

A REPORT BY
THE 2018-2019 CONTRA COSTA COUNTY GRAND JURY
725 Court Street
Martinez, California 94553

Report 1909

**Contra Costa County Psychiatric
Emergency Services**

Improving Care for Children and Adolescents

APPROVED BY THE GRAND JURY

Date MAY 22, 2019



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ANITA SANTOS
JUDGE OF THE SUPERIOR COURT

Contra Costa County Grand Jury Report 1909

Contra Costa County Psychiatric Emergency Services

Improving Care for Children and Adolescents

**TO: Contra Costa County Board of Supervisors
Contra Costa Health Services**

SUMMARY

How does the Contra Costa Regional Medical Center's Psychiatric Emergency Services (PES) meet the mental health needs of children and adolescents in Contra Costa County? The PES unit provided care for over 10,000 patients from October 2017 through September 2018. More than 1,600 were children (ages 7 through 12 years) and adolescents (ages 13 through 17 years).

The Grand Jury wanted to understand how PES cares for children and adolescents once they arrive at the Medical Center for psychiatric care. Because this is a Contra Costa County (the County) facility, many do not have health insurance and are brought to PES by family, police, or social worker. The Jury determined that while PES provides the needed mental health services, it lacks suitable facilities necessary to provide psychiatric emergency care for children and adolescents. The PES facility does not separate children and adolescents from adult patients at its entrance, waiting room, triage, or treatment area. They are exposed to adults needing psychiatric help, which PES staff states could cause additional trauma to the children and adolescents. Staff also indicated the crowded conditions at PES may compromise patients' privacy as required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

The County does not operate a facility for children and adolescents in need of long-term psychiatric care. While waiting for long-term placement, children and adolescents are held in the PES unit until a place is found for them, often outside the County.

The Grand Jury recommends that the County Board of Supervisors (the Board) consider directing Contra Costa Health Services to perform a needs assessment focused on PES services for children and adolescents. In conducting a needs

assessment, the County should consider including a plan to segregate children and adolescents from adult patients in PES. It should also consider identifying space within the Contra Costa County Medical Center (Medical Center) for children and adolescents who are awaiting long-term placement. In addition, the Board should consider locating a long-term-care facility within the County or collaborating with neighboring counties on a regional solution.

METHODOLOGY

In the course of its investigation, the Grand Jury:

- Reviewed Psychiatric Emergency Services Policies and Procedures
- Interviewed mental health professionals, individuals associated with PES, and individuals engaged in providing mental health services in the County
- Toured the PES facility and other areas of the Contra Costa Regional Medical Center
- Reviewed information regarding the number of patients served, reasons for presentation at PES, average patients served per month, and number of staff in PES
- Reviewed Contra Costa County Mental Health Commission meeting minutes
- Reviewed the 2016 Contra Costa County Mental Health Commission White Paper and updates in 2017 and 2018

BACKGROUND

Contra Costa Health Services

The mission of Contra Costa Health Services (Health Services) is to care for and improve the health of all people in the County, with special attention to those who are most vulnerable to health problems. Health Services is organized into eight divisions. Two of the divisions are Behavioral Health Services and the Contra Costa Regional Medical Center, located in Martinez. These two divisions collaborate on mental health care, with the Medical Center's PES unit providing emergency mental health services. The Grand Jury focused on PES in its investigation.

Medical Center Psychiatric Emergency Services

PES provides emergency mental health services for adults and children and adolescents who rely on the County for their mental health care. PES contains 14 beds for adults and four beds for children and adolescents. The Medical Center maintains an inpatient unit providing long-term psychiatric care for persons the age of 18 and over.

However, there is no such inpatient unit in the Medical Center, or other County-operated facilities, for seriously mentally ill children and adolescents in need of hospitalization. Children and adolescents needing hospitalization must stay in the PES unit until they are placed in a facility that provides long-term care.

PES is designated by the County as the receiving center for patients undergoing involuntary holds of up to 72 hours. Involuntary holds are required by Section 5150 of the state Welfare and Institutions Code when patients, including children and adolescents, are a danger to themselves or others.

From October 2017 through September 2018, the PES unit served 10,171 patients. Of these patients, 1,609 were children and adolescents: an average of five per day. Forty-nine children and adolescents were psychiatric holds under Section 5150. An additional 943 were at PES because they were either suicidal, had attempted suicide, or had exhibited suicidal thoughts (ideation). See graph in the following section.

