

SCDMH, INPATIENT SERVICES

SC HOUSE OVERSIGHT COMMITTEE RESPONSES

March 5, 2019 Questions from Committee Chair and Representatives

Question 1 - (Sexually Violent Predators Treatment Program – SVPTP)

Q: What is the rate of growth of the program?

A: The program was opened in 1999.

From 1999 to 2018 the program admitted 343 residents.

From 1999 to 2018 the program discharged 138 residents of which 17 were deaths.

Based on a 19-year average, the program has averaged 18 admissions per year.

Based on a 19-year average, the program has averaged 10 discharges per year.

Based on a 19 year average, the program has averaged a net gain of 11 additional residents per year.

Based on a 19 year period from 1999 to 2018, the program growth rate is 6% each year.

(See Attachment)

Question 2 – (Sexually Violent Predators Treatment Program – SVPTP)

Q: What is the average length of stay?

A: Average Length of stay for FY19 was 8.6 years

Question 3 – (Alcohol & Substance Abuse Specialty Hospital – Morris Village)

Q: What is the average cost per day and average 24-day stay to treat the general and opioid populations at Morris Village?

A: Average Cost, Per Day, for general population at MV: \$382

Average Cost, Per Day, for Opioid population at MV: \$401

Average Cost, Per Stay, (average 24 days) for general population at MV: \$9,168

Average Cost, Per Stay, (average 24 days) for Opioid population at MV: \$9,624

Average Cost, Per Stay, (full 28 days) for general population at MV: \$10,696

Average Cost, Per Stay, (full 28 days) for Opioid population at MV: \$11,228

Question 4 – (Long Term Care – Veterans Nursing Homes)

Q: What are the state's dollars associated with the building of three new veterans' nursing homes?

A: For the construction of the Veterans Nursing Home in Florence, the final construction budget is \$57,134,013, of which the State will be receiving a grant of \$28,539,163.90, meaning that up to \$28,594,849.10 of State funds may be needed to complete construction. However, note that the construction budget includes a 5% contingency (\$2,454,850), meaning that it is likely the State funds used will be less.

For the construction of the Veterans Nursing Home in Gaffney, the final construction budget is \$60,122,267, of which the State will be receiving a grant of \$29,412,178.90, meaning that up to \$30,710,088.10 of State funds may be needed to complete construction. However, note that the construction budget includes a 5% contingency (\$2,597,500), meaning that it is likely the State funds used will be less.

Question 5 – (System-wide)

Q: How do you measure and evaluate Success in Inpatient Services?

Below are current measurements as required within the hospital industry i.e. regulatory, licensing and certification which apply to all programs. Also listed are the monitoring activities for the large contracts used to measure and evaluate compliance.

A: System-wide – Measures of Success

- Each inpatient facility and long term care facility has maintained the applicable accreditation, certification, and licensure without interruption
- Certification and Survey Provider Enhanced Reports (CASPER) indicate that the long term care facilities consistently rate below state and national averages for New or Worsening Pressure Ulcers and Urinary Tract Infections
- CMS Five Star ratings for long term care facilities
- The psychiatric hospitals consistently rate below the national average for seclusion and restraint utilization

Contracted Nursing Homes

Contract monitor plans and completes audits that address the following:

- Overall admission process and bed occupancy rate
- Standards of care provided
- General maintenance and overall appearance of the facility
- Conducts random cashier/petty cash audits on a quarterly basis
- Provides weekly reports to the Director of Veterans Services
- Participates in person or via tele-conference in DIS committee meetings or other meetings as necessary for the DIS oversight.
- Responsible for providing on-going oversight for SCDMH while in a survey process not as a participant in the survey process but as a resource regarding any questions regarding SCDMH policy and procedures.
- Assists the QA/PI department with any case reviews or QCRBs during the review process to ensure recommendations are implemented by the facility and the facilities response has been approved.
- Serves as advocate for the residents and families, providing reports to the SCDMH Director of Client Advocacy.

