## **Agency Overview and Budget Summary**

#### Presentation to House Social Services Budget Committee

#### **Budget Overview** Overview of Mental Health Hospitals

Laura Howard, Secretary

Scott Brunner, Deputy Secretary of Hospitals and Facilities



# Osawatomie State Hospital (OSH), Adair Acute Care (AAC) and Larned State Hospital (LSH) serve people experiencing serious symptoms of mental illness.

- Persons who have been deemed a danger to themselves or others:
  - Generally, exhibit symptoms that community providers cannot treat safely and effectively.
  - Once stabilized, can return home and be supported by their local Community Mental Health Center (CMHC).
- AAC and LSH's Psychiatric Services Program (PSP) are certified to participate in Medicaid and Medicare and receive federal funding.
- The Hospitals are required to provide an array of mental health care and treatment for all their patients from their approved budget.



#### LSH has two programs In addition to Psychiatric Services Program (PSP):

- Sexual Predator Treatment Program (SPTP)
  - Serving residents civilly committed as sexually violent predators who receive treatment and services.
- State Security Program (SSP)
  - Serving individuals referred by the district courts for forensic evaluation and/or treatment and a minimal number of females transferred from the Department of Corrections pursuant to the Kansas Code of Criminal Procedure as well as housing the Security Behavioral Unit, which serves highly aggressive patients transferred from PSP and OSH.



#### Summary of State Mental Health Hospital Census

(as of 12/31/2023)

Facility	<b>Budgeted Beds</b>	Average Census FYTD*
Osawatomie State Hospital (OSH)	116	100
Adair Acute Care AAC	60	35
OSH - SPTP Reintegration (MICO House)	16	9
LSH – Psychiatric Services Program (PSP)	90	70
LSH – State Security Program (SSP)	140	90
LSH – Sexual Predator Treatment Program (SPTP)	274	237
LSH – SPTP Reintegration (Meyer East)	16	11
TOTAL	712	552

#### **Summary of Staffing**

<b>Facility</b>		Authorized Positions**
OSH		377.95
AAC		155.00
LSH		889.50
TOTAL		1,422.45
	*Fiscal Year to Date	

\*\*Includes FTE and Non-FTE



#### Summary of State Mental Health Hospital Turnover and Vacancy Rates (as of 1/1/2024)

<b>Facility</b>	Turnover Rate (%)	Vacancy Rate (%)
OSH	18.0	37.9
LSH - Overall	12.8	44.2



# Budget

#### **Larned State Hospital**

#### FY 2023 Actuals:

• Actual expenditures total \$109.9 million, including \$92.4 million from SGF

#### FY 2024 Budget :

• Recommended budget totals \$116.6 million, including \$91.1 million from SGF

#### FY 2025 Budget:

• Recommended budget totals \$78.2 million, including \$68.5 million from SGF



# Budget

#### **Osawatomie State Hospital**

#### FY 2023 Actuals:

• Actual expenditures total \$60.6 million, including \$46.6 million from SGF

#### FY 2024 Budget:

• Recommended budget totals \$65.1 million, including \$53.6 million from SGF

#### FY 2025 Budget:

• Recommended budget totals \$55.9 million, including \$44.2 million from SGF



## **Overview of State Hospitals**

Enhancements in the Governor's Budget Recommendation

The Governor recommends several statewide adjustments to state employee pay that will also impact KDADS state hospital employees:

- •Apply statewide 5% pay adjustment for state employees.
- •Set a market starting rate of \$15/hour for all state employees.

•Make 24/7 Pay Plan permanent.

The Governor recommends \$690,868 from the State General Fund for shoe and boot allowances for Safety and Security Officers and nursing staff.

•Matches provisions to fund shoe allowances for employees in the Department of Corrections.