On average, the PES day and evening shifts consist of eight nursing staff, four social workers and two psychiatrists. The night shift consists of eight nursing staff, two social workers and one psychiatrist.

Mental Health Commission White Paper

The Contra Costa County Mental Health Commission (the Commission) is an advisory body of citizens appointed by the Board to serve as the watchdog group for mental health services provided by the County. In April 2016, the Commission submitted a White Paper to the Board regarding what it called, “a crisis in the county public mental health care system and budgetary issues contributing to the crisis.” The White Paper was followed by updates in October 2017 and September 2018.

In addition to the Grand Jury’s independent findings, the White Paper and the updates also recommended changes in PES to improve treatment space for children and adolescents. The Grand Jury did not find any evidence that the Commission’s recommendations had been implemented.

DISCUSSION

Children and Adolescent Patients Presenting to PES

From October 2017 through September 2018, PES saw an average of 848 patients per month. On average, 134 of these were children and adolescents. The facility has four beds for children and adolescents and 14 beds for adults. When children and adolescents in PES exceed the number of beds, they are provided with floor mats until beds become available.

Adults requiring longer-term care are admitted to a separate unit within the Medical

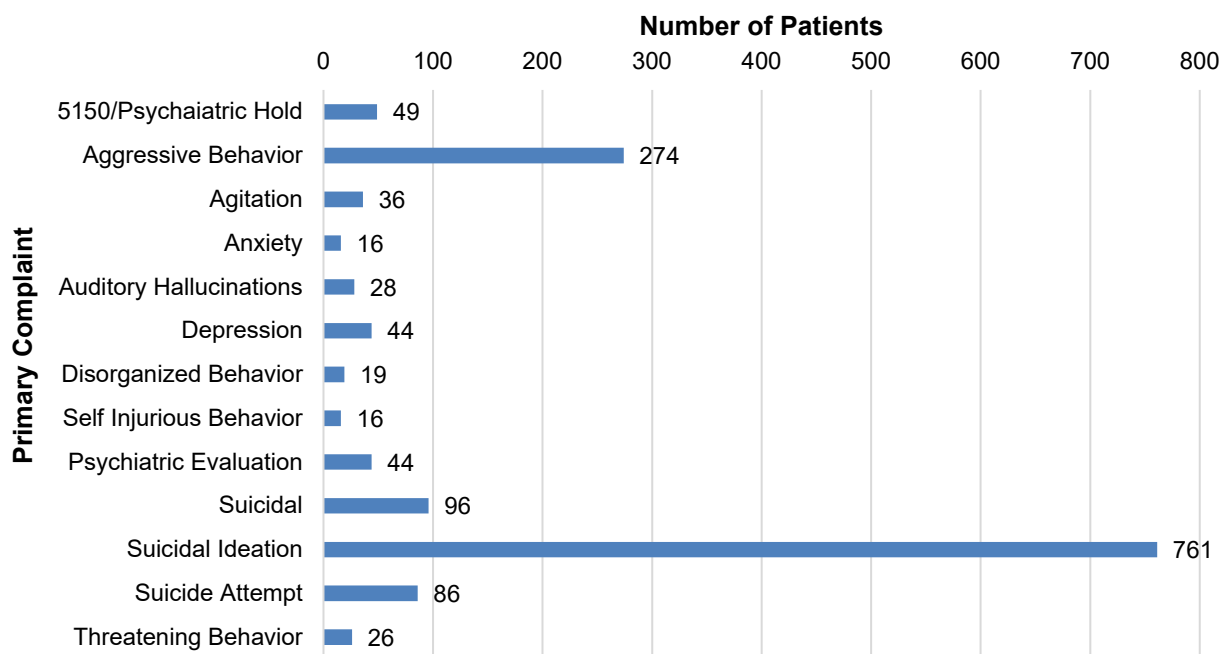
Center which has 23 inpatient beds. The Medical Center does not have a similar long-term-care unit for children and adolescents. These patients must stay in the four-bed PES unit until beds are located in other facilities, many times outside of the County.

