

# **Increased Utilization of State Hospitals from Fiscal Year 2017 to 2018**

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## Summary

Over the past three years, temporary detention order (TDO) admissions to state psychiatric hospitals have been on the rise in Virginia. The current report focuses on increases in TDO admissions to state hospitals from the first half of fiscal year 2017 to the first half of fiscal year 2018. Fiscal year 2018 saw the greatest increase in TDOs to state hospitals in recent history, largely the result of reduced TDO admissions to private hospitals.

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## **I. Data Sources**

Information on TDOs for was provided by the Supreme Court of Virginia, for years 2007-2017. Virginia Department of Behavioral Health and Developmental Services (DBHDS) provided data on TDO admissions to state hospitals for fiscal years 2012-2018. The DBHDS fiscal year begins on July 1 and ends on June 30.

## **II. Contribution of Specific Localities to State Hospital TDO Admissions**

Table 1 depicts the contribution of specific localities to the overall statewide trends in TDOs between the first half of fiscal year 2017 and the first half of fiscal year 2018 and to the increase of TDO admissions to state hospitals. Localities in this table refer to the CSBs recommending the issuance of the TDO. It is important to keep in mind, however, that the CSB recommendation for the TDO is only one variable in the sequence of decisions leading to admission to a state hospital. The other key variable is the collective inability or unwillingness of private hospitals contacted by the CSB to admit the person.

In Table 1, an overall increase in TDOs is defined as an increase from fiscal year 2017 to 2018 of greater than 13%. An increase in state hospital TDOs is defined as an increase from 2017 to 2018 of at least 15 admissions per half year. The 18 CSBs with an increase of at least 15 admissions per half year account for 94% of the increase in state hospital TDO admissions statewide. We have categorized the different patterns of TDO admissions as follows:

- Category 1 shows those CSBs that have increased their TDO admissions to state hospitals in tandem with an overall rise in TDOs.
- Category 2 lists those CSBs that have increased their TDO admissions to state hospitals in spite of no permanent increase in TDOs overall, although some have seen temporary increases that have since been resolved.
- Category 3 lists those CSBs that have seen an increase in TDOs that has not impacted the state hospitals.
- Category 4 lists CSBs that have not experienced either an increase in overall TDOs or an increase in TDOs to state hospitals.

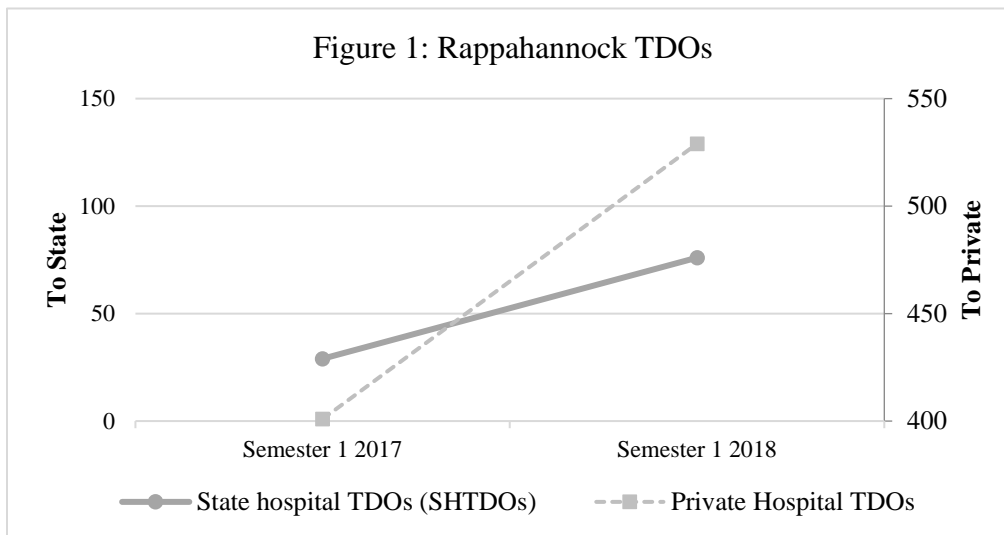
Table 1: TDOs to state hospitals versus changes in overall TDOs	
Category	CSBs (% of statewide increase in state hospital admissions attributable to specific CSB)
1) Overall Increase in TDOs and in TDOs to State Hospitals	Rappahannock (6%) Arlington (6%) Henrico (3%)
2) Increase in TDOs to State Hospitals without a substantial overall increase in TDOs	Richmond (12%) Fairfax-Falls Church (12%) Prince William (11%) Blue Ridge (8%) Piedmont (6%) District 19 (5%) Horizon (3%) Hampton-Newport News (3%) Region 10 (3%) Valley (3%) Northwestern (3%) Chesterfield (3%) Rappahannock-Rapidan (3%) Crossroads (2%) Virginia Beach (2%)
3) Overall Increase in TDOs, without a substantial increase in TDOs to State Hospitals	Cumberland Mountain (1%) Hanover (1%) Portsmouth (<1%) Planning District 1 (0%) Eastern Shore (<0%)
4) No substantial overall increase in TDOs or in TDOs to State Hospitals	Alexandria (2%) Middle Peninsula-Northern Neck (2%) Norfolk (1%) Colonial (1%) Harrisonburg-Rockingham (1%) Chesapeake (1%) Western Tidewater (1%) Loudoun (1%) Dickenson (<1%) New River Valley (<1%) Rockbridge (0%) Southside (0%) Alleghany-Highlands (<0%) Goochland-Powhatan (<0%) Highlands (-1%) Danville-Pittsylvania (-2%) Mount Rogers (-2%)

