

HHS COMMITTEE #3
November 12, 2009

MEMORANDUM

November 10, 2009

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst *lmc*

SUBJECT: **Discussion: Development of a Mental Health Report Card** (recommendation of the Blue Ribbon Task Force on Mental Health (2002))

Those expected for this session:

Uma Ahluwalia, Director, Department of Health and Human Services
Dr. Raymond Crowel, Chief, DHHS Behavioral Health and Crisis Services

On June 24, 2009, the HHS Committee received a briefing on the 2002 Blue Ribbon Task Force Report, "Developing a System of Care, Findings and Recommendations on the Public Mental Health System" and progress that has been made since the report was issued. The Committee indicated its interest in following up on the Task Force recommendations, particularly those that could move forward with local, rather than State, action. The HHS Committee asked the Public Safety Committee to join them in following up on recommendations regarding the development of a mental health court in Montgomery County and the joint committee has held an initial worksession on this topic.

At this session, the Committee will discuss the Blue Ribbon Task Force recommendation for the development of a public report card and will hear from the Department of Health and Human Services on their efforts to date to improve reporting on accountability and outcomes. The following is the recommendation from the 2002 Report:

9. Ensure that the Core Service Agency makes full public disclosures on a regular basis.

9.1 Develop a public report card that is issued regularly (preferably quarterly). The public should be provided with a full and open disclosure of the actual state of the public mental health system. This can be done by issuing a report card that includes data such as: summary client information, demographics, utilization rates, financial information, outcomes, and system

accountability measures. Other local jurisdictions, such as King County (Washington) have developed such as mental health report card. The report card should also include an accurate description of the following:

- Recent reports such as the consultants' reports on the fundamental flaws in the underlying financial model and the expected financial failure of public outpatient clinic systems;
- Increase in the number of mentally ill persons confined in Montgomery County jails;
- Increase in the number of homeless mentally ill;
- Continued confinement of County citizens in Springfield hospital as a consequence of inadequate community services and supervised residential placements; and
- The number of people on waiting lists for subsidized and supervised housing.

Attached at ©1-9 is the King County Regional Support Network, Mental Health Plan, 2009 First Quarter Report Card.



King County

**King County Regional Support Network
Mental Health Plan
2009 First Quarter Report Card**

Summary

King County Regional Support Network (KCRSN) served 27,086 clients through the 1st quarter of 2009 representing a 10% increase over 2008 and 7% increased over 2007. The increase was predominantly in clients without Medicaid (43% increase over 2008). This was the second quarter to represent funding from the Mental Illness and Drug Dependency Action Plan (MIDD) sales tax targeted for non-Medicaid clients who otherwise could not be served (see page 1).

Ongoing outpatient services were provided to 23,200 individuals. The number outpatients of all ages rose compared with Q1 2008 and 2007, in large part due to a tripling in the number of non-Medicaid outpatients. Average service hours per outpatient are similar to Q1 2008 but increased compared with Q1 2007 (see page 2).

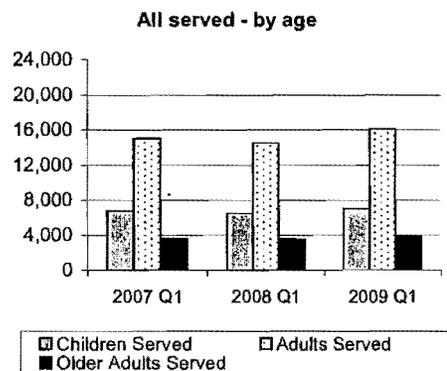
In addition to increasing access to mental health services for non-Medicaid clients, the MIDD directs funds for 36 other strategies to fill critical gaps in the mental health and chemical dependency treatment systems. One such strategy, is an expansion of the Geriatric Regional Assessment Team (GRAT) that provides assessment and linkage for older adult who are medically compromised or disabled. (see page 4).

The number of people receiving specialized crisis services by contracted providers has increased as these programs have expanded in part due to the MIDD. Community voluntary hospitalizations have decreased for both children and adults compared with Q1 2008. Community voluntary and involuntary hospitalizations decreased for both children and adults compared with Q1 2008. Western State Hospital (WSH) admissions are double the admissions in Q1 2008 in part due to a reduction in the WSH waiting list which allowed more rapid transfers of individuals needing to be admitted to WSH from local hospitals (see page 5).

