SRTF placement (1 patient is being looked at for APD eligibility)	15 Patients referred for SRTF
38 Patients with LOCUS score of 5	<ol> <li>Patients pending updates on placement.</li> </ol>	13 Patients referred for RTF/RTH
22 Patients with LOCUS score of 4	<b>1</b> Just added to RTT status on 02/02. Pending update.	1 Patient for Independent
<b>10</b> Patients with LOCUS score of 3		2 Patient referred for I/DD placement
1 Patient with LOCUS score of 2		1 Patient for DOC







#### Joint Stipulation to appointment of a neutral expert

- Plaintiff Disability Rights Oregon (DRO), Plaintiff Metropolitan Public Defender (MPD) and Defendants Patrick Allen, Director of Oregon Health Authority and Dolores Matteucci, Superintendent of OSH, jointly petitioned the Court for an order to consolidate two related cases.
- They also jointly requested the appointment of Dr. Debra Pinals as a neutral expert in both matters to make recommendations both short and long-term recommendations to address OSH capacity issues.





#### **Court appointed neutral expert:** Initial report addressing capacity issues at OSH

- Pursue avenues to **expedite and improve discharge processes**, including but not limited to:
  - Advocacy for legislation that would require county fiscal responsibility for individuals in OSH who do not require hospital level of care;
  - Development of methods to enhance SB 295 processes;
  - Refinement of discharge policies/protocols.
- Continue to **examine community barriers** to preventing unnecessary admissions including diversion, maximizing the use of beds for those requiring hospital level care.





## Court appointed neutral expert:

Initial report addressing capacity issues at OSH continued

- Consider **evaluation order trends** and determine if there are areas that can be addressed to gain efficiencies and reduce wait times;
- Advocate for the adoption of the OSH staffing request;
- Regularly continue to meet with the plaintiffs and neutral expert;
- Regularly meet, along with plaintiffs, with leadership from DOJ to inform discussion that can lead to progress vis a vis compliance.





#### **Court appointed neutral expert:** Initial report admissions protocol

- Coordinate admissions lists between people under GEI and Aid & Assist orders to reduce overall jail times of both groups;
- Use opening of the additional Junction City unit to facilitate admissions and equalize wait times to create the ability for a more uniform admissions protocol;
- Develop infrastructure improvements to help monitor compliance and tracking through a shared data dashboard and further develop admissions strategies and hospital capacity by tracking data in a consistent manner.





#### **OHA/OSH Staffing Report**

- The Oregon Health Authority (OHA) shall consult with relevant stakeholders to resolve staffing shortfalls at the Oregon State Hospital.
- The stakeholders include, but are not limited to, managerial and direct care staff employed by the Oregon State Hospital; community mental health programs; and hospital and other health care providers.
- No later than Nov. 1, 2021, OHA shall submit a financially and programmatically sustainable plan to the Emergency Board or Interim Joint Committee on Ways and Means that provides solutions for maintaining appropriate daily staffing levels to ensure the safety of both patients and staff.

The Report is available <u>here</u>.





#### **Recommendations From the Staffing Solutions Workgroup**

#### **Direct Care Services**

The Staffing Solutions workgroup produced five recommendations of need:

	2021-23	2023-25	Positions
Posting Factor	\$24,874,642	\$49,196,873	283
Training Coordination and Support	\$545,711	\$638,379	1
Scheduling System Enhancements & Support	\$224,397	\$253,407	1
Police/Fire/Call Center Retirement Benefits	TBD	TBD	-
36-hour Nurse Schedule	TBD	TBD	-
Staffing Solution Recommendation Total	\$25,644,750	\$50,088,659	285





## **OSH Staffing Solutions**

#### Retirement structure:

 The Staffing Solutions workgroup recommends a change in PERS benefits for all OSH employees. OSH would need support from other agencies to consider the impacts of this recommendation.

#### 36-hour nurse schedules:

 The Staffing Solutions workgroup recognizes a need to make changes to recruit and retain nurses (RN/LPN) at OSH. The group recommends that a 36-hour work week is equivalent to full time, with full-time benefits. The 40-hour work week is no longer used within hospital settings for Registered Nurses.