### III. CSBs with Increases in Overall TDOs and TDOs to State Hospitals (Category 1)

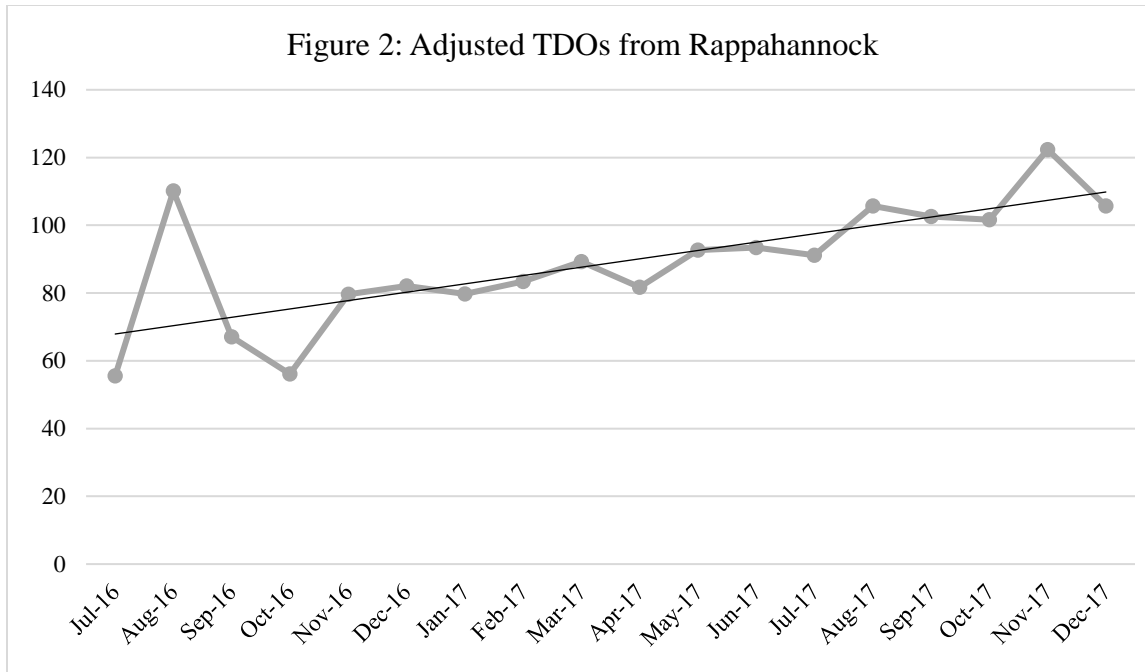
Table 1 showed that **three CSBs have seen an increase in TDO admissions to state hospitals in tandem with an increase in TDOs overall**. This section describes trends in each of those CSB catchment areas individually. A graph is provided of annual changes in TDO admissions to state hospitals recommended by prescreeners from the indicated CSB. Seasonally adjusted TDOs are also described. Seasonal adjustment allows for the observation of short-term changes, without interference from ordinary seasonal variation. In all three of these CSBs, TDO admissions to private hospitals have increased in absolute numbers. In Rappahannock Area, this increase has been dramatic, but not enough to compensate for the overall increase in TDOs.