The rate of outpatient homeless individuals who found housing decreased from 34% in Q1 2007 (and 37% in Q1 2008) to 29% during this reporting period. The rate of outpatient unemployed adults who obtained employment fell slightly from 3.5% to 2.4% since Q1 2007, though the 2008 and 2009 rates were similar. The rate of previously incarcerated outpatient adults who reduced incarcerations improved from 68% in Q1 2007 to 72% during this reporting period (see pages 6-7).

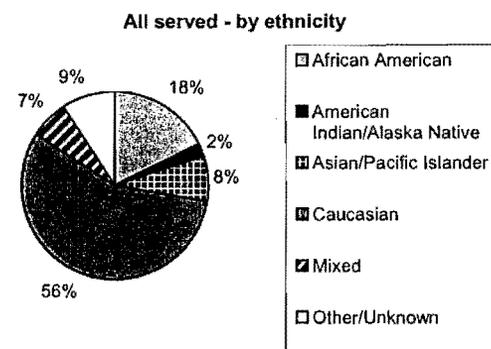
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King County Regional Support Network 2009 Mental Health Plan First Quarter Report Card All Services



King County RSN served 27,086 unduplicated clients in 2009 through the 1st quarter; representing a very notable **10% increase over 2008** and **7% increase over 2007**. There was a similar increase in the monthly average caseload. The increase was predominantly in clients without Medicaid (43% increase over 2008), but there was also some increase in clients with Medicaid. This is the second quarter to represent the additional non-Medicaid clients served as a result of the MIDD sales tax funds targeted for this population.

KCRSN served 44% ethnic minority clients in first quarter of 2009, 3% higher than in 2007.



Client Description	Unduplicated people year to date ¹			Average people per month ²		
	2007 Q1	2008 Q1	2009 Q1	2007 Q1	2008 Q1	2009 Q1
Children Served	6,734 27%	6,480 26%	6,999 26%	5,654 25%	5,469 25%	5,824 24%
Adults Served	15,006 59%	14,464 59%	16,129 60%	13,671 60%	13,090 60%	14,633 60%
Older Adults Served	3,587 14%	3,565 15%	3,958 15%	3,433 15%	3,412 16%	3,756 16%
Total Served	25,327 100%	24,509 100%	27,086 100%	22,759 100%	21,971 100%	24,213 100%
African American	4,320 17%	4,252 17%	4,831 18%	3,873 17%	3,798 17%	4,312 18%
American Indian/Alaska Native	564 2%	543 2%	574 2%	496 2%	485 2%	514 2%
Asian/Pacific Islander	1,950 8%	1,923 8%	2,139 8%	1,798 8%	1,791 8%	1,965 8%
Caucasian	14,910 59%	14,200 58%	15,273 56%	13,400 59%	12,721 58%	13,657 56%
Mixed	1,490 6%	1,498 6%	1,764 7%	1,330 6%	1,364 6%	1,594 7%
Other/Unknown	2,093 8%	2,093 9%	2,505 9%	1,862 8%	1,812 8%	2,171 9%
Total Served	25,327 100%	24,509 100%	27,086 100%	22,759 100%	21,971 100%	24,213 100%
Hispanic	2,360 9%	2,357 10%	2,820 10%	2,135 9%	2,088 10%	2,524 10%
Medicaid Served	22,067 87%	21,296 87%	22,481 83%	19,670 86%	19,407 88%	20,303 84%
Non-Medicaid Served	3,260 13%	3,213 13%	4,605 17%	3,089 14%	2,564 12%	3,910 16%
Total Served	25,327 100%	24,509 100%	27,086 100%	22,759 100%	21,971 100%	24,213 100%

¹Unduplicated people year to date = # of people who have received one or more mental health services during the year through the end of the report period

²Average people per month = the sum of unduplicated people from each month in the report period divided by the number of months

