

# Dauphin County MH/ID FY 12-13 Annual Report Highlights

Presentation to the MH/ID Advisory Board  
January 30, 2014

# Executive Summary

- \* In FY 12/13, we faced the largest single year reduction in funding for services and supports in the community MH/ID system since the passage of the MH/ID Act of 1966.
- \* Our program funding was reduced by approximately \$2.1 million in MH and ID programs, impacting the quantity and types of services we could provide to our residents and their families.
- \* Participated in the Human Services Block Grant, which allowed us to leverage funds from the Block Grant to support MH/ID and HAP.

# Persons Served and Funding

PROGRAM AREA	PERSONS SERVED FY 09-10	PERSONS SERVED FY 10-11	PERSONS SERVED FY 11-12	PERSONS SERVED FY 12-13
Mental Health	4,736	4,769	4,495	4,634
Intellectual Disabilities	926	1,028	1,078	913
Early Intervention	526	573	707	705
Crisis Intervention	3,346	3,422	3,493	3,344
<b>Total</b>	<b>9,534</b>	<b>9,792</b>	<b>9,773</b>	<b>9,596</b>

PROGRAM AREA	EXPENDITURES FY 10-11	EXPENDITURES FY 11-12	EXPENDITURES FY 12-13	% CHANGE
MH	\$ 19,264,500	\$19,167,493	\$17,678,639	(-8%)
ID	\$ 3,807,968	\$3,826,813	\$3,364,950	(-12%)
EI	\$ 1,563,637	\$1,761,937	\$1,756,448	0%
County Match	\$ 799,440	\$882,699	\$884,144	0%
Grants/Other	\$ 991,982	\$1,207,855	\$1,157,441	(-4%)
<b>TOTAL</b>	<b>\$ 26,427,527</b>	<b>\$26,846,797</b>	<b>\$24,841,622</b>	<b>(-7%)</b>

# *Intellectual Disabilities Program Challenges*

- \* Limited waiver opportunities to serve new persons in need of ID services.
- \* Late notice of initiative funding to address the service needs of 2013 graduates at the time of graduation.
- \* Changes to rates set by the Office of Developmental Programs resulted in a reluctance of some providers to risk expand or startup of new services.
- \* The population of individuals living in residential settings is aging, requiring planning for long and short-term medical admissions, aging in place opportunities, and long and short-term admissions to a long-term care facility.

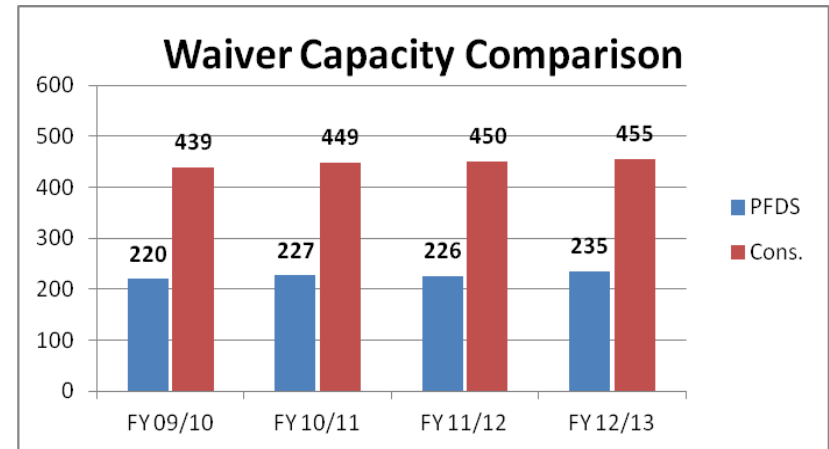
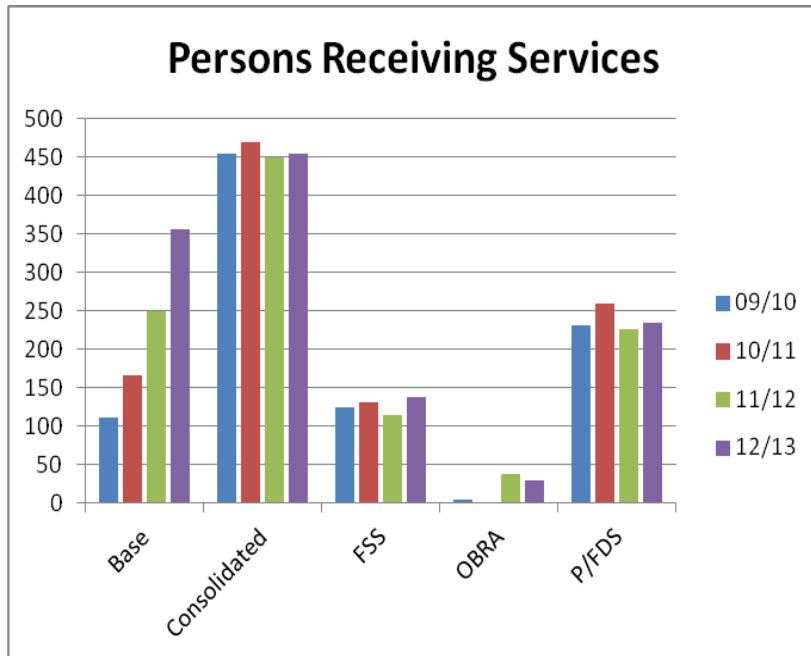
# *Intellectual Disabilities Program Successes*