#### A. Rappahannock Area CSB

Figure 1 shows TDO admissions to state hospitals from Rappahannock CSB. There were 29 more admissions, counting all ages, in the first semester of 2018 than the first semester of 2017. The percent of TDOs sent to state hospitals increased from 7% to 13%.

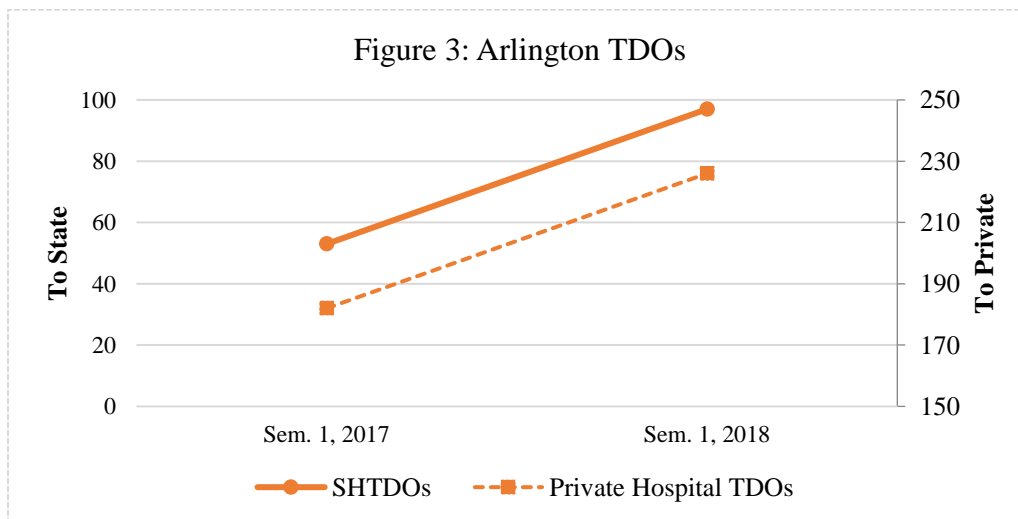


From fiscal years 2017 to 2018, TDOs from Rappahannock rose 35%, from 430 to 605. Figure 2 shows seasonally adjusted TDOs. After some unusual fluctuations, TDOs stabilized at a somewhat higher level in late fall of 2016, and then began to increase again in the spring of 2017. It is not clear whether or not TDOs from Rappahannock have stabilized yet.

