

**Mayview Regional Service Area Plan
Summary Report – December 2010**

The following summary provides an update on those individuals discharged from Mayview State Hospital as part of the MRSAP closure initiative. The following areas are included:

- MRSAP housing as of October, 31, 2010
- Summary of MRSAP service utilization from January 1, 2010 through September 30, 2010
- Summary of MRSAP psychiatric hospitalizations through September 30, 2010
- Summary of MRSAP critical incidents and early warning indicators from January 1, 2010 through October 31, 2010
- Summary of MRSAP arrests and incarcerations from April 2007 through October 2010
- Summary of MRSAP deaths through October 2010
- Summary of the individuals transferred from Mayview to Torrance State Hospital
- Regional inpatient utilization trends

MRSAP Housing as of October, 31, 2010:

MRSAP Housing as of October 31, 2010			
Housing Type	Level	# of People	%
Living in Own Housing*	Ind / Dep	60	21.5%
Personal Care Homes **	Supervised	59	21.1%
Long-Term Structured Residence (LTSR)	Restrictive	43	15.4%
Community Residential Rehabilitation (CRR)	Supervised	27	9.7%
Specialized Supportive Housing	Supervised	24	8.6%
Living with Family	Independent	15	5.4%
Nursing Home	Restrictive	18	6.5%
MR Housing	Supervised	12	4.3%
Torrance State Hospital (transferred from Mayview)	Restrictive	10	3.6%
Community Inpatient / EAC	Restrictive	5	1.8%
Jail	Restrictive	5	1.8%
Domiciliary Care	Supervised	1	0.4%

TOTAL 279***

* Includes individuals living independently, living in Supportive Housing, and those living in Permanent Supportive Housing.

** Personal Care Homes also include Comprehensive Mental Health Personal Care Homes (CMHPCH) and Enhanced Personal Care Homes (EPCH).

*** The total does not include individuals who have moved out of the region or state, or have died. No one is homeless.

Summary of MRSAP service utilization from January 1, 2010 through September 30, 2010:

Number of People Who Received Behavioral Health Services from January 1, 2010 through September 30, 2010	
Service Category	# of People
Case Mngt / Serv Coord / CTT / Admin CM*	241
Quality Management Clinical Consultation (QMCC) (SOS)	235
Community Support Team (CST) (SOS)	102
Outpatient MH	66
Other Behavioral Health Services**	45
Inpatient MH	44
Crisis ***	34
Social Rehab	28
Housing Support	27
Emergency Services	19
Family Support Services	9
Respite	6
IP-Extended	6
RTF-Adult	5

*Includes 202 people who received CTT. CTT includes many behavioral health services such as psychiatric services and supports, crisis services, drug and alcohol services, and vocational rehabilitation as components of the team services and not reported separately.

** Includes Partial, Mobile MH, Adult Outpatient, Psychiatric Rehabilitation, Lab, Consults, Community Vocational Rehab, Facility Based Vocational Rehab, Inpatient DA Detoxification, MH Justice-Related Services. Totals for each of these services were small so they were combined into one category.

*** Crisis services include walk-in crisis, mobile crisis, and telephone crisis services.

- In addition, over 70% of the individuals who were discharged from Mayview reside in residential programs that provide behavioral health supports or services - especially group

and social rehabilitation services. These services are not represented in above table of behavioral health services.

Summary of MRSAP psychiatric hospitalizations through September 30, 2010, including Extended Acute Care:

- Community psychiatric hospitalizations occurred for 30% of the individuals, with 298 separate inpatient episodes.
- When excluding the two outliers, the average length of stay for inpatient hospitalizations is 29.5 days, with a median length of stay of 18.9 days.

Summary of MRSAP Early Warning Indicators and Critical Incidents from January 1, 2010 through October 31, 2010:

- The most common Early Warning Indicators include the following:

Warning Indicator Type	Total # of Events	Total # of People	Average Events per Month
Refusal to Take Medications Posing Risk	189	50	18.9
E/R Visit - Behavioral/Physical Health	125	68	12.5
Atypical Behavior - Change From Baseline	110	55	11.0

- The most common Critical Incidents include the following:

Critical Incident Type	Total # of Events	Total # of People	Average Events per Month
Medical Hospitalization	64	45	6.4
Community Hosp - Involuntary	55	39	5.5
Community Hosp - Voluntary	43	28	4.3
Missing Person	16	11	1.6
Other Incident - Serious Nature*	10	9	1.0

* This includes a variety of situations such as disagreements at residential settings, missed medications, and injuries not requiring medical attention.

Summary of MRSAP arrests and incarcerations from April 2007 through October 2010:

- Twenty-nine individuals (9.5%) had a total of 50 separate charge/arrest events from April 2007 through October 2010, resulting in 26 instances of incarceration of at least one day.

Twenty of these individuals had one charge/arrest event; nine individuals had multiple charge/arrest events.

Summary of MRSAP deaths through October 2010:

- Twenty-two people (7.2%) have died since the beginning of the MRSAP initiative in 2005, including 16 from natural causes or medical issues, four accidental deaths, and two suicides.