#### Laura Howard Secretary, Kansas Department for Aging and Disability Services

#### **House Social Services Budget Committee**

**Larned State Hospital** 

January 30, 2024

Lindsey Dinkel, Ph.D., LCPC, Superintendent



#### Larned State Hospital operates 3 distinctly different treatment programs:

- Psychiatric Services Program (PSP)
- State Security Program (SSP)
- Sexual Predator Treatment Program (SPTP)



#### **Psychiatric Services Program (PSP):**

- Serves voluntary as well as civilly committed adults with mental illness and is budgeted for 90 beds.
- Patients who enter the program are required to be screened by a qualified mental health professional from one of the community mental health centers in Central and Western Kansas or be referred under an order of evaluation or treatment from a judge.
- PSP admitted 599 patients and discharged 598. In January 2022, due to ongoing staffing shortages and efforts to maintain patient and staff safety, PSP had to reduce census to 62 patients and began monitoring admissions daily. The PSP census is currently operating at 74.
- A wait list was necessary 169 of 365 days in 2023. This is a decrease of 59 days from the 2022 wait list. On average there were 17 patients waiting per month for an average wait time of 36 hours.









4% 3% 5% 3% 1% 3% Other includes counties in LSH 30% catchment area with 10 or less admits for 2023.

PSP ADMISSIONS BY COUNTY JANUARY - DECEMBER 2023



PSP Admissions by County January - December 2023				
Barton	25			
Butler	14			
Cowley	29			
Dickinson	11			
Ellis	67			
Finney	18			
Ford	20			
Harvey	18			
Marion	8			
McPherson	15			
Other	181			
Out of State	32			
Reno	68			
Saline	68			
Seward	17			
Thomas	8			



#### State Security Program (SSP):

- Known as the State Security Hospital in statute, SSP is budgeted for 140 beds with a current capacity of 100 adult male and female patients charged with felony crimes. The reduction in capacity is a result of staffing shortages.
- The District Courts refer individuals pursuant to the Kansas Code of Criminal Procedure for various criminal evaluations, competency restoration, treatment in lieu of confinement, or lack of mental state, in addition to a small number of females transferred from the Kansas Department of Corrections (KDOC).
- SSP includes the Security Behavior Unit (20 beds). This unit serves male patients administratively transferred from OSH or PSP who cannot be managed in a less restrictive environment, come from jail on a hold order with a high-level crime, and/or are a threat of harm toward patients and/or staff. Once their behavior is stabilized, they are transferred back to OSH or PSP.



SSP Total Number of Defendants on Wait List per Month January - December 2023







SSP Average Length of Time on Wait List to Admission (Female) January - December 2023









#### **Sexual Predator Treatment Program (SPTP):**

- Established by a 1994 statute that provides for the civil commitment of persons identified by law as sexually violent predators. SPTP has a dual mission:
  - Provide for the safety of Kansas citizens by establishing a secure environment in which persons identified as sexually violent predators can reside.
  - Offer treatment with the aim of reducing risk for re-offending, allowing motivated persons who complete treatment to return to society.
- The program has a total of 284 residents.
  - Inpatient program at LSH: 238
  - Conditional Release residents residing in Kansas: 14
  - Custody of Kansas Department of Corrections: 8
  - Reintegration Facilities houses 24 residents as indicated below
    - Meyer East (LSH): 9
    - Maple/Willow (PSH): 7
    - MiCo/Biddle (OSH): 8



**SPTP Inpatient Census per Year** 



#### **SPTP Conditional Release Census per Year**

SPTP Reintegration C	Census	per	Year
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SPTP Total Discharges					
Year	Number of Residents				
2002	1				
2012	1				
2013	1				
2015	1				
2021	2				
2022	5				
2023	4				



# **Recruiting and Retention**

#### LSH has engaged in a wide-range of recruiting and retention efforts that include but not limited to:

- Utilizing a wide variety of social platforms including Facebook, Indeed, LinkedIn, Monster, Instagram, Digital Advertising and YouTube for advertising, recruiting, and posting of announcements, events, and recognition.
- Promoting larnedcares.com and the "Be the One" brand in all recruiting endeavors.
- Participating in virtual and in-person job fairs, 18 in person job fairs and 7 virtual job fairs
- Online job recruiting along with Kansas State Network (KSN) and Mammoth recruitment initiative (including commercials and digital marketing).
  - GeoVideo Ads that are served to consumers inside a custom pre-defined area (colleges, hospitals or events)
  - Digital Pre-Roll Video Ads served before, during or after content on websites
  - Facebook Ads
  - Streaming TV Ads
  - Streaming Audio Ads
  - Search Engine Marketing
  - Broadcast TV 15 second commercial plays on channel 3
  - Good Day Kansas Segments A LSH employee will be interviewed by the KSN team and focuses on jobs or areas of the hospital.



