

## PROGRAM DESCRIPTION

<b>Department:</b> <u>Mental Health</u>	<b>HB Section(s):</b> <u>10.325</u>
<b>Program Name:</b> <u>State Operated Children's Facility</u>	
<b>Program is found in the following core budget(s):</b> <u>State Operated Children's Facility</u>	

**1a. What strategic priority does this program address?**

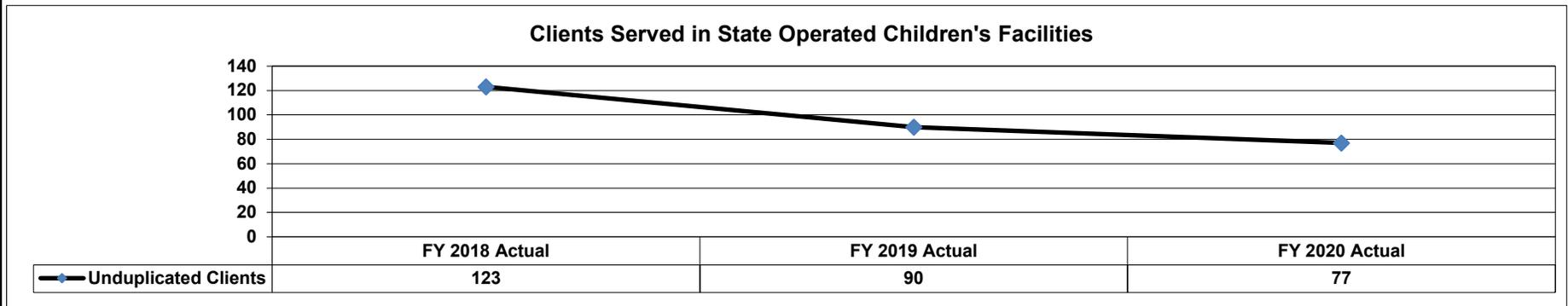
Provide treatments, habilitation and support services to individuals in state-operated programs.

**1b. What does this program do?**

Hawthorn Children's Psychiatric Hospital (HCPH) is a Joint Commission accredited 44 bed psychiatric facility that provides inpatient and residential treatment programs for children 6-18 years of age who have acute and severe psychiatric problems. HCPH is the only facility of its kind in the state. HCPH uses an interdisciplinary team approach to address the medical, psychological, social, educational, vocational and recreational needs of the child. This involvement may include family counseling and parent training designed to complement services the child receives. The goal is to enable the child to reach their full potential and return to the community.

An inpatient placement is the most restrictive setting on the children's continuum of care.