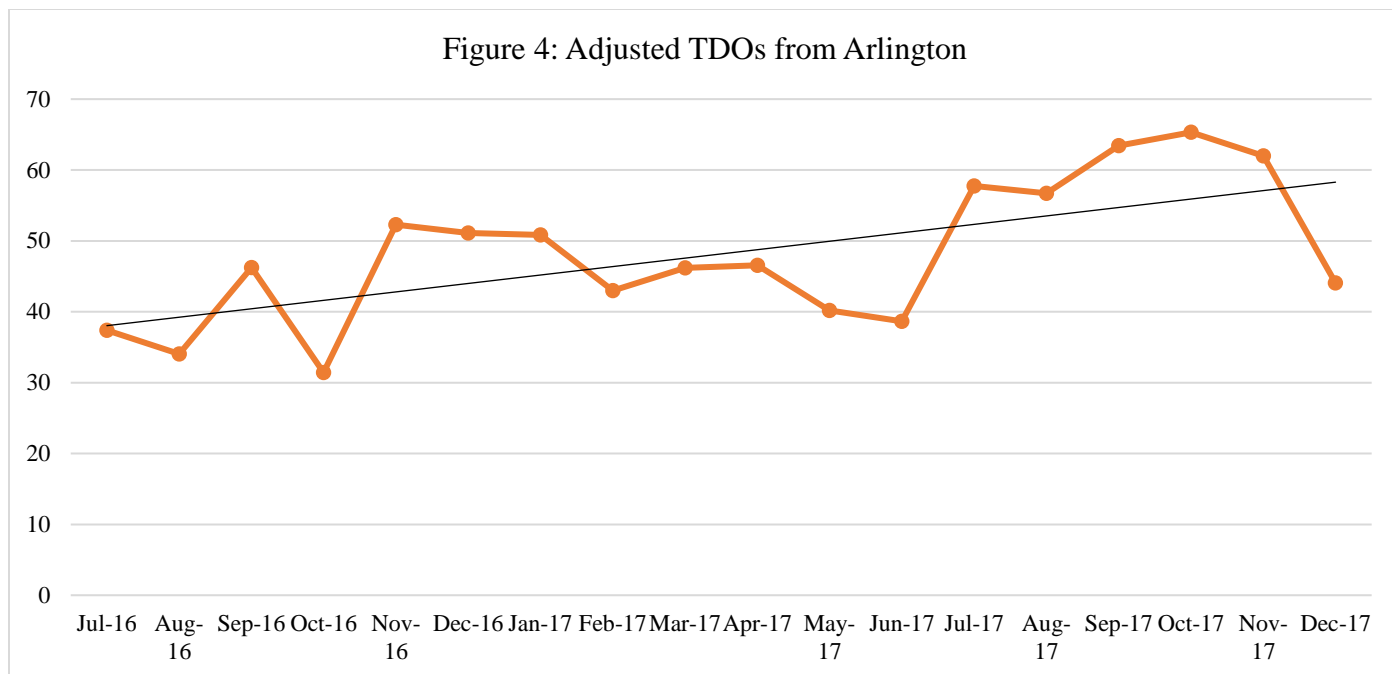


### B. Arlington County CSB

Figure 3 shows TDO admissions to state hospitals out of Arlington County. There were 44 more admissions in 2018 than 2017. In that time, the percent of TDOs that were admitted to state hospitals rose from 12% to 17%.

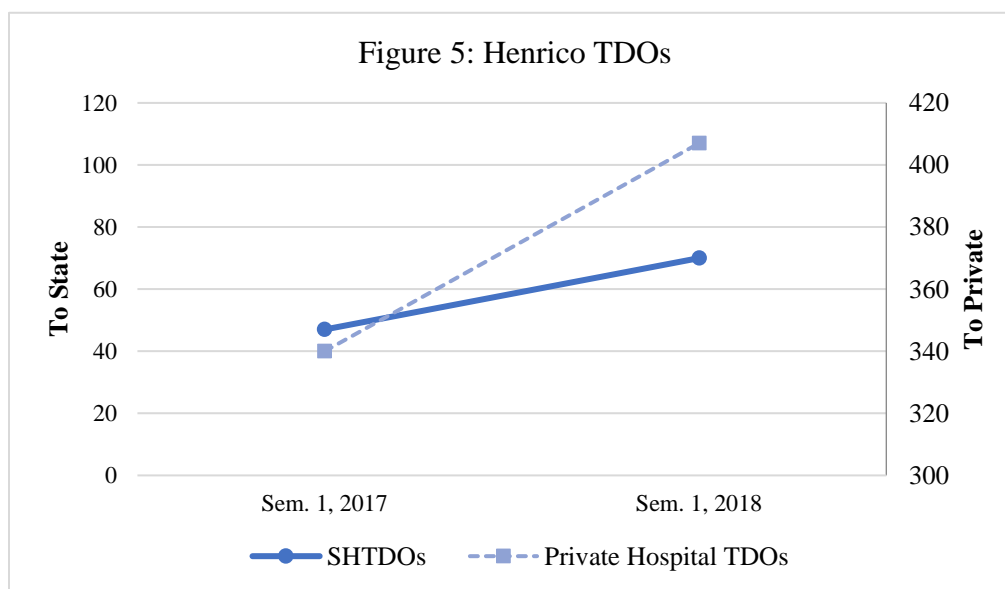


From fiscal years 2017 to 2018, TDOs from Arlington rose 17%, from 385 to 450. There was an increase from summer into fall of 2016, followed by a partial decline in late winter (Figure 4). There was another, even greater increase in the summer of 2017.