# **Recruiting and Retention**

- Converted Full Time positions to 50% positions to allow for greater flexibility in hiring.
- Employing temporary staff (e.g., Nursing, Safety and Security, Psychology) to assist with part-time coverage for the departments.
- Hiring a remote Forensic Psychologist position(s) to assist with clinical/forensic evaluations.
- Flexible interviewing modalities utilizing; Zoom, Teams, Telephone and In Person interviews provided
- Participating as an American Psychological Association (APA) approved site; providing internship and postdoctoral training along with practicum site for social and psychology students.
- Employee recognition including the Shooting Star Program, Recognition of Employees of the Quarter and the Year, and celebration of hospital week.
- Annual Mental Health Conference was held in a virtual Zoom setting and offered continuing education units for clinicians and nursing professionals.
- Annual Mental Illness Awareness events including the Mayor signing a proclamation for Pawnee County, area poster contest for students, and patient events were held to focus on the importance of mental health services.
- "Getting to Know Your Coworker" flyers for recognition.
- On campus daycare and LSH Route 264 Sunflower Grill.
- Awarding educational scholarships with funding through the LSH Endowment.



# **SSP Mobile Competency (Out-Patient)**

- The State Security Program (SSP) reviews all referrals under KSA 22-3302 for competency evaluations from the District Courts and considers each case for possible completion through mobile/outpatient evaluation. Individuals ordered for competency restoration, pursuant to KSA 22-3303, are also considered for mobile/outpatient restoration. Efforts are being made to educate courts and appropriate stakeholders regarding the changes to statutes, specifically KSA 22-3303, that allows for competency restoration to be completed by professionals outside of the Larned State Security Hospital, that have the appropriate training and education.
- SSP continues to reach out to counties to provide education on mobile/outpatient evaluation and restoration and makes efforts to provide competency evaluations and restorative treatment in settings outside of LSH.
- SSP continues to work in partnership with several counties, providing competency restoration services in the jail.
- LSH utilizes a remote psychologist to provide individual and group competency restoration sessions in jails and other secure locations. This individual also completes forensic evaluation reports for individuals participating in mobile/outpatient competency restoration.
- SSP continues to provide a monthly report to the Sheriff's Association outlining current status of individuals waiting for placement at the hospital, including the number waiting and length of time on the wait list.



## **SSP Mobile Competency (Out-Patient)**



Department for Aging and Disability Services





### Significant Changes in the Approved Budget Larned State Hospital FY 2024

#### Agency Nursing Staff:

- LSH continues to use contract nursing staff to provide direct patient care every shift to provide adequate coverage to safely
  manage violent sexual predators, highly aggressive district court referrals, extremely aggressive and high-risk security
  behavior patients, increased medically infirmed, as well as special needs patients/residents.
- Nursing vacancy rates: SPTP 68.2%; SSP 69.4%; and PSP 61.9%.
- A weekly meeting occurs in to assess current FTE numbers in comparison with the overall need to meet daily coverage for the hospital. It is then determined the number of agency staff needed to fill the staff needs along with recruiting additional agency staff to fill any new vacancies created by either prior FTE staff or agency staff that have served their length of the contract.

Overall Need for Effectively Maintaining Coverage					
RN	61				
LPN/LMHT	44				
MHDD/CNA/PCSS	320				

Nursing Department Staff Numbers Data from December 26, 2023 Review							
Number of Number of Total FTE Agency							
RN	13.5	36	49.5				
LPN/LMHT	8.5	26	34.5				
MHDD/CNA/PCSS	109	142	251				



### Significant Changes in the Approved Budget Larned State Hospital FY 2024

#### Agency Nursing Staff:

- Hiring FTEs continues to be extremely difficult in western Kansas. Unemployment rates are very low in Larned and surrounding areas and wages are unable to compete with the contract nursing rates. The average unemployment rate for Pawnee and surrounding counties is less than 2%.
- Unique patient needs also are driving the need for contractors to maintain staffing ratios:
  - Serving patients with higher acuity and patients that can be mixed with others.
  - Closely monitoring an average of 21 patients/residents on 1:1 or 2:1 status each shift due to suicidality, fall risk, high medical issues, aggression or other related behavioral issues.
  - SPTP residents that require high levels of medical oversight in the Infirmary.
- Contract nursing rates are significantly higher than full time staff and they receive increased pay when working with a COVID positive patient/resident.
- Contract nursing staff has helped stabilize the few remaining FTE staff to improve work/life balance.