**King County Regional Support Network
2009 Mental Health Plan First Quarter Report Card
Outpatient Benefits**

	Unduplicated people year to date ¹						Average people per month ²						Avg mo. hrs/person ³		
	2007 Q1		2008 Q1		2009 Q1		2007 Q1		2008 Q1		2009 Q1		2007 Q1	2008 Q1	2009 Q1
CHILDREN															
2 - Stability ⁴	1,183	19%	883	14%	754	11%	1,060	18%	805	14%	678	11%	1.5	1.5	1.6
3a - Rehabilitation	4,658	73%	4,669	76%	5,310	80%	4,202	73%	4,221	76%	4,783	80%	2.1	2.1	2.1
3b - Exceptional Care	549	9%	569	9%	563	8%	511	9%	532	10%	523	9%	4.9	5.2	5.7
Total	6,390	100%	6,121	100%	6,627	100%	5,773	100%	5,557	100%	5,983	100%	2.2	2.3	2.4
ADULTS															
2 - Stability	1,350	11%	1,129	10%	1,106	8%	1,306	11%	1,091	10%	1,046	9%	1.6	1.5	1.7
3a - Rehabilitation	10,680	86%	10,195	87%	11,550	89%	10,024	86%	9,557	87%	10,796	88%	3.0	3.4	3.4
3b - Exceptional Care	372	3%	364	3%	380	3%	347	3%	340	3%	359	3%	12.6	11.9	11.4
Total	12,402	100%	11,688	100%	13,036	100%	11,677	100%	10,988	100%	12,200	100%	3.1	3.5	3.5
OLDER ADULTS															
2 - Stability	502	15%	475	15%	507	14%	474	16%	449	15%	463	14%	0.4	0.9	0.7
3a - Rehabilitation	2,728	84%	2,714	84%	2,998	85%	2,552	84%	2,553	84%	2,824	85%	1.1	2.3	2.5
3b - Exceptional Care	26	1%	33	1%	32	1%	26	1%	31	1%	31	1%	5.2	9.2	10.7
Total	3,256	100%	3,222	100%	3,537	100%	3,052	100%	3,033	100%	3,318	100%	1.0	2.2	2.3
ALL CLIENTS															
2 - Stability	3,035	14%	2,487	12%	2,367	10%	2,840	14%	2,345	12%	2,186	10%	1.2	1.4	1.4
3a - Rehabilitation	18,066	82%	17,578	84%	19,858	86%	16,778	82%	16,331	83%	18,403	86%	2.3	2.9	2.9
3b - Exceptional Care	947	4%	966	5%	975	4%	883	4%	903	5%	912	4%	7.9	7.9	8.1
Total	22,048	100%	21,031	100%	23,200	100%	20,502	100%	19,578	100%	21,501	100%	2.4	2.9	3.0
Medicaid	21,448	97%	20,469	97%	21,681	93%	18,759	92%	18,419	94%	19,312	90%			
Non-Medicaid	600	3%	562	3%	1,519	7%	1,742	8%	1,159	6%	2,189	10%			
Total outpatient	22,048	100%	21,031	100%	23,200	100%	20,502	100%	19,578	100%	21,501	100%			

Outpatients of all ages increased (8 12%) since 2008, largely attributable to tripling in the number of non-Medicaid outpatients.

Service hours are comparable between Q1 2009 and Q1 2008, but have risen somewhat since 2007 for all age groups.

Non-Medicaid outpatients are now 6.5% of all outpatients, and their proportion has doubled since Q1 2007, due to MIDD funds targeted for non-Medicaid.

¹ Unduplicated people year to date = people with an open benefit during the report period - each is counted only once even if there were two benefits.

² Average people per month = the sum of unduplicated people from each month in the report divided by the number of months

³ Avg mo. hrs/person = the sum of service hours divided by the sum of person days of open benefits times the monthly average number of days for the months included in the report period.

⁴ Outpatients were served within 3 levels of care:

Stability - services to establish, improve or stabilize level of functioning for individuals who require at least occasional supervision

Rehabilitation - active interventions to stabilize or improve level of functioning or prevent deterioration

Exceptional care - consistent intensive services for individuals with the most severe impairment - to stabilize in the community and improve functioning

King County Regional Support Network 2009 Mental Health Plan First Quarter Report Card Outpatient Benefits (continued)

A substantial proportion of outpatients have complex problems including homelessness and co-occurring substance use or disabilities. The rates of clients with these problems have remained steady over the last 3 years. Sound Mental Health continues to serve the largest number of outpatients.

