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PSYCHIATRIC HOSPITAL BED AVAILABILITY
IN LOS ANGELES COUNTY: SURVEY III

Ву

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LOS ANGELES COUNTY: SURVEY III

In March, 1980 a survey 1/of the shortage of psychiatric beds found 447 instances of persons denied or made to wait for needed services, primarily because of the unavailability of inpatient beds. A similar survey 2/conducted in 1981 found approximately a one-third reduction in the number of such instances enumerated. The decrease in the shortage of hospital beds was attributed to an increase in residential programs and management efforts to control bed usage, particularly length of stay. Since then, the August, 1981 one-day census 3/of Los Angeles County patients in Camarillo and Metropolitan State Hospitals found that 48% of the patients surveyed no longer needed hospitalization as compared to 66% of the patients surveyed in 1980. Thus management efforts to control hospital bed usage and the availability of alternatives to hospital beds seem to have had an effect.

Improved management of bed usage would lead to the expectation of fewer instances of bed unavailability in this year's survey. This expectation is moderated, however, by funding problems which continue to plague efforts to eliminate the shortage of inpatient beds. The State Department of Mental Health

Lubeck, S. The unavailability of psychiatric hospital beds in Los Angeles County. E & R Papers, 1980, 8 (1), County of Los Angeles Department of Mental Health. The number of instances above differs slightly from the total presented in the published report because of late reporting by some facilities.

^{2/} Waxer, E. and Fowler, G. Psychiatric hospital bed availability in Los Angeles County: Survey II. <u>E & R Papers</u>, 1981, <u>9</u> (5), County of Los Angeles Department of Mental Health.

^{3/} Duval, V. and Fowler, G. Los Angeles County mental health patients in Camarillo and Metropolitan State Hospitals: Results of the 1981 survey. E & R Papers, 1981, 9 (6), County of Los Angeles Department of Mental Health.

has demanded that Los Angeles County admissions to Camarillo be reduced by one-third and that the average bed usage at Metropolitan State Hospital not exceed an average of 690 until a budget issue has been resolved. Although Los Angeles County is currently defending a restraining order against the State, 100 beds at Camarillo have been closed down and admissions to Camarillo and Metropolitan strictly monitored in December, January and February.

In order to assess the effects of restrictions on admissions to state hospitals and continued efforts to tighten management controls over bed usage, a new survey of bed availability has been conducted. During the four-week period January 18 through February 14, 1982, all county hospital psychiatric emergency rooms as well as the Department's Crisis Evaluation Unit (CEU) at Metropolitan State Hospital and the Forensic Mental Health Unit in the County Jail were asked to document instances where persons in need of acute hospital treatment were not admitted or asked to wait for services because of the unavailability of hospital beds.

The 1982 Survey

Table 1 shows the number of individuals needing hospitalization who were denied or asked to wait for services in the 1981 and 1982 surveys. 4/ As can be seen, the direction of change in the number of persons reported between 1981 and 1982 varied by reporting unit. LAC/USC decreased by 10%, a change they attributed to monthly variation. The Forensic Mental Health Unit reported a 97% increase which was attributed largely to the closing of admissions at Camarillo and the resultant pressure on Metropolitan's capacity; and the

^{4/} Multiple reports of the same episode have been eliminated for both surveys. Also eliminated are 27 persons reported in the 1981 survey who were evaluated as needing a service other than hospitalization. All persons reported in the 1982 survey were evaluated as needing hospitalization.

Forensic Unit has significantly increased the number of cases it evaluates, with a resultant increase in the number of hospital beds requested.

Olive View reported a 74% decrease which was attributed to a more aggressive effort this year than last to stabilize and refer to non-hospital programs rather than admit to inpatient wards. They also experienced more cooperation from Camarillo in admitting patients as a result of discussions at the administrative level, and they were the only reporting unit allowed to send patients to Camarillo off and on throughout the survey period. Harbor-UCLA Medical Center interprets its 82% increase as primarily due to lack of access to Camarillo and a decrease in the availability of beds at Metropolitan. The CEU at Metropolitan State Hospital reported no instances for 1981 and 1982. Augustus Hawkins CEU reported no instances for 1982, the only year in which they participated in the survey.

The overall decrease in the number of individuals reported as needing hospitalization and turned away or asked to wait for services between 1981 and 1982 was eight percent. This change is small enough to be attributed to normal monthly variation and not to system change.

It must be noted that due to continuing hearings on state hospital bed allocations, access to beds is constantly changing for these reporting units. For example, a week after the end of the survey period, Olive View Hospital was instructed to limit the number of patients sent to Camarillo. Also, a ward at Metropolitan is being established to accept 38 more penal code patients per month, but this had not been implemented during the survey period. Thus the 1982 survey represents one month's activity in a very unstable time period.