The following graph shows the most significant complaints of children and adolescents presenting to PES:

Children and Adolescent PES Patient Primary Complaints

October 2017 through September 2018

(Source: PES)



The PES Experience for Children and Adolescents

The PES facility has no separate entrance, waiting room, triage, treatment area, or exit for children and adolescents. They stay in a small section of the PES unit with two designated rooms, one for children (ages 7 through 12 years) and one for adolescents (ages 13 through 17 years). Upon arrival at PES, and when they leave, children and adolescents must pass through the adult area to reach the assessment rooms. Distressed children and adolescents are exposed to adult patients needing psychiatric help. PES staff states this could cause additional trauma to the children and adolescents.

The Grand Jury determined in its investigation, and as noted in the updates to the

Commission's White Paper, there has been no progress made in implementing a new design of PES facilities for children and adolescents.

The Grand Jury observed there is a vacant wing (4D) on the fourth floor of the Medical Center. This space may be an option to serve as a temporary holding unit for children and adolescents awaiting placement in long-term care.

Long-term Care Placement

The PES facility has four beds to accommodate children and adolescents. After patients are assessed and a decision is made that they need inpatient admission, staff must find an appropriate place for them in a long-term-care facility. Inpatient beds are in such high demand that children and adolescents are held in PES an average of four to five days until space is found for them in a long-term-care facility. The facility can be as far away as Sacramento and Fresno.

According to mental health professionals interviewed by the Grand Jury, placing these children and adolescents outside the County can impact their treatment and recovery. These professionals also indicated that children and adolescents need to stay connected with their families.

The Grand Jury recommends that the Board of Supervisors consider directing Health Services to address two issues:

1. The need for improved space for children and adolescents in PES
2. The need for a children and adolescents treatment center in the County, or a regional approach to long-term care in collaboration with neighboring counties.

Additional Concerns

The Grand Jury has other concerns based on our investigation:

- The PES facility is configured so there is a lack of privacy for patients. This could result in HIPAA violations.
- John Muir Health Concord Medical Center is designated by the County as a 5150 receiving center. However, there is no formal contract between it and the County to accept 5150 cases.

FINDINGS

- F1. At peak times the PES facility, with four beds and two treatment rooms, is not sufficient to handle its volume of children and adolescent patients.

- F2. Children and adolescents could remain in PES four to five days while they wait for long-term placement.
- F3. The PES facility is configured so that children and adolescents seeking treatment must pass through the adult patient area.
- F4. Contra Costa County does not operate a long-term-care facility for children and adolescents. They are often placed in long-term-care facilities outside the County.
- F5. Although the County has authorized John Muir Health Concord Medical Center to accept 5150 patients, there is no formal contract to do so.
- F6. The Medical Center's 4D wing is vacant with no plans for its utilization.
- F7. The Contra Costa County Mental Health Commission recommended changes in PES to improve treatment space for children and adolescents. The Grand Jury did not find any evidence that the Commission's recommendations had been implemented.

RECOMMENDATIONS

- R1. The Board of Supervisors should consider directing Contra Costa Health Services to perform a comprehensive needs assessment that would include a redesign of the PES facility that would separate children and adolescents from adult patients by June 30, 2020.
- R2. The Board of Supervisors should consider directing Contra Costa Health Services to investigate the use of the Medical Center's vacant wing (4D) as a temporary holding area for children and adolescents waiting for long-term placement in other facilities by December 31, 2019.
- R3. The Board of Supervisors should consider directing Contra Costa Health Services to develop a plan to operate a treatment center for children and adolescents who need long-term psychiatric care by June 30, 2020. The treatment center could either be within the County or in collaboration with neighboring counties.
- R4. The Board of Supervisors should consider directing Contra Costa Health Services to explore entering into a contract with John Muir Health Concord Medical Center to accept and treat 5150 patients presently only served by the County by June 30, 2020.

REQUIRED RESPONSES

	Findings	Recommendations
Contra Costa County Board of Supervisors	F1, F2, F3, F4, F5, F6, and F7	R1, R2, R3, and R4
Contra Costa Health Services	F1, F2, F3, F4, F5, F6, and F7	

These responses must be provided in the format and by the date set forth in the cover letter that accompanies this report. An electronic copy of these responses in the form of a Word document should be sent by e-mail to ctadmin@contracosta.courts.ca.gov and a hard (paper) copy should be sent to:

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