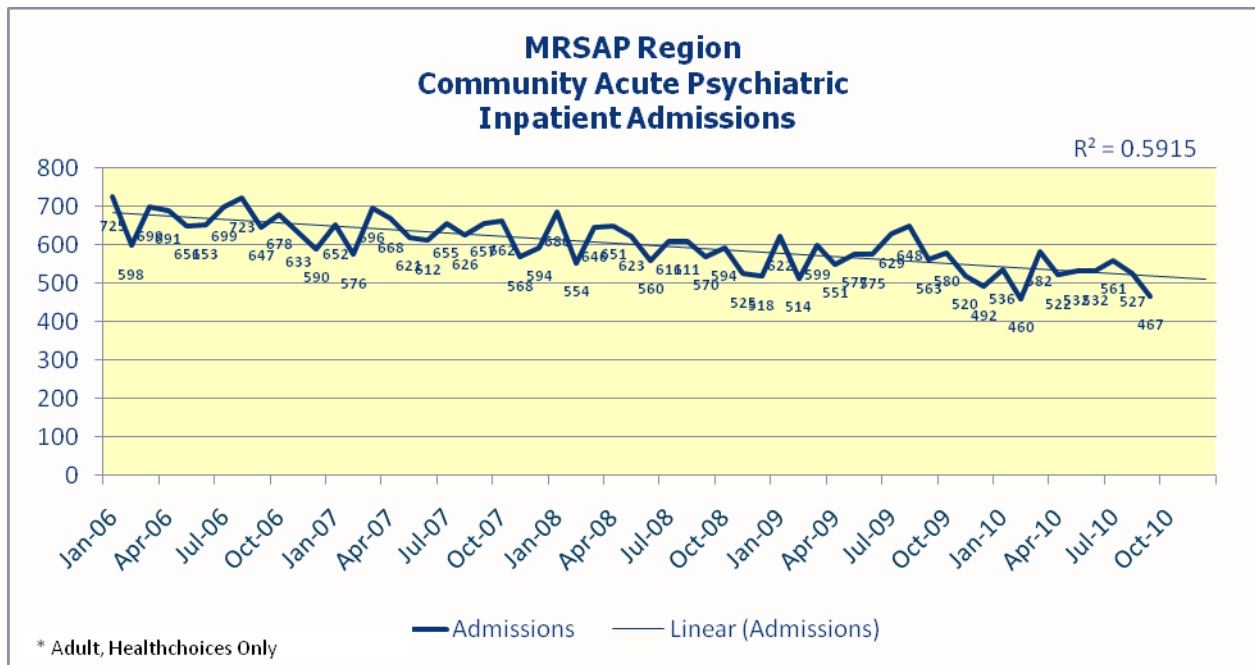
Summary of the individuals transferred from Mayview to Torrance State Hospital:

- As of October 2010, 10 of the 21 individuals transferred from Mayview remain at Torrance State Hospital. Several of these individuals are involved in the CSP discharge planning process.

Regional Inpatient Utilization Trends

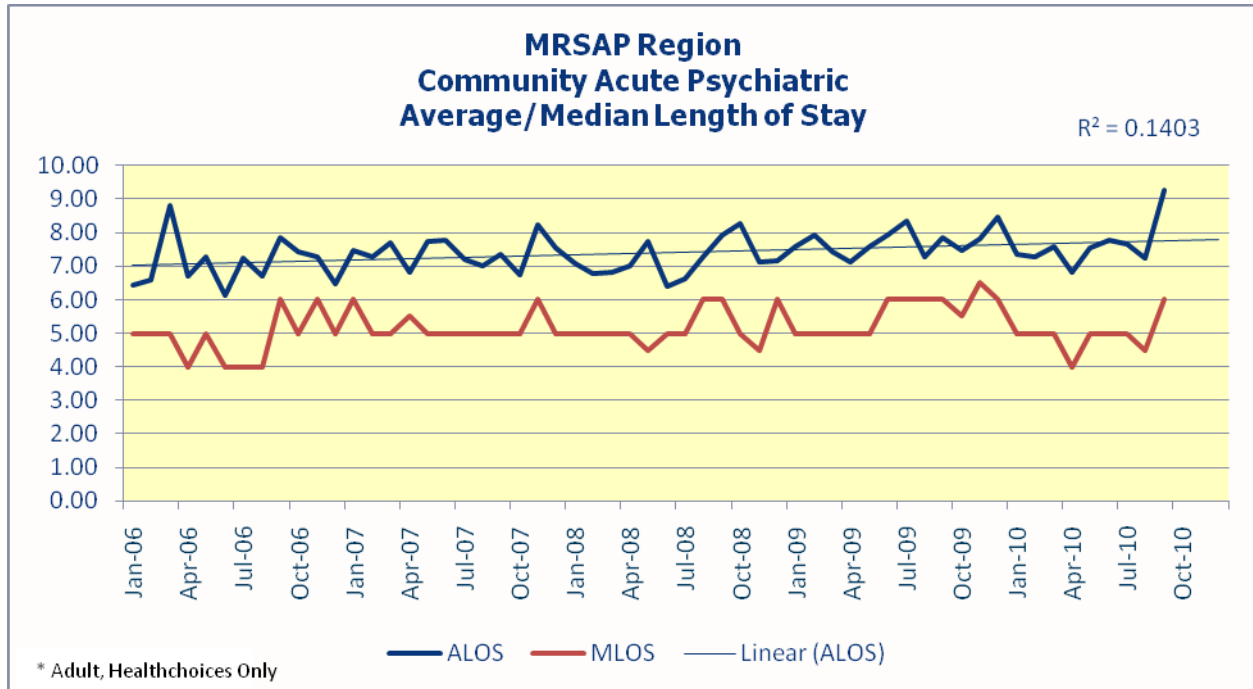
Regional Inpatient Admission Trends – January 2006 through September 2010:

(NOTE: Effective 08/16/2010, Lawrence County decided to no longer submit HealthChoices data to the project. Therefore, a trend algorithm was used to calculate Lawrence County values for the last two months of the reporting period.)



- From January 2006 through September 2010 in the HealthChoices program, adult community inpatient psychiatric admissions have shown a steady decline from 725 to 467 per month.

Regional Inpatient Average and Median Length of Stay Trends – January 2006 through September 2010:



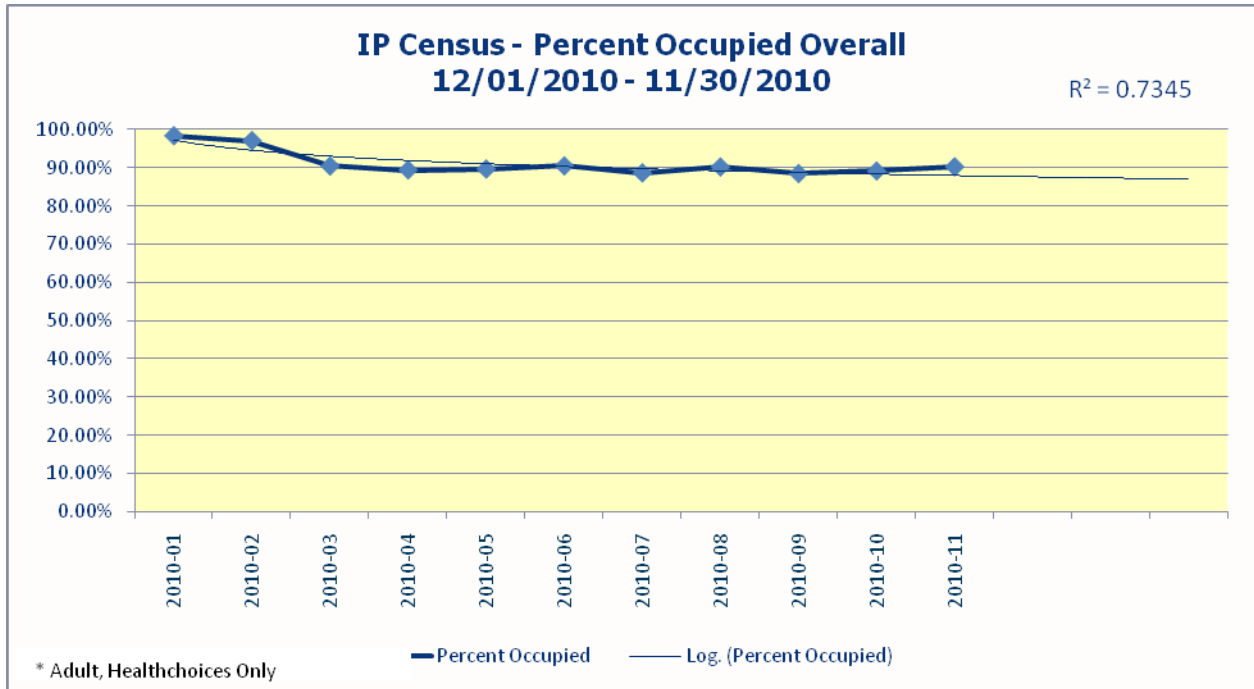
- From January 2006 through September 2010 in the HealthChoices program, monthly adult community inpatient psychiatric average length of stay has increased from 6.44 days to 9.26 days. However, the median length of stay has only risen from five days to six days. This indicates that a small number of cases have very long stays.

Extended Acute Care and Residential Treatment Facility (Adults) Trends

Program	Number of Discharges	ALOS	MLOS
EAC (06/16/2008 – 12/09/2010)	216	150.25	112.00
RTF-A (09/04/2008 – 12/09/2010)	272	56.21	48.50

- Comparatively, the average length of stay while at Mayview was 585 days in 2003 and 460 days in 2004.

Regional Inpatient Census Project Trends – January 2010 through November 2010:



- To date, approximately 60% of the regional beds are reporting. This number should increase to nearly 70% by the beginning of January.