- \* Services were offered to all 26 eligible students who graduated in June 2013 and to over 100 individuals from the Emergency PUNS .
- \* Added three new providers for residential, adult developmental training, respite, habilitation, companion, and nursing services.
- \* 60 individuals live in a Life Sharing home, created 4 new options.
- \* Two diversion beds to divert people from ERs or as a step down from a community psychiatric hospitals established with two local providers.
- \* Collaboration with cross-system partners addressing children returning to the community from a Residential Treatment Facility. The cross-systems group also enhances the communities' understanding of young children with autism and ID and the stressors impacting their family.
- \* Conjoint efforts among ID and MH partners to increase understanding of both systems and how to work together to meet the needs of people with a dual diagnosis of intellectual disability and mental health.

# Employment 1<sup>st</sup> Initiative

- \* Focus on developing working partnerships with local school districts. Transition-age students were targeted to receive information about preparing for adult life, work, and the ID system.
- \* Base dollars funded employment programs targeting working age students to 6 providers for job shadowing, customized employment, discovery services, resume building, community awareness and job support over the summer months.
- \* Staff conducted outreach to small businesses in the Dauphin County community to inform them of the benefits and opportunities to employ folks with ID. An increasing number of businesses are taking the lead in this endeavor.

# ID Program Data

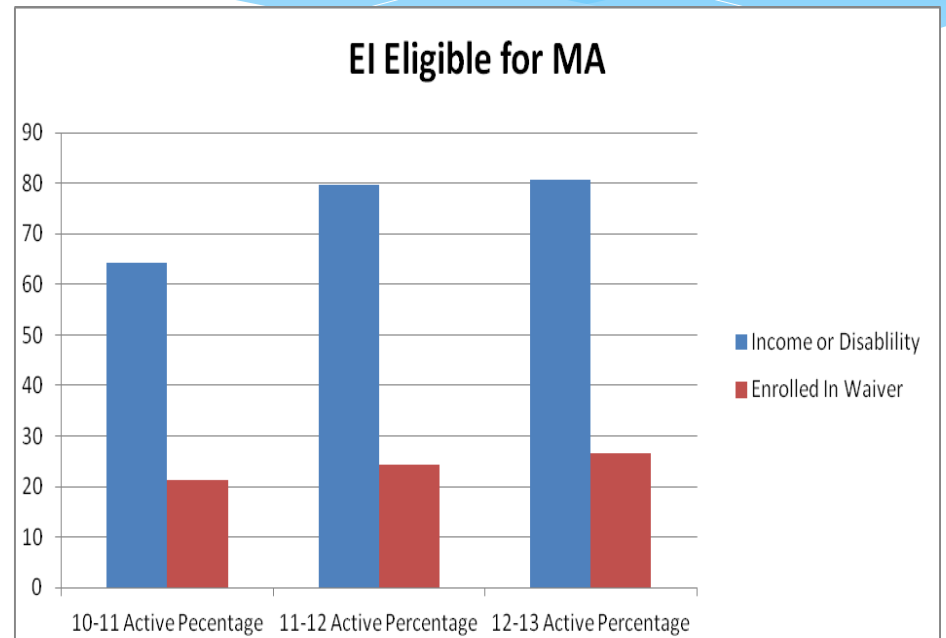
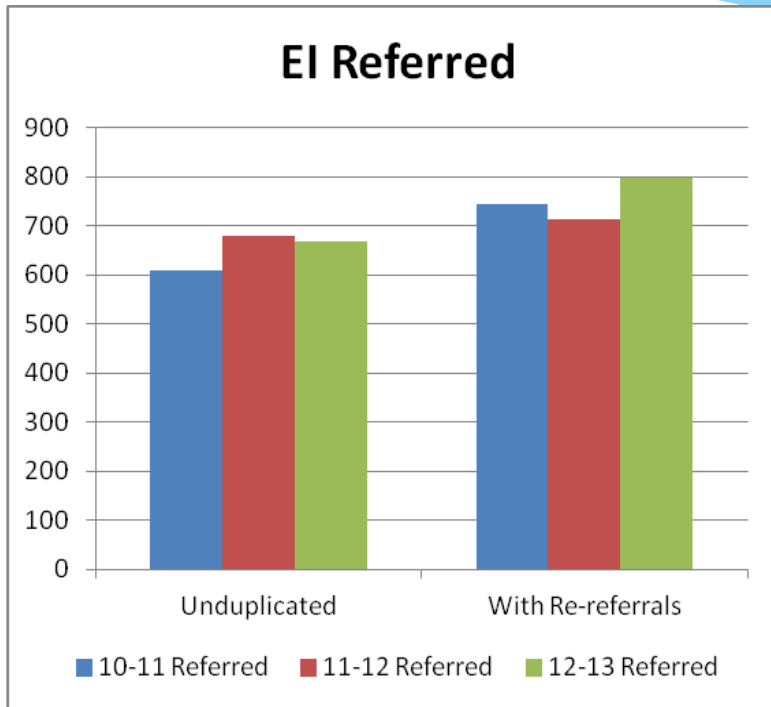


# Early Intervention Program Challenges and Successes

- \* Children in Dauphin County are at high risk for school failure. EI program offers information on early childhood education resources to the families of children at the highest risk for developmental delay, as well as to other primary referral sources who work with these families.
- \* Served children in all high risk areas of the County:
  - \* Northern Dauphin communities went from 44 children Active with Plan in FY11/12 to 49 children Active with Plan in FY 12-13.
  - \* Harrisburg City communities dropped from 348 active children in FY 11-12 to 333 active children in FY 12-13.
- \* OCDEL State Validation: areas cited for improvement during the EI program's Verification Review in 2011 were "validated" in November 2012 as fully corrected.
- \* EI continued a second year of the Positive Behavior and Intervention Support (PBIS) Grant with Keystone Children and Family Services (KCFS) as the administrative partner.



# Early Intervention Data



Eligible for MA based on income or disability- 80.71% of children served

Eligible for MA and also enrolled in Waiver funding-- 26.59% of active children

# Mental Health Program Challenges

- \* \$1.9 million dollars in budget cuts were implemented with a significant impact on residential services.