## **Original 2021-23 Staffing Proposal**

	ŀ	liring Ma	rch :	1, 2022	Hi	ring Oct	er 1, 2022		Hiring A	pril	1, 2023						
	16 Months					9 Months					ontl	hs	Total				
Classification	Pos	FTE	Total Expense		Pos	FTE		Expense	Pos	FTE		Expense	Pos	FTE	٦	Fotal Expense	
Licensed Practical Nurse	16	10.72	\$	1,841,330	10	3.80	\$	647,339	5	0.65	\$	107,888	31	15.17	\$	2,596,558	
Mental Health Registered Nurse	26	17.42	\$	4,858,779	14	5.32	\$	1,471,651	11	1.43	\$	385,436	51	24.17	\$	6,715,866	
Mental Health Therapy Tech	76	50.92	\$	7,306,345	38	14.44	\$	2,054,924	19	2.47	\$	342,487	133	67.83	\$	9,703,756	
Mental Health Therapist 2	36	24.12	\$	3,889,984	18	6.84	\$	1,094,057	9	1.17	\$	182,346	63	32.13	\$	5,166,387	
Nurse Manager	2	1.34	\$	417,857	2	0.76	\$	235,044	1	0.13	\$	39,174	5	2.23	\$	692,075	
Nursing	156	104.52	\$	18,314,295	82	31.16	\$	5,503,015	45	5.85	\$	1,057,332	283	141.53	\$	24,874,642	
Safety and Security	10	6.70	\$	1,057,848	10	3.80	\$	570,189	-	-	\$	-	20	10.50	\$	1,628,037	
Clinical	17	11.39	\$	2,213,129	13	4.94	\$	945,236	-	-	\$	-	30	16.33	\$	3, 158, 365	
Operations	10	6.70	\$	1,101,993	-	-	\$	-	-	-	\$	-	10	6.70	\$	1,101,993	
Other	16	10.72	\$	2,293,027	-	-	\$	-	-	-	\$	-	16	10.72	\$	2,293,027	
Grand Total	209	140.03	\$	24,980,292	105	39.90	\$	7,018,440	45	5.85	\$	1,057,332	359	185.78	\$	33,056,064	
									Traini	ag. Timo	Attendance S	uctom		ć	/150.000		

Training; Time and Attendance System	\$	450,000
Grand Total	\$ 33,	,506,064







#### **Revised 2021-23 Staffing Proposal**

	Hiring May 1, 2022				Hiring November 1, 2022					Hiring N	lay 1	l, 2023						
	14 Months					8 Months				2 Months				2021-23 Total				
Classification	Pos	FTE	To	tal Expense	Pos	FTE		Expense	Pos	FTE		Expense	Pos	FTE	Т	otal Expense		
Licensed Practical Nurse	16	9.28	\$	1,683,594	10	3.30	\$	601,275	5	0.40	\$	75,162	32	. 12.98	\$	2,360,031		
Mental Health Registered Nurse	11	6.38	\$	1,848,480	14	4.62	\$	1,344,343	26	2.08	\$	624,166	52	. 13.08	\$	3,816,989		
Mental Health Therapy Tech	19	11.02	\$	1,684,286	38	12.54	\$	1,924,833	76	6.08	\$	962,493	133	29.64	\$	4,571,612		
Mental Health Therapist 2	9	5.22	\$	891,681	18	5.94	\$	1,019,061	36	2.88	\$	509,522	63	14.04	\$	2,420,263		
Nurse Manager	2	1.16	\$	375,455	2	0.66	\$	214,545	1	0.08	\$	26,818	[	5 1.90	\$	616,818		
Nursing	57	33.06	\$	6,483,496	82	27.06	\$	5,104,057	144	11.52	\$	2,198,160	283	71.64	\$	13,785,713		
Safety and Security	10	5.80	\$	964,706	10	3.30	\$	532,695	-	-	\$	-	20	9.10	\$	1,497,401		
Clinical	12	6.96	\$	1,459,619	11	3.63	\$	717,594	7	0.56	\$	119,844	30	) 11.15	\$	2,297,058		
Operations	5	2.90	\$	548,134	5	1.65	\$	265,197	-	-	\$	-	10	) 4.55	\$	813,331		
Other	10	5.80	\$	1,354,988	4	1.32	\$	260,467	2	0.16	\$	39,177	16	5 7.28	\$	1,654,632		
Grand Total	94	54.52	\$	10,810,943	112	36.96	\$	6,880,010	153	12.24	\$	2,357,181	359	103.72	\$	20,048,134		
									Train	ing; Time	e an	d Attendance	e Syste	n	\$	450,000		

Grand Total

\$20,498,134







# Thank you.