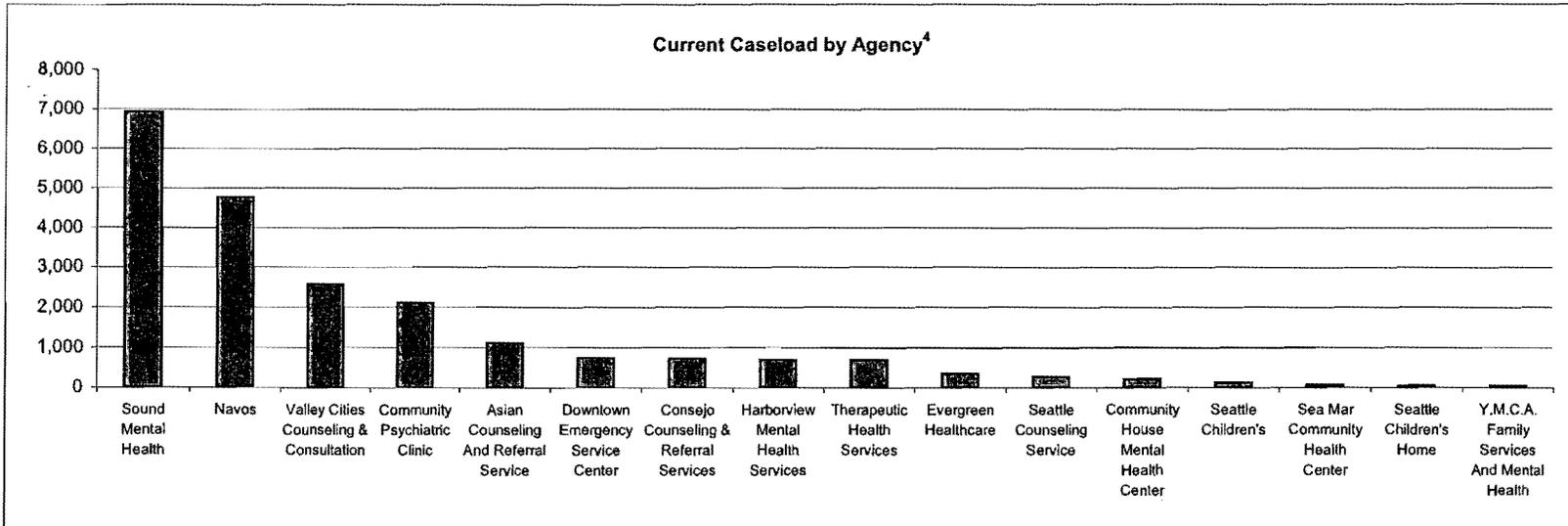
Outpatient Client Characteristics*	Unduplicated people year to date ¹						Average people per month ²					
	2007 Q1 (n=22,048)		2008 Q1 (n=21,031)		2009 Q1 (n=23,200)		2007 Q1 (n=20,502)		2008 Q1 (n=19,578)		2009 Q1 (n=21,501)	
Co-occurring substance abuse or dependence ³	4,368	20%	4,214	20%	4,771	21%	4,029	20%	3,850	20%	4,370	20%
Deaf/Hard of Hearing	449	2%	417	2%	448	2%	420	2%	396	2%	411	2%
Disabilities (e.g. physical, developmental, neurological)	5,933	27%	5,905	28%	6,300	27%	5,576	27%	5,573	28%	5,944	28%
Homebound Medically Compromised	1,142	5%	980	5%	1,017	4%	1,064	5%	926	5%	956	4%
Homeless	1,233	6%	1,177	6%	1,403	6%	1,143	6%	1,066	5%	1,279	6%
Interpreter needed	2,510	11%	2,469	12%	2,688	12%	2,378	12%	2,326	12%	2,544	12%
Sexual Minority (self-reported)	1,135	5%	1,016	5%	1,184	5%	1,054	5%	944	5%	1,101	5%

* NOTE: A person may be counted for more than one "Characteristic" above.

¹Unduplicated people year to date = people with an open benefit during the report period - each is counted only once even if there were two benefits.

²Average people per month = the sum of unduplicated people from each month in the report divided by the number of months

³"Substance abuse or dependence" indicates either that the client reported substance abuse or dependence or the client denied it, but the clinician has reason to believe it is an issue. Abuse or dependence that is reported as "In remission for at least one year" is not counted.



⁴Navos - formerly Highline-West Seattle Mental Health; Sound Mental Health - formerly Seattle Mental Health; Seattle Children's - formerly Children's Hospital and Regional Medical Center

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King County Regional Support Network 2009 Mental Health Plan First Quarter Report Card *Specialized Services*



Highlights and changes. Funds from the Mental Illness and Drug Dependency (MIDD) Action Plan one-tenth of one percent sales tax began to flow into the system in October, 2008 and the effect is particularly notable now in the increase in access to services for persons who do not have Medicaid.