**2a. Provide an activity measure(s) for the program.**

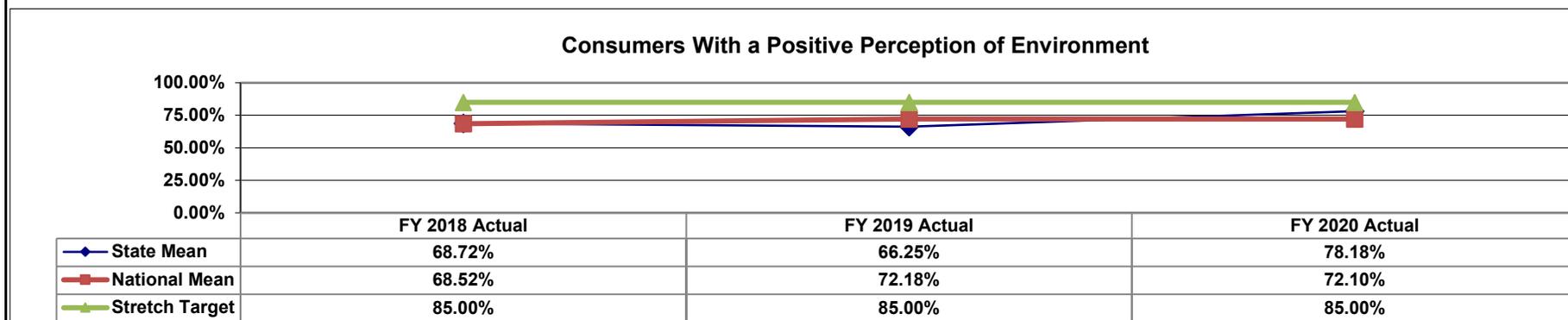
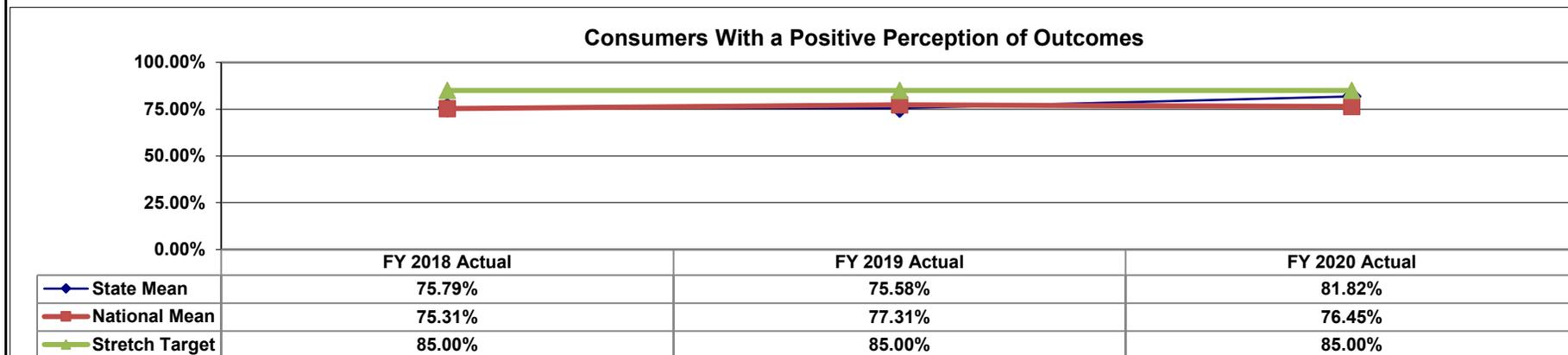


**Note:** This graph represents an unduplicated count of clients served. The decline of client count is directly associated with the increasing lengths of stay for children/youth served with a higher clinical acuity levels along with the temporary closure of beds as a result of required heating, ventilation, and air conditioning (HVAC) renovations at the facility.

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**2b. Provide a measure(s) of the program's quality.**

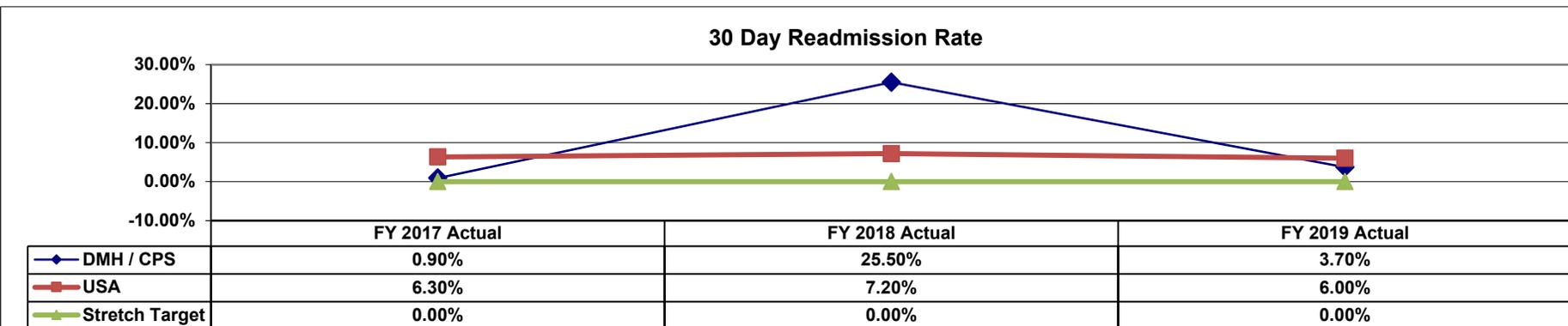


**Note:** The two graphs above represent the percent of clients at discharge or annual review who respond positively to the Client Perception of Outcomes and Facility Environment domains on the Inpatient Consumer Survey. The national mean includes all adult and children's facilities reporting. *Target: Base - Exceed national mean; Stretch - 85%*