Residential Capacity by Level of Care							
	DSH	EAC	LTSR	Forensic/SA	CRR Max	CRR Mod	PCH
6/30/12	35	13	23	22	26	40	82
6/30/13	35	13	11	16	41	40	82

- \* Closed the Philhaven Clubhouse, reduced the # of Student Assistance evaluations at schools, reduced staffing and expenses at several residential programs.
- \* Incident reporting- total reported incidents decreased, but serious illness reports increased from 108 to 118 or 53.2 % of the reports to 60.5% of the reports in FY 12-13.
- \* Many MH services had decreased utilization in spite of not having direct funding cut.

# Mental Health Program Successes

- \* Adult residential: 50% of discharges were positive and recovery-oriented. Discharges due to a rule violation decreased from 3 in FY 11-12 to 2 persons in FY 12-13.
- \* Decreased length of stay in residential services.

Residential Service & Capacity 11/12 12/13	Persons Discharged	Mean Length of Stay	Minimum LOS	Maximum LOS
LTSR (23) (11)	8/16	5.2/ <b>4.6</b>	.7/.1	10.1 /13.6
CRR (66) (97)	69/67	1.6/ <b>1.0</b>	.01/.1	12.8 / <b>8.0</b>
PCH/SCR (74)	27/19	4.2/ <b>3.4</b>	.1/.3	20.3/16.0
<b>Total</b>	104/102	2.5/ <b>2.1</b>	.01/.01	20.3/ <b>16.0</b>

- \* Successful diversion from state hospital level of care, 67 people referred, 14 admitted, 29 admitted to EAC, 24 diverted to community with MH services.

# Mental Health Program Successes

- \* Dauphin County Community Support Program (CSP) Committee served as a primary support to the HOPE Troupe which provides education and stigma reduction through entertainment is accomplished by Helping Open People's Eyes (HOPE) about mental illness and to inspire hope and healing.
- \* Reduced the use of Children's RTF to approximately 30 youth (down from 40 youth in FY 2011-12) and has been below 30
- \* Consultation with CMU - 45 child-specific meetings were held between the County and their MH case manager/supervisor prior to a multi-system interagency team meeting. With better preparation, a community-based alternative was approved or pursued for 18 children and their families versus out of home placement.
- \* During this past fiscal year, there were a total of 64 youth discharged from Multisystemic Therapy services. Forty-five (45) of the 64 discharges or 70% were considered successful.

# MH Program Data Persons Served

Service Type	2009-10	2010-11	2011-12	2012-13
Administrative Management	3389	3500	3304	<b>3512</b>
Resource Coordination	475	477	528	458
Intensive Case Management	595	575	563	548
Outpatient	993	970	800	<b>795</b>
Inpatient	6	7	5	15
Partial Hospitalization	70	74	67	<b>54</b>
Community Residential	403	436	413	<b>401</b>
Community Employment	28	22	12	9
Facility-Based Vocational Rehabilitation	36	35	27	17
Social Rehabilitation	504	483	480	<b>421</b>
Family Support	9	8	8	5
Family-Based Mental Health Services	0	0	0	1
Crisis Intervention	2344	2394	2457	2023
Emergency Services	1005	1026	1052	<b>1321</b>