# Significant Changes in the Approved Budget

#### Larned State Hospital FY 2024

#### **Enhanced Employee Pay:**

 The 24/7 pay plan which included a base pay increase for licensed nursing staff and hourly differentials for all non-exempt staff continued for FY2024 with additional SGF funding.

#### Increased SPTP expenses:

• The aging population of SPTP has lead to increased medical related expenses, a greater need for outside medical services, and increased transport and hospital costs.

#### **Hospital Overall Cost Increases:**

 Inflation has resulted in an increase in the price for goods and services across the hospital, including basic hospital supplies, fuel, repair and maintenance, diesel, and food service expenses.



# Supplementals in the Governor's Budget

#### Salary Increase Shortfall:

For FY 2024, the Governor recommended a supplemental of \$601,807 from the State General Fund to provide funding for the shortfall implementing the FY2024 pay plan. The amount of funding originally requested for the raises was not sufficient to fund the increase in FY 2024 after applying the percentage increases to all positions.

#### Agency Contract Nursing Staff

For FY 2024, the Governor recommended a supplemental of \$15,741,417 from the State General Fund for Agency Contract Nursing Staff.

The supplemental makes up for the difference between the \$9.5 million included in the approved budget and the anticipated annual expenditures of \$40.5 million. LSH is using a carryover balance in our Title XIX funding to reduce this request for FY 2024. The additional Title XIX funding was retained by LSH to help with the FY 2024 expenses to start off the FY.



## **Enhancements in the Governor's Budget**

#### **Forensic Evaluator – SPTP**

For FY 2025, the Governor recommended an enhancement of \$125,551 from the State General Fund for a Forensic Evaluator for the SPTP program.

All residents admitted into SPTP require initial psychological assessments and annual forensic court report for LSH comply with Kansas Statues associated with the commitment of sexually violent predators. Some residents also require supplementary testing or additional reports, outside of the required standard annual report, to be submitted to the court for consideration of program advancement or reduction. LSH has one Forensic Evaluator who is responsible for completing these tasks for all 285 residents in the program including residents on Transitional and Conditional Release.

With a second SPTP Forensic Evaluator, the psychological testing and annual forensic court reports can be more evenly distributed while maintaining high quality work.

#### **Environmental Services Staff**

For FY 2025, the Governor recommended an enhancement of \$315,670 from the State General Fund for six additional Environmental Services Staff.

LSH is requesting 4 (four) Environmental Services Specialists for SPTP units and two for other patient and administrative buildings on the LSH campus. These positions will be responsible for gathering trash and recycling, ordering and stocking supplies, collection of hazardous waste for pick-up by the State-certified recover system, snow removal, and cleaning of areas restricted to residents. SPTP residents had maintained buildings through the Vocational Training Program, but security concerns reduced the number of buildings and resident areas that could be supported by resident workers.





#### **Performance Based Budgeting Data**



## **Performance Based Budgeting -- LSH**

Administrative Program						
Performance Measures	FY 2021 Actuals	FY 2022 Actuals	FY 2023 Actuals	FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate	
Percent of Risk Management incidents that are logged and prepared for initial review within 24 hours of receipt by Risk Manager.	100%	100%	100%	100%	100%	
Staff Education and I	Research P	rogram				
Performance Measures	FY 2021 Actuals	FY 2022 Actuals	FY 2023 Actuals	FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate	
Percent of employees completing Crisis Intervention Institute (CPI) re-certification to maintain competency per regulatory expectations.	97%	100%	99%	100%	99%	
Ancillary F	rogram					
Performance Measures	FY 2021 Actuals	FY 2022 Actuals	FY 2023 Actuals	FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate	
Medical – Admission Intake Assessment (AIA) and Columbia Suicide Severity Rating Scale completed timely.	93%	93%	92%	92%	95%	
Nursing – Admission Intake Assessment (AIA) completed timely.	95%	97%	96%	96%	90%	



## Performance Based Budgeting -- LSH

Psychiatric Services Program						
Performance Measures	FY 2021 Actuals	FY 2022 Actuals	FY 2023 Actuals	FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate	
Percent of completed admission intake assessment by medical within 24 hours of admission.	95%	96%	93%	92%	100%	
Percent of completed social work patient discharge instructions prior to discharge.	87%	100%	100%	100%	90%	