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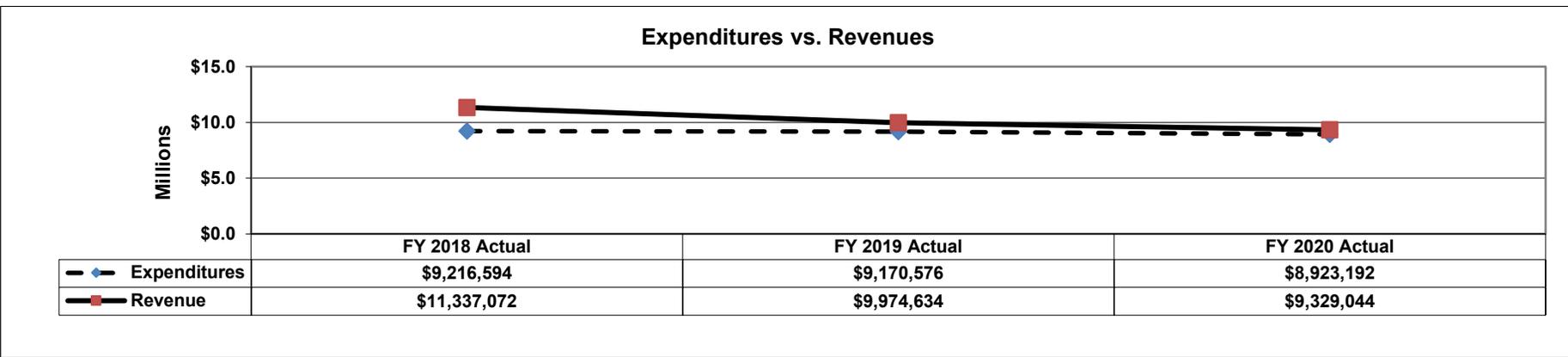
**2c. Provide a measure(s) of the program's impact.**



**Note:** Readmission rates are reported through the Uniform Reporting System (URS). URS data is only available through 2019. This graph represents the 30 day readmission rate for Missouri compared to the national average for readmission of consumers to a state hospital after 30 days. *Target: To be below the national rate. Stretch: 0%*

The large increase in readmissions for Hawthorn in FY 2018 was the result of multiple medically related hospitalizations for a small number of consumers during the reporting year. When a consumer is sent for medical treatment a discharge occurs and readmitted upon their return.

**2d. Provide a measure(s) of the program's efficiency.**



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<b>Note:</b> Revenues represent all third party reimbursements and the 60% federal reimbursement for DSH claim. Expenditures do not include fringe.	