The next question to be addressed is what happened to the 299 persons in the current study who needed but did not immediately receive inpatient treatment? Table 2 shows the reported dispositions for these individuals. For the majority of persons, 74%, a bed was eventually found, although there was a delay. Fourteen percent of the individuals were sent home or released, though needing hospitalization. For eight percent of the individuals a variety of other dispositions were reported such as the person was sent to a board and care home, was reevaluated later as no longer meeting L.P.S. criteria, or the person simply wandered away. The final disposition was unknown for four percent of the individuals.

Another aspect of disposition is the amount of time those who were eventually hospitalized had to wait for a bed. The Forensic Mental Health Unit at the County Jail reported delays ranging from one to 15 days for the 53 persons who were finally hospitalized, with 70% of these persons waiting more than one day. LAC/USC Medical Center reported that 11% of the 153 persons eventually hospitalized had to wait between eight and 11 hours, 24% waited between 12 to 23 hours, 22% waited 24 to 48 hours and eight percent waited over 48 hours. Thus the lengthy delay in attaining a bed for those in need seems to be a serious aspect of the problem.

Another topic of special interest is the potential dangerousness, to themselves or others, of individuals denied immediate treatment. Treating these as separate questions, the current survey showed that 25% of all 299 individuals reported were considered dangerous to others, 41% were considered not dangerous to others and 34% were reported as unknown. Twenty-six percent were evaluated as dangerous to self, 37% were considered not dangerous to self and 36% were reported as unknown. Combining these two items, 32 persons,

or 11% of the total, were a danger to both themselves <u>and</u> others. The potential dangerousness of the subset of 47 individuals who were released or left on their own volition is of special concern. Thirty-four percent of these persons were considered as dangerous to others. Thirty percent were evaluated as dangerous to self. Combining these two items, 6 persons, or 13% of these 47 persons, were a danger to both themselves <u>and</u> others. Thus, 24 persons who were considered potentially dangerous to self and/or others were released to the community because of a lack of beds.

Discussion and Conclusions

The results of the 1982 survey show the continued existence of a shortage of acute hospital services. If the number reported in this survey is
projected on an annual basis, then an estimated 3,887 persons in need of
inpatient hospital services will be turned away or asked to wait an inordinate
amount of time for a bed. The situation showed a definite improvement between
the 1980 and 1981 surveys but very little improvement between 1981 and 1982.

The question arises, would there have been a significant improvement reported in the 1982 survey if a disruption in admissions to Camarillo and Metropolitan had not occurred? One indication of the effect of this disruption is provided by comparing the average number of persons per day reported in the survey before and after February 5, 1982, the day Los Angeles County was granted the most recent restraining order to stop Camarillo from restricting admissions. Between January 18 and February 5th (prior to the restraining order), an average of 12.4 persons per day were reported as being denied or made to wait for services. From February 5th through February 14 (after the restraining order), an average of seven persons per day was reported. Thus the admissions policy at Camarillo seems to have a considerable effect on the number of persons in Los Angeles County who are denied or made to wait for inpatient services elsewhere.

If the state hospitals continue to reduce the number of beds available for Los Angeles County patients without increases in non-hospital beds and other community resources, the ability to provide adequate and timely services at emergency rooms can be expected to deteriorate in the future.

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Table 1. Number of individuals needing hospitalization who were denied or asked to wait for services, 1981 and 1982 surveys.

| Facility | Number of Individuals | | | | |
|---|-----------------------|------|----------|--|--|
| | 1981 | 1982 | % Change | | |
| LAC/USC Medical Center | 211 | 189 | -10% | | |
| Forensic Mental Health Unit | 37 | 73 | +97% | | |
| Olive View Hospital | 66 | 17 | -74% | | |
| Harbor-UCLA Medical Center | 11 | 20 | +82% | | |
| CEU at Metropolitan State Hospital | 0 | 0 | 0 | | |
| TOTAL for those participating in both surveys | 325 | 299 | -8% | | |
| Augustus Hawkins CEU | (none)+ | 0 | | | |

⁺ Did not report by the end of the survey period.

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Table 2. Disposition reported for those needing hospitalization, 1982 survey.

FACILITY

| Disposition | LAC/USC M.C. | | FMHU | | OLIVE VIEW | | HAI | HARBOR-UCLA | | TOTAL | |
|-----------------------------|--------------|------------|----------------|--------------------|----------------|------------------------------|----------------|--------------------|------------------|------------|--|
| | N | % | N | % | N | % | N | % | N | % | |
| Hospitalized After Delay | 153 | 81% | 53 | 73% | . 11 | 65% | 3 | 15% | 220 | 74% | |
| Sent Home/ Released | 20 | 11% | 12 | 16% | 6 | 35% | 5 | 25% | 43 | 14% | |
| Other | 7 | 4% | 7 | 10% | 0 | - | 11 | 55% | 25 | 8% | |
| Unknown | 9* 189 | 5% 101% | $\frac{1}{73}$ | 1 <u>%</u> 100% | <u>0</u> 17 | <u>-</u> 1 00% | $\frac{1}{20}$ | 5 <u>%</u> 100% | $\frac{11}{299}$ | 4% 100% | |

^{*}The request for a bed was later cancelled by outside agency, final disposition unknown.

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