State Security Program							
Performance Measures	FY 2021 Actuals	FY 2022 Actuals	FY 2023 Actuals	FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate		
Percent of completed psychosocial assessments within policy timeframes.	99%	100%	99%	100%	95%		
Percent of completed social work patient discharge instructions prior to discharge.	100%	100%	100%	100%	100%		



## **Performance Based Budgeting -- LSH**

Sexual Predator Treatment Program							
Performance Measures	FY 2021 Actuals	FY 2022 Actuals		FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate		
Percent of scheduled treatment groups held.	79%	80%	75%	78%	95%		
Reintegration: Resident progress will be monitored and reviewed every quarter.	100%	100%	100%	100%	100%		

Physical Plant-Central Services								
Performance Measures	FY 2021 Actuals	FY 2022 Actuals		FY 2024 Actuals Through Dec. 2023	FY 2025 Estimate			
Percent of tray audits meeting proper food temperatures.	89%	96%	98%	96%	95%			
Percentage of fire drills completed that are required by the Kansas State Fire Marshall (KSFM).	100%	100%	100%	100%	100%			



### **Osawatomie State Hospital**

#### Laura Howard Secretary, Kansas Department for Aging and Disability Services

#### **House Social Services Budget Committee**

**Osawatomie State Hospital** 

January 30, 2024

Ashley Byram, LMSW, Superintendent



## **Osawatomie State Hospital**

- OSH has served the State of Kansas for more than 157 years, currently serving adults with severe and persistent mental illness from 45 counties in Kansas and other states.
- OSH has three separate branches including Osawatomie State Hospital, Adair Acute Care, and MICO House, a Residential Facility for the SPTP Program.
- 45% of patients served by OSH and 76% of patients served by Adair Acute Care (AAC) present with co-occurring substance use issues.



## **Osawatomie State Hospital**

- Patients are admitted once screened by qualified mental health professionals from one of the Community Mental Health Centers or are referred for evaluation by the court.
- OSH: 116 licensed beds
  - Acute/intensive inpatient psychiatric treatment
  - Criminal court commitment
  - Dual commitment
- AAC: 60 CMS certified beds
  - Only acute/intensive inpatient psychiatric treatment
  - Social Detox (3 beds)
- Both hospitals have semi-private rooms however, there are times when a patient, due to medical necessity, requires a private room, which then impacts the number of beds available.



## **Adair Acute Care**

#### AAC ADMISSION BY COUNTY JANUARY 1ST - DECEMBER 31ST, 2023



Douglas
Franklin
Johnson
Miami
Montgomery
Out of State
■ Riley

Sedgwick

Shawnee

	# of	Ot
County	Admissions	All
Douglas	32	An
Franklin	17	At
Johnson	279	Во
Miami	15	Bro
Montgomery	57	Ch
Out of State	38	Ch
Riley	42	Ch
Sedgwick	72	Cla
Shawnee	62	Clo
Wyandotte	136	Со
Other	230	Cra
		Do
		Elk

	<b>Other Counties</b>	# of Admissions	Other Counties Cont.	# of Admissions
S	Allen	8	Linn	3
32	Anderson	4	Lyon	18
17	Atchison	8	Marion	1
279	Bourbon	5	Marshall	2
15	Brown	10	Morris	[
57	Chase	1	Nemaha	3
38	Chautauqua	4	Neosho	13
42	Cherokee	9	Osage	[
72	Clay	3	Pottawatomie	<u>c</u>
62	Cloud	6	Republic	1
136	Coffey	3	Wabaunsee	3
230	Crawford	15	Wilson	
	Doniphan	4	Woodson	1
	Elk	2		
	Geary	21		
	Greenwood	6		
	Jackson	4		
	Jefferson	4		
	Jewell	2		
	Labette	20		
	Leavenworth	18		


### **Osawatomie State Hospital**

#### OSH ADMISSIONS BY COUNTY JANUARY 1ST - DECEMBER 31ST, 2023





County	# of Admissions
Douglas	29
Franklin	3
Johnson	26
Miami	6
Montgomery	1
Out of State	6
Riley	7
Sedgwick	25
Shawnee	21
Wyandotte	9
Other	59