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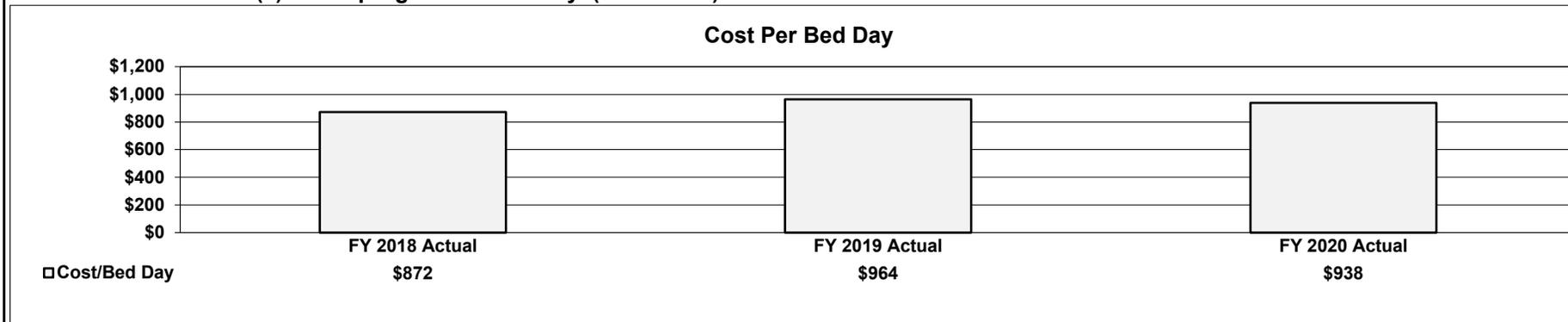
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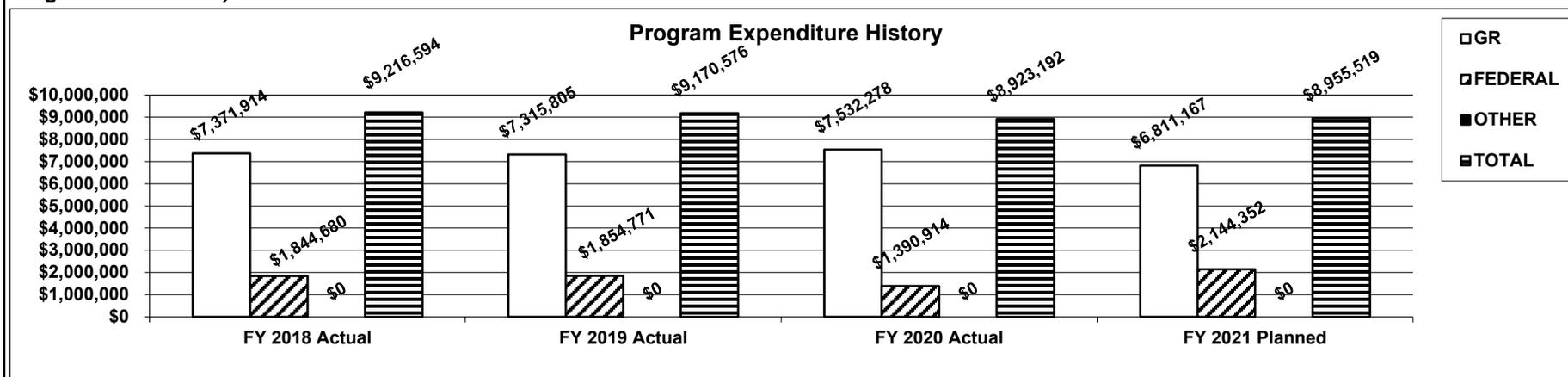
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2d. Provide a measure(s) of the program's efficiency. (Continued)



**Note:** Cost per bed day is increasing due the acuity of patients requiring higher staffing ratios and the temporary reduction in the number of beds available.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



4. What are the sources of the "Other " funds?

None.

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<b>5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)</b> Sections 632.010.1 and 632.010.2(1), RSMo.	
<b>6. Are there federal matching requirements? If yes, please explain.</b> Inpatient facilities provide General Revenue (GR) match for MO HealthNet eligible services through the certification of GR expenses - no additional match is required. Also, the cost associated with the operation of Hawthorn significantly impacts the reimbursement made by MO HealthNet under the federal disproportionate share hospital (DSH) requirements.	
<b>7. Is this a federally mandated program? If yes, please explain.</b> The federal Community Mental Health Services Block Grant requires that the state maintain an aggregate level of general revenue spending for mental health services that is greater than or equal to the average of the past two years. (This is called the "Maintenance of Effort," or MOE, requirement.) Outpatient services in the state facilities' budgets are captured in the MOE calculation.	