Program focus - In January 2009, the Geriatric Regional Assessment Team (GRAT), provided by Evergreen Community Healthcare, expanded their services with MIDD funding. GRAT provides face to face assessments and service linkage for persons 60 years or older who are medically compromised or disabled. The expansion increases the number of people who can be served by the team and shortens response time for referrals coming from 1st responders.



Specialized Service ³	Unduplicated people year to date ¹						Average people per month ²					
	2007 Q1 (n=25,327)		2008 Q1 (n=24,509)		2009 Q1 (n=27,086)		2007 Q1 (n=22,759)		2008 Q1 (n=21,971)		2009 Q1 (n=24,213)	
Facility-based treatment												
Long-Term Rehabilitation	220	0.9%	220	0.9%	186	0.7%	210	0.9%	207	0.9%	165	0.7%
Supervised Living ⁴	284	1.1%	243	1.0%	169	0.6%	266	1.2%	234	1.1%	156	0.6%
Benson Heights Rehabilitation Center Enhancement ⁷	0	0.0%	0	0.0%	37	0.1%	0	0.0%	0	0.0%	36	0.2%
Intensive Community Support Programs												
Children/Youth (Interagency Staffing Team, Project Team)	197	0.8%	160	0.7%	133	0.5%	166	0.7%	143	0.7%	114	0.5%
Adult (ECS, ISH, SSH) ⁵	147	0.6%	148	0.6%	177	0.7%	139	0.6%	138	0.6%	164	0.7%
Older Adult Geriatric Assessment	39	0.2%	37	0.2%	76	0.3%	13	0.1%	13	0.1%	26	0.1%
Outreach/Engagement + Intensive Community Support + Housing												
(CIAP, CJI-COD, FACT, HOST CM, MIO-CTP, PACT) ⁶	636	2.5%	809	3.3%	942	3.5%	537	2.4%	694	3.2%	834	3.4%

¹ Unduplicated people year to date = people with an open benefit or program authorization during the report period - each person is counted only once even if there was more than one benefit/authorization.

² Average people per month = the sum of unduplicated people from each month in the report divided by the number of months

³ A few programs are not included because electronic data are not submitted (Housing First, housing vouchers), funding is not through MHCADSD (Multi-systemic Therapy, Functional Family therapy), or services are limited to outreach and/or referral (Mental Health Court, Homeless Outreach, Stabilization and Transition - Outreach).

⁴ Individuals in supervised living are also counted in the Outpatient Benefit analysis on page 3

⁵ Expanding Community Support (ECS), Intensive Supportive Housing (ISH), Standard Supportive Housing (SSH)

⁶ Community Integration Assistance Program (CIAP), Criminal Justice-Co-occurring Disorders (CJI-COD), Forensic Assertive Community Treatment (FACT),

Homeless Outreach, Stabilization and Transition - Case Management (HOST CM), Mentally Ill Offender-Community Transition Program (MIO-CTP), Program for Assertive Community Treatment (PACT)

⁷ Benson Heights Rehabilitation Center Enhancement program started during November 2008.

**King County Regional Support Network
2009 Mental Health Plan First Quarter Report Card
Crisis and Hospital Services**

	Events year to date			Monthly Average		
	2007 Q1	2008 Q1	2009 Q1	2007 Q1	2008 Q1	2009 Q1
Crisis and Commitment Services (CCS)						
Total Client Referrals	1,891	1,944	1,905	630	648	635
Face-to-face Evaluations	1,244	1,338	1,341	415	446	447
Involuntary Detention for 72 hours:						
Adult	476	487	482	159	162	161
Juvenile	20	28	19	7	9	6
Total	496	515	501	165	172	167
Revocations	71	84	69	24	28	23
Other Crisis Services (CCORS, Diversion, Respite, PES, Adult Crisis Stabilization)^{1,2}						
Children	134	239	311	71	124	161
Adults	1,552	1,657	1,896	591	636	725
Older Adults	53	39	86	19	14	32
Community Inpatient Care³						
Voluntary						
Children - admissions	47	64	34	16	21	11
Adult - admissions	323	366	331	108	122	110
Involuntary						
Children - admissions	21	20	18	7	7	6
Adult - admissions	483	475	508	161	158	169
Western State Hospital^{3,4}						
WSH Admissions						
Civil commitments	29	18	44	10	6	15
Forensic conversions	37	18	28	12	6	9
Total	66	36	72	22	12	24
Over (Under) Target (days in-residence census)	1,383	114	1,859	461	38	620

The total number of CCS referrals and face-to-face evaluation for the 1st quarter of 2009 show only slight variation compared with Q1 2007 and 2008. Involuntary detentions have also remained relatively steady.

