

# **EL DORADO COUNTY GRAND JURY 2013-2014**

## **PLACERVILLE PSYCHIATRIC UNIT HEALTH FACILITY**

Case Number GJ-13-08

### **Reason for the Report**

There have been frequent news stories during the past several years that have caused concern regarding the lack of treatment and housing for mentally ill people in the United States. Members of this Grand Jury wanted to identify the types of programs and facilities available in this county for individuals manifesting signs of mental illness.

### **Background**

Grand Jury members visited the Placerville Psychiatric Unit Health Facility (PUHF) on November 4, 2013. This is an in-patient facility. The facility is funded (50/50) from state and federal subsidies, but operated by the county. The building was constructed in 1949 as a county hospital. In spite of the fact that it is now 64 years old the building seems to be in reasonably good shape. All areas have recently been painted. New, more functional furniture, including beds, have been installed. The heating and air-conditioning system is old but appeared to be adequate at the time of our visit.

The bed capacity is 16 patients; 12 were in residence at the time of our visit. Patients are referred to the facility by the county sheriff's department or Marshall Hospital and evaluated by the facility's crisis team. PUHF is considered an acute, short term facility. A majority of patients (approximately 75%) are affected by substance abuse and almost 50% are considered homeless. Patients spend an average of 10-13 days at the facility before being discharged. At the time of discharge patients are referred to the Placerville out-patient facility, or if deemed necessary, to involuntary residential facilities. Otherwise, they are returned to health facilities in their original counties of residence.

The Medical Director is a full-time psychiatrist who sees patients every week in individual sessions that last up to 30 minutes. Staff includes a program director, program coordinator, 8 full-time and 3 part-time nurses, 2 therapy clinicians, a cook assisted by nine para-professional mental health assistants who work on a rotating part-time basis, and 2 office administrators. Twenty-four hour staff coverage is needed.

Programs include group therapy, creative arts, coping skills, Alcoholics Anonymous and Narcotics Anonymous.

### **Findings**

1. The facility appears to be well managed. The engaging program manager is well informed regarding all aspects of this facility.

**Response:** No response is permitted since all personnel statements, both positive and negative, are confidential.

2. Per staff comments, nurse and especially psychiatrist retention has been a problem due to compensation differentials across the region.

**Response:** The respondent agrees with this finding.

3. An additional psychiatrist has recently been added for a full day on Fridays, as well as another doctor 2-4 hours during the week.

**Response:** The respondent agrees with the finding.

4. When patients are released from PHF, there is a shortage of transitional housing destinations.

**Response:** The respondent agrees with this finding.

### **Recommendations**

1. The recently increased physician time with patients should be maintained.

**Response:** The recommendation has been implemented. HHSa has taken measures to secure additional psychiatrist hours by working with County Human Resources to increase Psychiatrist compensation, as well as increased outreach to Psychiatrist candidates through contract services as well as additional recruitment efforts which include outreaching to medical schools and professional publications. However, there is a shortage of psychiatry services throughout the state resulting in ongoing staffing challenges that will need to be addressed on an ongoing basis.

2. Investigate staff turnover rates; review adjacent area compensation levels and other retention tools as needed.

**Response:** This recommendation has been partially implemented. HHSa implemented a process where all employees are asked to complete an exit questionnaire when they separate from County service. All exit questionnaires are reviewed to identify the reason for the separation and areas where the Agency can improve. In regards to compensation levels, County Human Resources stated they will be undertaking a comprehensive classification and compensation study which will address classification and compensation in equities for all County classifications. It is anticipated this study will begin in FY 2014-15.

3. County Health and Human Services should focus on providing local placement, in the form of board and care residences, for patients in need of further supervision after being discharged from PHF.

**Response:** This recommendation has been partially implemented. The need for board and care residences and other types of transitional living facilities are a priority and is included in HHSA's strategic plan. HHSA recently contracted with Summitview to provide a six bed Adult Residential Facility. This facility/program is currently in development and we anticipate will be accepting clients at the end of the calendar year.

In addition, in June 2014 HHSA received Board approval of a template lease that will allow HHSA to contract directly with landlords to secure transitional housing where HHSA mental health clients can reside during their treatment and recovery.

That being said, the lack of transitional housing and treatment facilities in El Dorado County continues to be a challenge, and work to improve these services is ongoing.