South Central Regional Psychiatric Hospital Advisory Panel

Minutes

October 9, 2023 1:00-3:00 PM

Ruffin Building - 6th Floor Conference Room 100 N. Broadway, Suite 630 Wichita, KS 67202

Panel Members attending:

Scott Brunner, Deputy Secretary of Hospitals and Facilities, KDADS Sarah Lopez, Sedgwick County Commissioner, 2nd District Marc Bennett, District Attorney, Sedgwick County Rep. Will Carpenter, 75th District Jeff Easter, Sheriff, Sedgwick County Claudio Ferraro, Ascension Via Christi St. Joseph Jason Gregory, Downtown Wichita Rep. Henry Helgerson, 83rd District Mary Jones, Mental Health Association of South Central Kansas Rep. KC Ohaebosim, 89th District Sen. Usha Reddi, 22nd District Tom Stolz, County Manager, Sedgwick County LaTasha St. Arnault, HumanKind Ministries Joan Tammany, COMCARE

I. Call to Order

Scott Brunner called the meeting to order at 1pm.

II. Welcome

Pete Meitzner, Sedgwick County Commission Chair and Laura Howard, Secretary of the Kansas Department for Aging and Disability Services (KDADS), welcomed members to the initial meeting of the South Central Regional Psychiatric Hospital Advisory Panel. Secretary Howard named Scott Brunner as her representative on the Advisory Panel and Chair of the Panel. Commissioner Meitzner announced that Commissioner Sarah Lopez would serve as the Vice Chair of the Panel.

III. Introductions by Advisory Panel Members

Panel members introduced themselves and identified key questions they had about the Regional Hospital project and role of the panel. Members expressed concern about cannibalizing the existing workforce to staff the facility. There was interest in growing the workforce and working on talent initiatives. Others were interested in where the facility will be located and the impact on access to mental health services and treatment.

IV. Executive Order 23-05

Chairperson Brunner reviewed Executive Order 23-05 establishing the Advisory Panel. The Panel shall make an interim report to the Sedgwick County Commission and the Governor by January 15, 2024. The Panel shall make a final report by June 30, 2024.

The Panel is charged with four tasks: Gathering public input on the needs and location for a regional psychiatric hospital; making recommendations on workforce development needed to staff a regional psychiatric hospital; making recommendations on the operating model for the hospital; and recommending statutory changes if needed.

V. Presentation on Kansas Open Meetings Act

Sherry Diel, Chief Counsel, KDADS and Justin Waggoner, County Counselor, Sedgwick County presented on the Kansas Open Meetings Act (KOMA.) The Advisory Panel is subject to KOMA.

VI. Background Information Provided in Advance to Members

Chairperson Brunner reviewed information provided to Panel members in the document package sent electronically to Panel members. Panel members were given the opportunity to ask questions about the materials.

Senator Reddi asked about the number of psychiatric beds in Kansas that are for voluntary versus involuntary commitment. Chairperson Brunner noted that State Hospital beds are all involuntary. State hospitals can admit voluntary patients, but once hospitals are at or above 85 percent capacity, they can only admit involuntary. Private psychiatric hospitals admit voluntary patients.

Mr. Gregory asked about how the number of 50 beds with expansion to 100 was determined. Chairperson Brunner noted that from the state's perspective, 50 was approximately the number of admissions from Sedgwick County and surrounding counties, both for care and treatment and forensic evaluation annually.

Representative Carpenter asked for Chairperson Brunner to explain State Institutional Alternative (SIA) beds for the Panel. SIA is an initiative to add options for state hospital level of care by partnering with community hospitals that have psych beds and ask them to admit patients that meet state hospital levels of care. Senator Reddi asked about payment for SIA beds including billing a patient's private insurance. Chairperson Brunner stated that KDADS does not examine ability to pay or the availability of payment source during screening. SIA is a Medicaid service so hospitals can bill the managed care organizations if a patient is Medicaid eligible. If a patient is uninsured, KDADS uses state funds to pay the daily rate. Senator Reddi asked for a data on those costs.

Follow-up from KDADS: FY 2024 projected costs are \$10.4 million for adults utilizing SIA beds. The rate is about \$1170 per patient day.

VII. Presentation on Building Project Award, Website for Prospective Bidders

Lindsay Poe Rousseau, Sedgwick County Chief Financial Officer, provided a briefing on the County's compliance approach for the use of American Rescue Plan Act (ARPA) funds. For the regional hospital project, the procurement activities are structured to ensure open and equal access to this project. The County has a website with <u>ARPA information including details about</u> this <u>project</u>. Poe-Rousseau indicated that if any vendor got inside information, that would bar them from competing as a vendor.

Poe-Rousseau highlighted that obligations and contracts for the ARPA funding must be entered by December 31, 2024 and funds must be expended by December 31, 2026.

VIII. Updates and next steps from Sedgwick County on the Hospital Project

Tania Cole, Sedgwick County Assistant County Manager gave an update on the project. She indicated that the preliminary design and construction team includes staff from KDADS, Sedgwick County, and architects from GMLV and Pulse Design Group.

Cole presented a schematic design of the hospital floor plan and the project timeline, noting the design and construction RFPs and completion date.

Representative Carpenter requested that the Panel look at what other states have built, what has worked well operationally and administratively.

Mr. Gregory asked what other considerations there are about finding a location for the regional hospital. Cole stated that it would be important to look at vacant land or land with existing buildings that meets the project parameters. Cole noted that the next two steps for the County are to put out an RFP for design development and construction design, as well as working with an on-call realtor to look at properties and existing buildings.

Ms. Tammany expressed concern about the timeline and ability to get input back.

Ms. St. Arnault asked if the County could provide an RFP template to the Panel.

Mr. Bennett noted that the Panel can make recommendations but does not have final approval for the project. Chairperson Brunner noted that it will be important to know what are considered locations or factors that would be completely unacceptable to the community. Representative Carpenter indicated that it would be cost prohibitive to remodel something.

The Panel discussed the number of defendants waiting in the Sedgwick County Jail for competency evaluation or treatment. Sheriff Easter indicated there are currently 26, longest has been waiting for 467 days. Sheriff Easter was interested in the design of the criminal patient unit given the need for security and anti-ligature fixtures and how much staffing will be involved. Panel member Bennett indicated there were 55 competency cases in 2012, 158 last year but the volume of care and treatment cases was lower because of expanded community services.

IX. Future Meetings

Chairperson Brunner proposed November 6 and December 11 for the next two meetings. Panel members are to let him know if those dates will work. Brunner mentioned the possibility of holding a

separate meeting to gather public input. He also indicated that a facilitator has been engaged to assist the Panel.

Representative Helgerson asked about the timeframe for announcing a location. Ms. Cole indicated that the location and design RFP could be finalized by the end of the year or early in 2024.

Sheriff Easter encouraged engaging the Sedgwick County Substance Abuse and Mental Health Coalition group as they are stakeholders that meet with the County and could get together a meeting fairly quickly.

Discussion was had on what topics would be covered by Subpanels. Suggestions included: Workforce, Law Enforcement, Business community and health care industry perspectives, Design, and Operations.

X. Adjourn

The panel adjourned at 3:05 PM.

November 6 meeting: Approved with correction by Sheriff Easter regarding longest wait time length to 467 days (originally incorrectly notated as 186 days in the minutes).