Other crisis services have more than doubled for children since Q1 2007, in part due to expansion of the Children's Crisis Outreach Response System (CCORS). Crisis services for adults and older adults have also risen due in part to expansion of next-day-appointments and other crisis services funded under the MIDD.

Community voluntary hospitalizations have decreased for children by nearly half and by 10% for adults compared with Q1 2008. Community involuntary hospitalizations have also decreased for children and adults (7-10%).

In contrast, Western State admissions are double the admissions in Q1 2008. The increase may be due to the lack of a WSH waiting list in early 2009, meaning that adults on 90 day orders in local hospitals transferred more quickly.

¹ Crisis services are underrepresented because crisis services cannot be separately reported for individuals with outpatient benefits

² Children's Crisis Outreach Response System (CCORS), Psychiatric Emergency Service at Harborview (PES)

³ Community inpatient stays are typically 3-14 days while state hospital stays are considerably longer

⁴ The state-funded Children's Long-term Inpatient Program (CLIP) admits 30-40 King County children/yr not represented in the figures above

King County Regional Support Network 2009 Mental Health Plan First Quarter Report Card Client Outcomes - Global Indicators

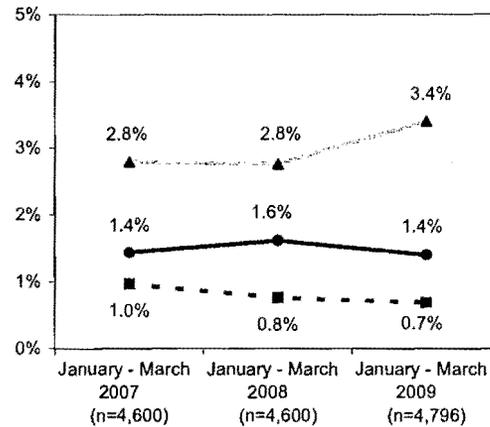
Q1: Are we able to reduce the number of homeless clients?

Through the first quarter of 2009, 4,796 clients completed a 12-month outpatient benefit. (4,305 did not complete a benefit.)

1.4% of clients completing a benefit found housing, compared to 1.6% in 2008 and 1.4% in 2007 (see graph).

Of the 230 who were homeless at the start of their benefit, 29.1% found housing by the end of the benefit, compared to 36.8% in 2008 and 33.9% in 2007.

In 2009, 2.0 homeless clients found housing for each client who lost housing, compared to 2.1 in 2008 and 1.5 in 2007.



Found Home
 Became Homeless
 Stayed Homeless

	January - June		
	2007	2008	2009
Found Home	77	74	67
Stayed Homeless	150	127	163
Became Homeless	52	35	33
Never Homeless	5,088	4,364	4,533
Total	5,367	4,600	4,796

Homeless at Start	227	201	230
Homeless at End	202	162	196

Did not complete benefit	2,726	3,522	4,305
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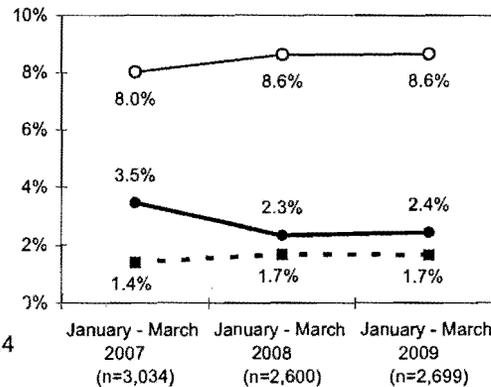
Q2: Are we able to help adults maintain or acquire employment?

Through the first quarter of 2009, 2,699 adults under 61 completed a 12-month outpatient benefit. (2,446 did not complete a benefit.)

2.4% of those completing benefits gained employment, compared to 2.3% in 2008 and 3.5% in 2007 (see graph).

Of the 2,421 who were unemployed at the start of their benefit, 2.7% found employment by the end of the benefit, compared to 2.6% in 2008 and 3.8% in 2007.