# MH Expense Data

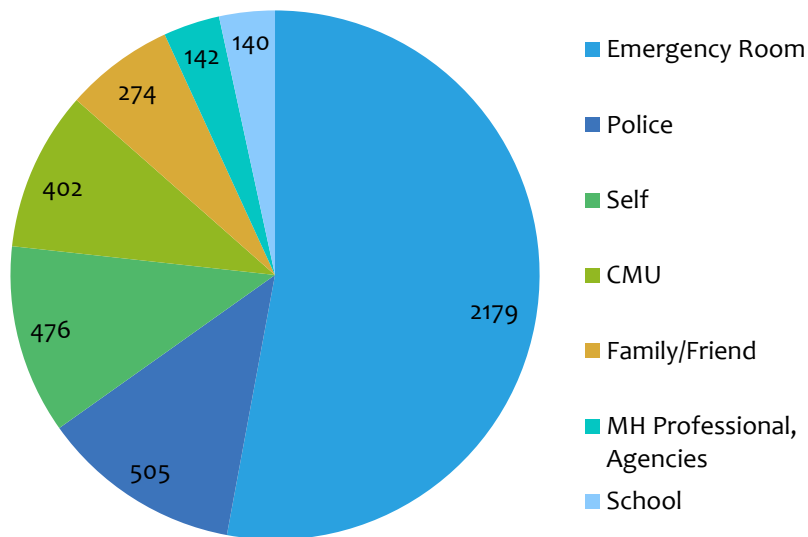
MH Cost Center	Costs 2011-2012	Costs 2012-2013
Administrators Office	968,232	1,012,180
Community Services	570,026	514,396
Resource Coordination	353,002	340,373
Outpatient	887,213	768,848
Inpatient	102,050	160,089
Partial Hospitalization	261,596	196,348
Emergency Services	652,812	702,090
Crisis Intervention	1,172,868	1,075,804
Facility Based Voc. Rehab.	107,560	95,693
Community Residential	11,027,011	9,947,592
Social Rehab.	2,457,118	2,185,786
Family Support Services	52,430	49,729
Intensive Case Mngmt	574,412	669,813
Family Based Services	0	6,030
Administrative Mngmt	1,590,775	1,585,585
Community Employment	40,954	49,400
<b>COUNTY MH TOTAL</b>	<b>\$20,818,059</b>	<b>\$19,359,756</b>

# Crisis Intervention Program

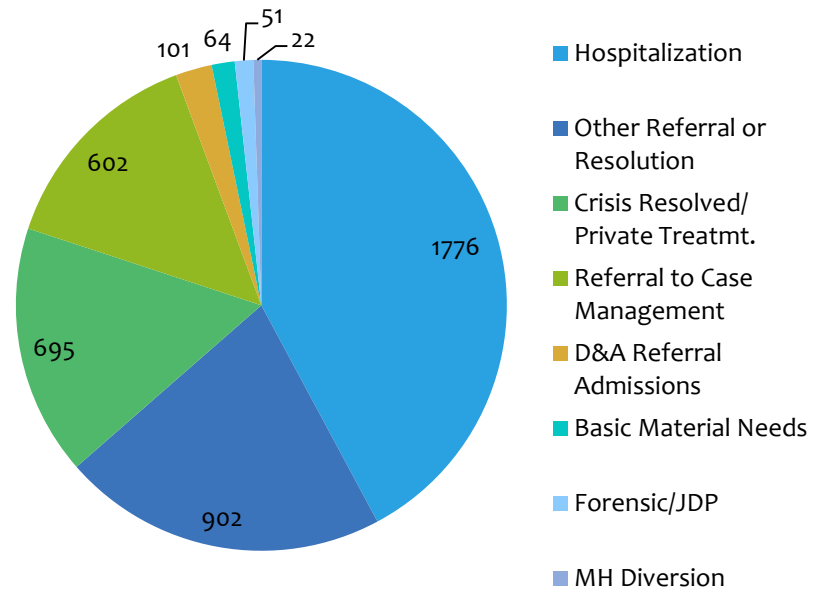
- \* In FY 12-13, 42% of all Crisis contacts were for persons who were first time consumers of crisis services.
- \* 1853 or 41% of all contacts resulted in commitments because of level of risk. The number of actual hospitalizations was 1780 because some persons initially under commitment were diverted to other dispositions/treatments.
- \* The Bridge Project resulted in 264 referrals. An Inpatient Readmission Committee analyzed bridge project data in order to determine the impact on hospital readmission rates and other factors related to recovery and stabilization. 125 persons in the Bridge Program had at least 1 readmission within a 30 day period.
- \* Crisis continued their efforts as part of the Critical Incident Stress Management (CISM) Team, and Disaster Coordination and Outreach Response Team (DCORT)
- \* After two years of planning and development, the CI program converted to a digital record system during FY 12-13.

# Crisis Data

## Referral Sources



## Final Disposition of Cases





# Questions / Comments

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