<b>Other Counties</b>	# of Admissions	
Allen		4
Anderson		3
Atchison		5
Bourbon		4
Cherokee		2
Crawford		2
Geary		2
Harvey		1
Jefferson		3
Labette		3
Leavenworth		9
Linn		4
Lyon		5
Neosho		4
Osage		1
Pottawatomie		1
Wabaunsee		1
Wilson		2
Woodson		3



## **OSH Moratorium Waiting List**





## **OSH Waiting List**





## **OSH Waiting List**

**Number of Cases Admitted from Waitlist** 

January 1st - December 31st, 2023 120 114 111 102 101 101 99 98 100 95 93 89 87 82 80 60 40 20 0 Jan Feb Mar Jul Sept Oct Nov Dec Apr May Jun Aug



### **Adair Acute Care**

AAC Patient Days and Census										
						FY 2024 (7/1/23 to				
	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023	12/31/23)				
PT days	15,628	13,638	13,772	10,857	11,981	6,457				
Ave census	43	38	37	30	33	35				



#### Average Length of Stay

#### Admissions



Discharges





# **Agency Initiatives**

- **Safety:** Increase overall safety for staff, patients, and environment. Providing on-demand, "refresh" crisis intervention and de-escalation education to staff in between CPI refresher courses.
- **Community Services:** Increase community involvement as participating in at least one community event quarterly.
- **Recruitment and Retention:** Improves staffing levels by increased recruitment and retention. Focus is broken down into the key areas; advertising, education, incentives, coordination of interns/teaching, and staff recognition and appreciation.
- Active Treatment: To ensure the hospital is providing active treatment to all programs while implementing program manuals
- **AWOL:** To ensure all staff are aware of what to do if an AWOL should occur and that regular drills are implemented along with setting up zone search areas.
- **Trauma Informed:** Working with University Health (formally known as Truman Behavioral Healthcare) to bring Trauma awareness to staff and evaluating our environment.



### **Osawatomie State Hospital**

OSH Patient Days and Census											
	FY 2019	FY 2020	FY 2021	FY 2022	EV 2023	(7/1/23 to 12/31/23)					
	FT 2019	FT 2020	FT 2021	F1 2022	FT 2023	12/31/23)					
PT days	38,947	38,462	35,635	35,498	39,437	18,455					
Ave census	106	106	98	98	108	100					

#### Average Length of Stay



#### Admissions



Discharges





# **Recruiting and Retention**

#### **Recruiting:**

- The Governor's 24/7 pay plan increased the base pay for licensed nursing staff along with the market value increases. Providing pay differentials for hourly employees has been an incentive not only for recruiting but also has decreased amount of call ins.
- OSH added a PRN (999 hour) position in Human Resources to help with recruitment/interviews
- Since the beginning of 2023, OSH HR has attended 14 career/job fairs.
- In collaboration with Johnson County Community College, OSH has established communication to post current open positions on their website. HR is also able to come in twice a semester to speak with students about career opportunities.
- Utilizing platforms such as: Linked in, Kansas Works, Handshake, and Indeed for posting available positions.
- Utilization of Facebook for recruiting and posting of announcements, events, and recognition.
- Becoming more involved in community events to promote the hospital in a positive light.
- High School Tours have restarted which include different disciplines coming to educate about their role at the hospital.
- Increasing our participation with Universities to have more interns and practicum students. Also obtaining a Post-Doctoral Resident.



# **Recruiting and Retention**

#### **Retention:**

- Employee Appreciation Committee has provided hospital employees with many activities over the past year including Winter games, food trucks, annual Carnival, T-shirt Design Contest, chili cook off and many more.
- Recognition of Employee of the Quarter, Years of Service, and celebration of hospital week
- Providing continued training to our hospital Directors and Supervisors
- Created a continued education committee to provide more educational opportunities
- Provided computer based annual training and physical skills
- OSH Nursing Department has implemented a competency checklists to provide continued training after orientation.