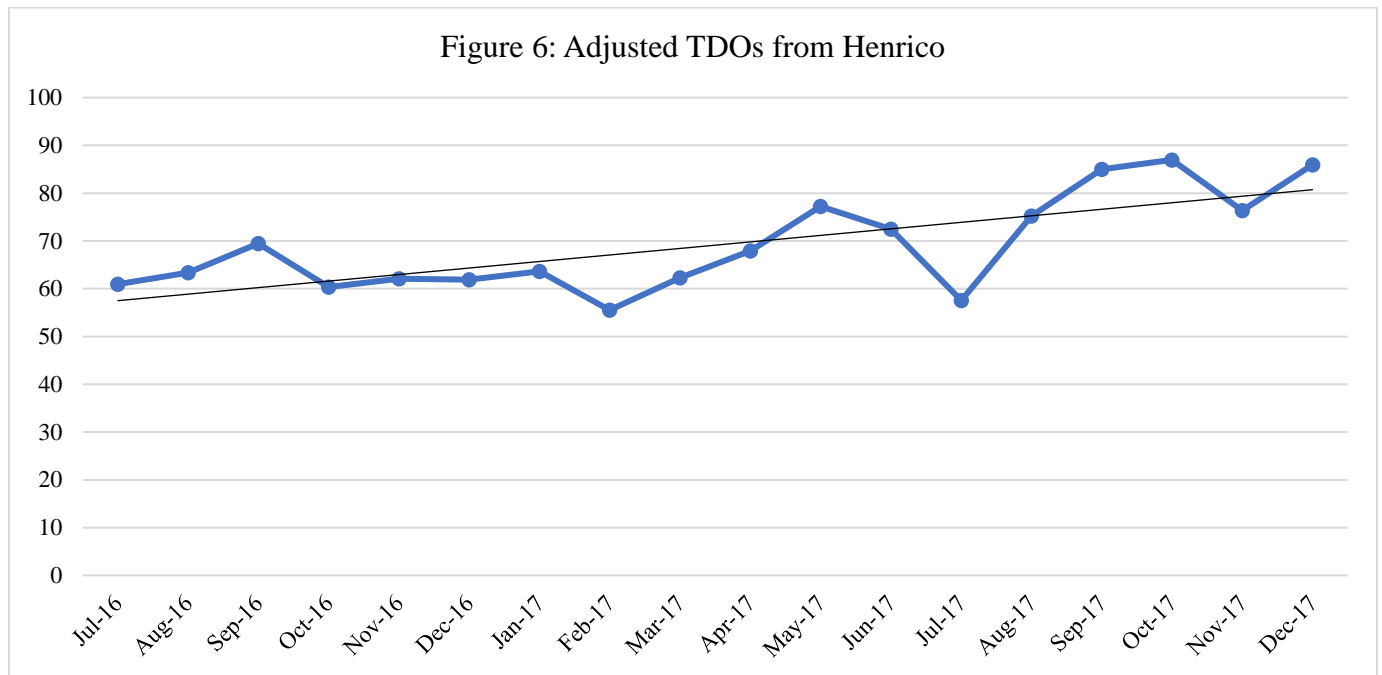


### C. Henrico Mental Health and Developmental Services

Figure 5 shows adult TDO admissions to state hospitals from Henrico. There were 23 more admissions in 2017 than in 2018. The percent of TDOs admitted to state hospitals increased from 10% to 15%.



From fiscal years 2017 to 2018, TDOs from Henrico rose 23%, from 387 to 477. Seasonally adjusted TDOs began to increase in the spring of 2017 (Figure 6). They now appear to have stabilized around 85 TDOs per month.



### **CSBs with Increased TDOs to State Hospitals without Overall TDO Increase (Category 2)**

**In 15 CSBs, TDO admissions to state hospitals increased from 2017 to 2018 without an accompanying increase in TDOs.** When an increase in state hospital admissions is not accompanied by an overall increase in TDOs, this usually reflects a decline in private hospital TDO admissions.

Figure 7 shows TDO admissions from Richmond to state hospitals. There were 97 more admissions in 2018 than in 2017. The percent of TDOs that were admitted to state hospitals rose from 6% to 16%, across the period.