In 2009, 1.5 unemployed clients found employment for each client who lost employment, compared to 1.4 in 2008 and 2.4 in 2007.



Gained Employment
 Lost Employment
 Stayed Employed

	January - June		
	2007	2008	2009
Gained Employment	105	61	66
Stayed Unemployed	2,643	2,271	2,355
Lost Employment	43	44	45
Stayed Employed	243	224	233
Total	3,034	2,600	2,699

Unemployed at Start	2,748	2,332	2,421
Unemployed at End	2,686	2,315	2,400

Did not complete benefit	1,159	1,935	2,446
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**King County Regional Support Network
2009 Mental Health Plan First Quarter Report Card
Client Outcomes - Global Indicators**

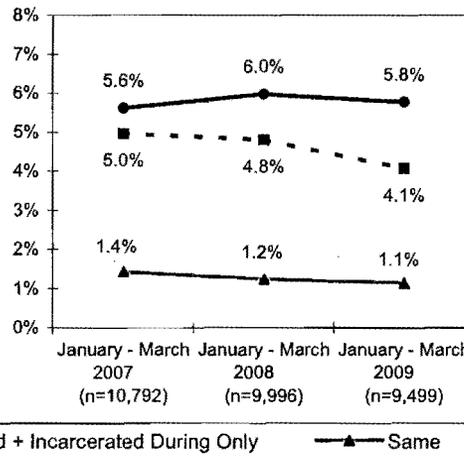
Q3A: Are we decreasing the number of times adults and older adults are incarcerated?

Through the first quarter of 2009, 9,499 adults over 19 completed a 12-month outpatient benefit. (3,140 did not complete a benefit.)

5.8% of those completing benefits decreased incarcerations, compared to 6.0% in 2008 and 5.6% in 2007 (see graph).

Of the 760 clients incarcerated before the benefit, 72.0% had fewer incarcerations during the benefit year than in the year before the benefit started, compared to 70.2% in 2008 and 67.6% in 2007.

In 2009, 1.4 clients reduced incarcerations for each client who increased incarcerations or was incarcerated only during the benefit, compared to 1.2 in 2008 and 1.1 in 2007.



	January - June		
	2007	2008	2009
Never Incarcerated	9,496	8,796	8,458
Decreased	606	597	547
Same	154	123	108
Increased	136	131	105
Incarcerated only during benefit	400	349	281
Total	10,792	9,996	9,499

Did not complete benefit	1,752	2,520	3,140
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Q3B: Are we decreasing the number of times juvenile clients are incarcerated?

Because data for juvenile detentions from 2005 through 2006 are not complete, this measure will not be reported until 2009 when three years of continuous data are available.

**King County Regional Support Network
2009 Mental Health Plan First Quarter Report Card
Financial Data**

Revenues			
	<u>2007 Actual</u>	<u>2008 Actual</u>	<u>2009 Projected</u>
Medicaid	77,154,629	82,830,687	104,724,946
Non-Medicaid	36,014,508	42,072,510	42,461,629
King County	7,563,046	8,117,111	10,046,487
Other Local (e.g., City of Seattle)	1,796,320	4,590,693	4,442,238
Federal Block Grant	2,112,352	2,047,018	2,094,590
Other Federal	242,276	272,276	242,276
TOTAL REVENUES	124,883,130	139,930,295	164,012,166
Expenditures			
	<u>2007 Actual</u>	<u>2008 Actual</u>	<u>2009 Projected</u>
Outpatient Benefits			
Children	19,064,935	20,750,992	20,457,717
Adult/Older Adult	40,134,726	42,570,111	43,223,192
Total	59,199,660	63,321,103	63,680,909
Inpatient Services	16,772,901	15,848,780	26,005,664
Crisis & Commitment Services	7,013,568	7,621,015	9,263,596
Residential & Additional Outpatient Services	33,460,127	45,303,060	60,660,047
Administration	3,160,740	3,173,918	3,608,831
TOTAL EXPENDITURES	119,606,996	135,267,875	163,219,047
Contract-required reserves	21,950,828	26,063,900	27,568,616
ENDING FUND BALANCE	1,196,070	2,943,206	1,632,190

Expenditures are higher this quarter, primarily due to the use of MIDD funds as local match for Federal Additional Medicaid. Budget cuts are anticipated for Medicaid and Non-Medicaid due to the State legislative session and the State budget shortfall. County funding for some criminal justice programs is likely to be cut beginning January 1, 2010.