

Report to the Behavioral Health Oversight Committee May 9, 2007

Clinical Operations

2007 Utilization Priorities

- Managing ED Delay
 - ICM on site at CCMC daily
 - ICM on site as needed to any other ED
- Managing Inpatient Discharge Delay
 - ICM is assigned to facilities
 - Performance Target focuses on improvement in discharge/crisis prevention planning
- Evaluation of foster care disruption
- Intensive management of children < 10
- Evaluating ALOS for residential and inpatient care

Inpatient Services

CHILDREN & ADOLESCENTS

Total Cases Inpatient *vs.* PRTF



Total Days Inpatient vs. PRT



Average Length of Stay (Inpatient vs. PRTF)



Percent Days Delayed (Inpatient & PRTF)



Local Area Inpatient & PRTF Utilization and Discharge Delay data (CHILDREN & ADOLESCENTS)

Q1 07 TOTAL CASES BY LOCAL AREA (INPATIENT & PRTF)



Q1 '07 DAYS PER 1000 (INPATIENT & PRTF)



Q1 '07 Average Length of Stay by Local Area (INPATIENT & PRTF) Add Median LOS



Q1 '07 % OF INPATIENT DAYS DELAYED BY LOCAL AREA

(Inpatient & PRTF)



REASONS FOR DISCHARGE DELAY

Q1'07 STATEWIDE REASONS FOR DISCHARGE DELAY (INPATIENT, PRTF, RTC)



Q1 '07 DELAY CATEGORIES BY LOCAL AREA (Inpatient, PRTF, RTC)



Emergency Department Discharge Delay

Quarter 1, 2007

Average Days Delayed in ED SFYQ3-4 '06 & Q1 '07



Children/Adolescents Delayed in ED SFYQ3-4 '06 & Q1 '07



Number of Children/Adolescents Delayed in ED Q3 '06- Q1 '07



RESIDENCE PRIOR TO ED Q1 2007



DISPOSITION Q1 2007



Referral/Disposition Analysis

- Qualitative sense had been that the bulk of delayed dispositions were DCF youth from RTC or GH
- Data reveals that half of delayed children from biological, foster or other home settings
- Speaks to opportunities to positively impact the diversion rate of the EDs and increase referrals back to community based programs

Referral/Disposition Analysis, cont'd

- 90 Children in Delayed Status in Q1 of 2007
- 72% DCF identified (n = 65)
- 29 of the Delayed Members were 12 or younger
 68% of the youth were hospitalized
- Under use of EMPS programs as consultants and community based services as diversions
- Initial outcomes of providing support and alternatives to EDs does yield positive results