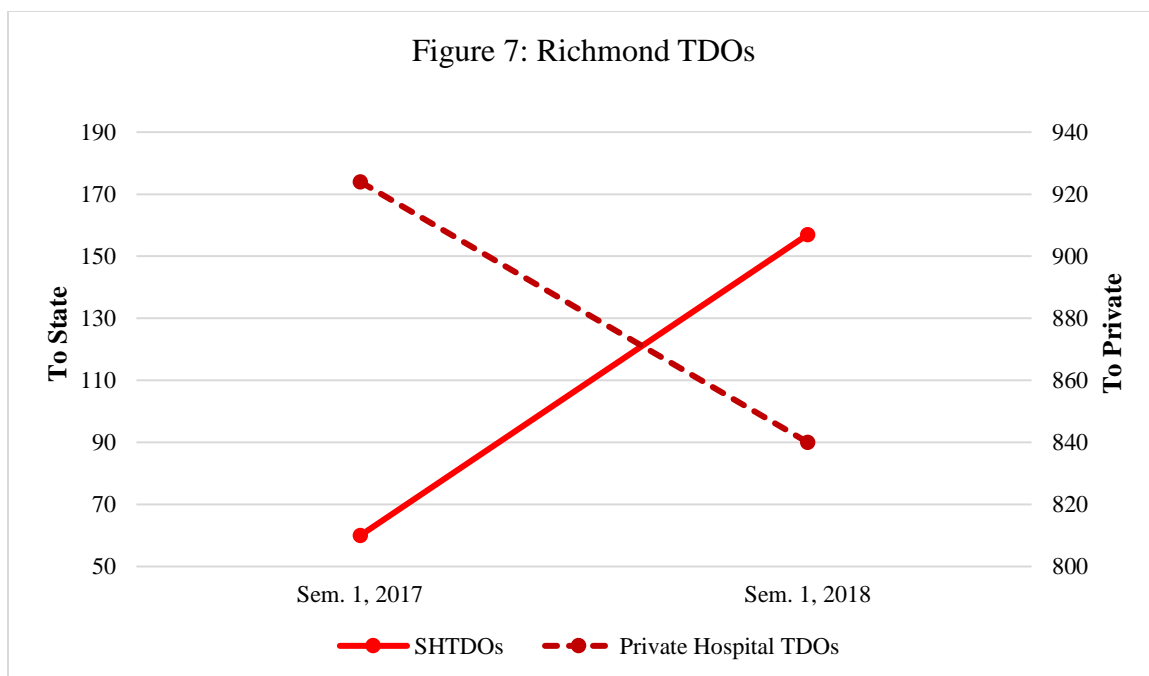


Figure 8 shows TDO admissions from Fairfax-Falls Church CSB to state hospitals. There were 92 more admissions in 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 12% to 25%.

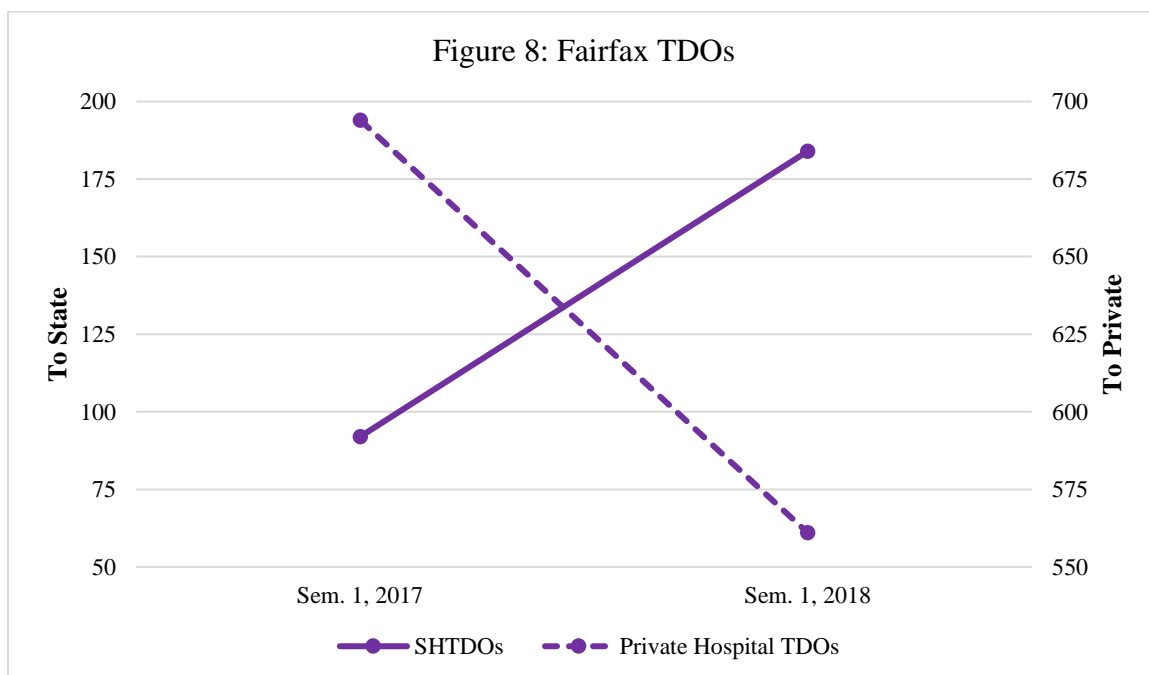


Figure 9 shows TDO admissions from Prince William County Community Services to state hospitals. There were 86 more admissions in 2017 than 2018. The percent of TDOs that were admitted to state hospitals increased from 23% to 35%.