## **Security Enhancements**

OSH has pursued enhancing security throughout the campus by:

- Implementing scheduled zones which each officer is responsible for. Each zone has a set amount
  of time and tasks which are required. Each officer spends approximately 4.25 hours on the units in
  their assigned zone each day.
- Security has also implemented Monthly Trainings: putting together monthly power points or physical training scenarios on different subjects so every officer will have the proper trainings on policies and procedures.
- Evaluating current placement and need for additional cameras across the campus.
- A part-time Fire Trainer was hired to provide all security with fire training and safety. This assists in record keeping, tracking number of training hours, fit testing, and basic skill qualifications.
- A new schedule was implemented which includes one day off every weekend. This has decreased the amount of call ins for this department and hopefully increase longevity and avoid high turnover rate.
- AAC implemented staff zones on the unit to provide additional observation and safety



## **Remodel Updates**

#### **Biddle Remodel:**

- Construction for remodel of both East and West Biddle was started this past year with an anticipated completion date mid-February 2024, with plans to open the unit in April 2024.
- This will provide Adair Acute Care with 42 private rooms.
- Upon opening Biddle, maintenance and repair will occur on A building

#### **Projects:**

- Continuing Asphalt repairs occurred during 2024,
- Power Plant lift station was repaired, and the Fire Panel was replaced.
- 3 staff cottages received new roofs
- Dejong and West Pavillion were Razed



# Significant Changes in the Approved Budget

### **Osawatomie State Hospital FY 2024**

 Due to inability to obtain applications for needed services, OSH uses staffing agencies for direct care and nursing positions, as well as social workers, masters level clinicians, and housekeeping services, at a much higher cost than regular FTE positions.

The Governor's FY 2024 Budget Recommendation includes an additional \$5.0 million from the State General Fund for current year contract staffing costs.

 Food costs through December 2023 total \$923,208 and are projected to total \$1.8 Million in FY 2024, significantly higher than FY 2023, due to increases in market prices. No additional funding requested to cover the increased costs.



# Significant Changes in the Approved Budget

### **Osawatomie State Hospital FY 2024**

#### Significant Changes, continued

- Reconstruction and upgrade to Biddle Courtyard, not included in original Biddle Capital Improvement. This project will provide the Adair Acute Care patients an outdoor/green space for leisure activities and therapeutic treatment. Due to certification AAC patients are not able to leave the unit and this will provide them with an outdoor area.
- The Governor's Budget Recommendation includes of \$492,886 from the State Institutions Building Fund for this project in FY 2025.







### **Performance Based Budgeting Data**



### **Performance Based Budgeting -- OSH**

AAC Clinical Program									
Performance Measures		FY 2022 Actuals		FY 2024 Actuals through Dec. 2023	FY 2025 Estimate				
Healthcare associated infections will rate remains below national average of 4.0 percent.	2%	1%	1%	1%	1%				
Percent of staff in compliance with the 5 moments of handwashing.	93%	97%	97%	98%	98%				

OSH Clinical Program									
Performance Measures	-	FY 2022 Actuals		FY 2024 Actuals through Dec. 2023	FY 2025 Estimate				
Healthcare associated infections will rate remains below national average of 4.0 percent.	1.2%	1.02%	1.01%	0.9%	0.75%				
Percent of staff in compliance with the 5 moments of handwashing.	97%	95%	95%	96%	97%				



## **Performance Based Budgeting -- OSH**

AAC Clinical Program									
Performance Measures	-	FY 2022 Actuals		FY 2024 Actuals through Dec. 2023	FY 2025 Estimate				
Percentage of patients readmitted within 30 days of discharge	8%	8%	7.1%	6.7%	6.3%				

OSH Clinical Program								
Performance Measures	_	FY 2022 Actuals		FY 2024 Actuals through Dec. 2023	FY 2025 Estimate			
Percentage of patients readmitted within 30 days of discharge	1%	4%	2%	2%	1%			



## **Performance Based Budgeting -- OSH**

#### **Performance Measures**

Percent of patients who have: a history and physical completed within 24 hours of admission, examination signed and dated, all sections of the history and physical examination completed including review of Cranial Nerves II - XII and Impressions/Recommendations, reason documented if Rectal/Pelvic examination is deferred.

AAC Medical Program						OSH	H Medical I	Program	
			FY 2024					FY 2024	
FY 2021	FY 2022	FY 2023	Actuals	FY 2025	FY 2021	FY 2022	FY 2023	Actuals	FY 2025
Actuals	Actuals	Actuals	through Dec.	Estimate	Actuals	Actuals	Actuals	through	Estimate
			2023					Dec. 2023	
99%	97%	99%	99%	99%	97%	95%	99%	100%	100%