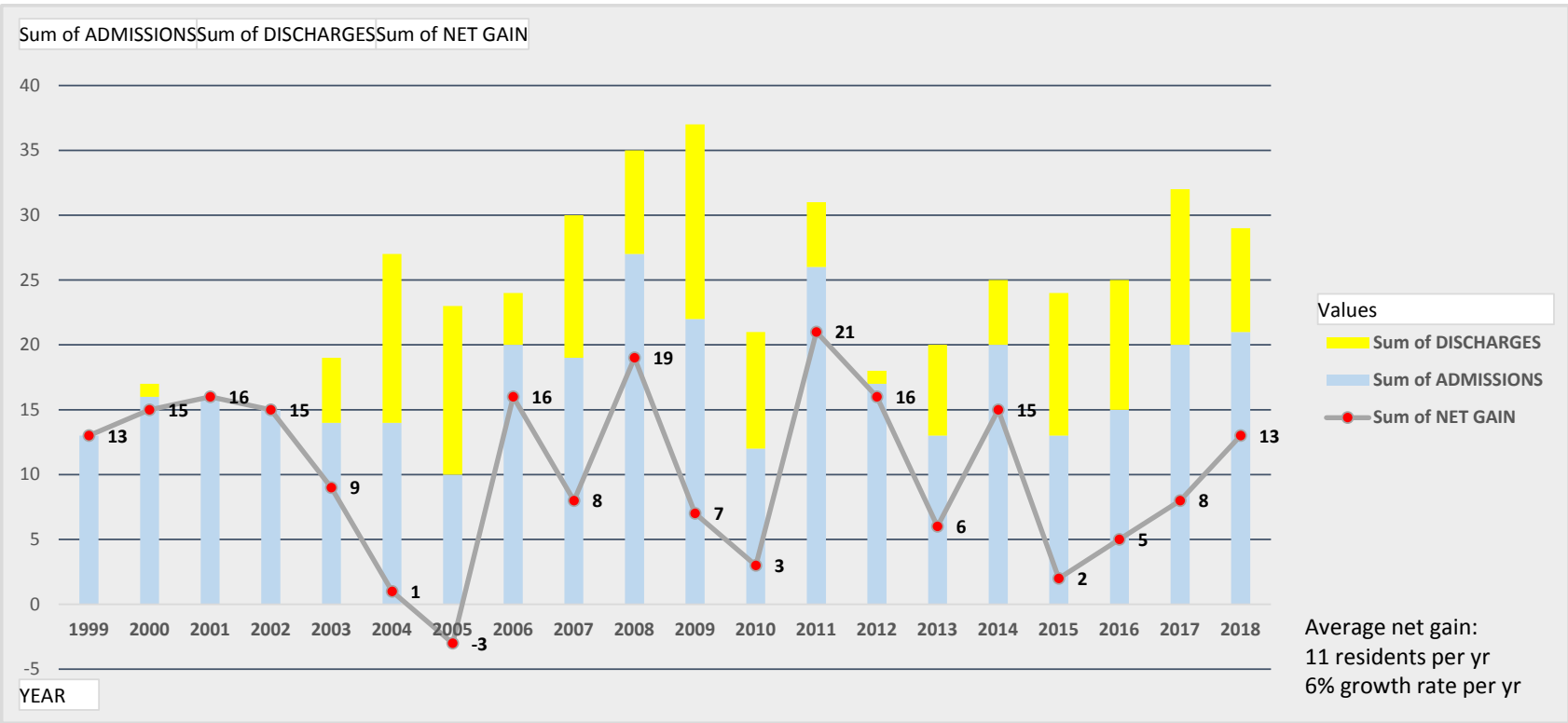
Contracted Forensic Services (Sexually Violent Predators Treatment Program & Bryan Psychiatric Hospital, Forensic Adult Services)

The DIS Forensic Contract Monitoring Department completes the following monitoring activities:

- Review of Records and Reports
- Direct Observations/Visits to Facility
- Resident/Staff Interviews
- Statistical Comparisons/Trend Analysis
- Contractor's Quality Improvement Processes
- Performance/Partnership Meetings
- Specialized Auditing (Monitoring Tools)
- Investigating Serious Incidents

[End]

SCDMH - INPATIENT SERVICES - SEXUALLY VIOLENT PREDATORS TREATMENT PROGRAM - RESIDENT POPULATION NET GAIN Report



Row Labels	Sum of ADMISSIONS	Sum of DISCHARGES	Sum of NET GAIN
1999	13	0	13
2000	16	1	15
2001	16	0	16
2002	15	0	15
2003	14	5	9
2004	14	13	1
2005	10	13	-3
2006	20	4	16
2007	19	11	8
2008	27	8	19
2009	22	15	7
2010	12	9	3
2011	26	5	21
2012	17	1	16
2013	13	7	6
2014	20	5	15
2015	13	11	2
2016	15	10	5
2017	20	12	8
2018	21	8	13
Grand Total	343	138	205

2004 - 2005

A review of cases indicated the probability that some residents did not meet level of "dangerous" as cited in the SVP Act and probably shouldn't have been admitted and were discharged.

Previously, a contract psychologist reviewed all cases for discharge.

In 2007, a SCDMH psychiatrist was assigned to review all cases resulting in discharges. (During this period the program started double-bunking).

At the point the program started managing this process internally, the time from when an evaluator found the resident was "safe to be at large" to the time a discharged court hearing was scheduled decreased.

Since 1999, the number of inmates screened by the MDT and referred to Prosecutor's Committee for review was 1,476. Of that number 343 were civilly committed to the program or around 2%.

It is estimated 500-600 inmates are reviewed by the MDT in a year.