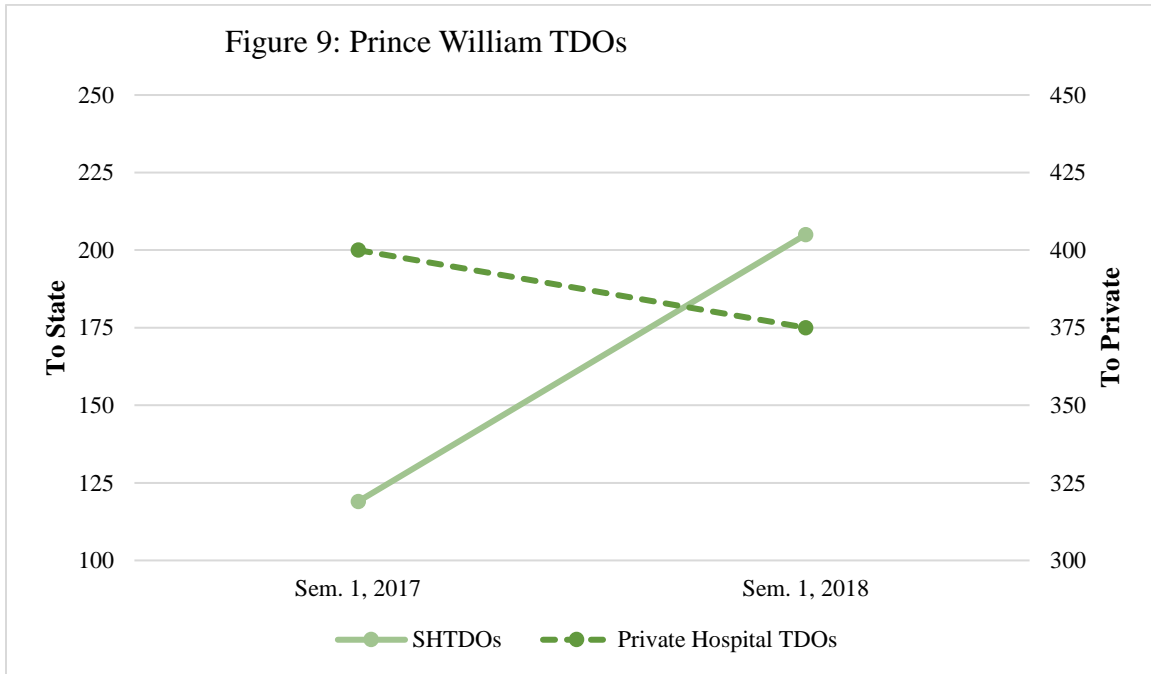


Figure 10 shows TDO admissions from Blue Ridge Behavioral Healthcare. There were 65 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals increased from 21% to 30%.

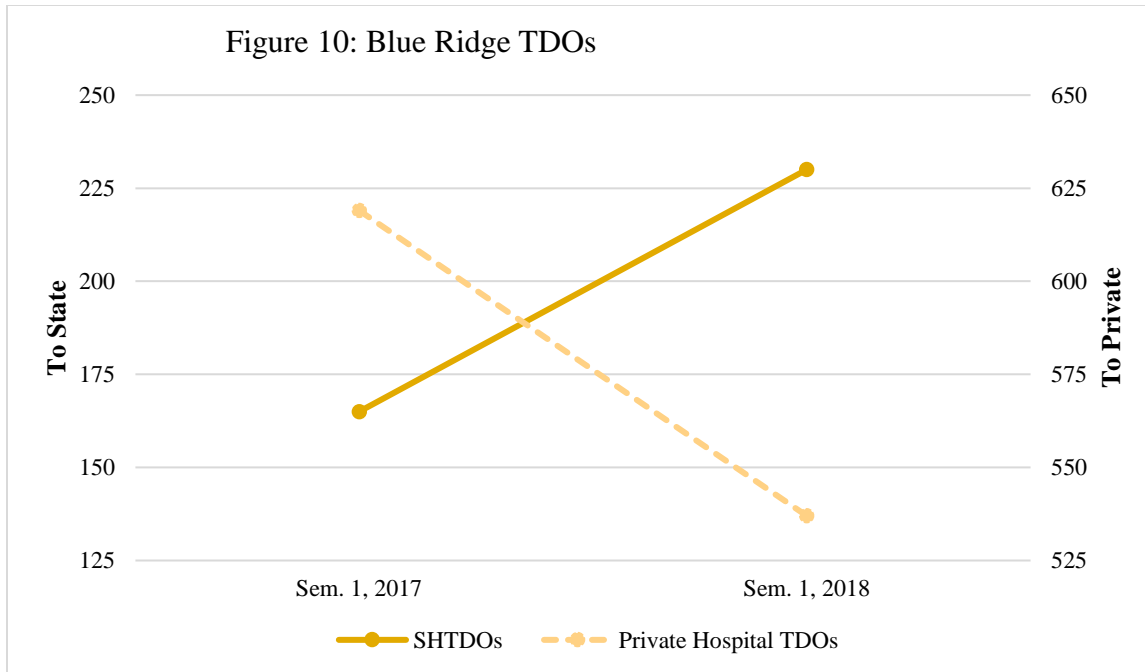


Figure 11 shows TDO admissions from Piedmont CSB to state hospitals. There were 48 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 16% to 29%.

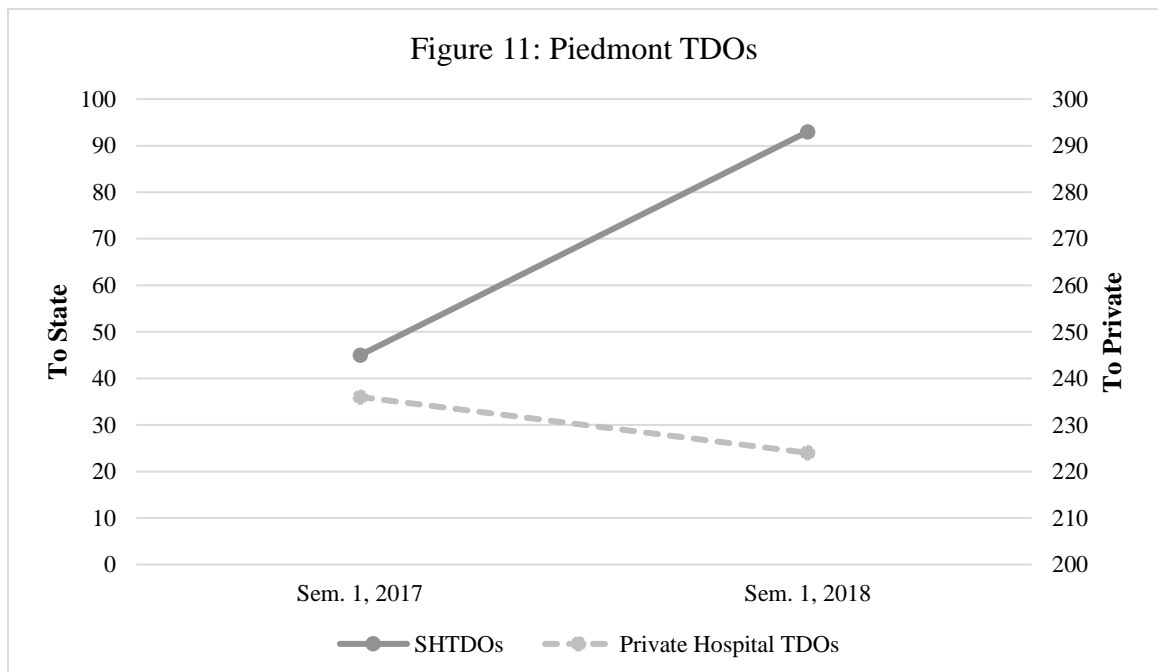


Figure 12 shows TDO admissions from District 19 CSB to state hospitals. There were 41 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 8% to 17%.

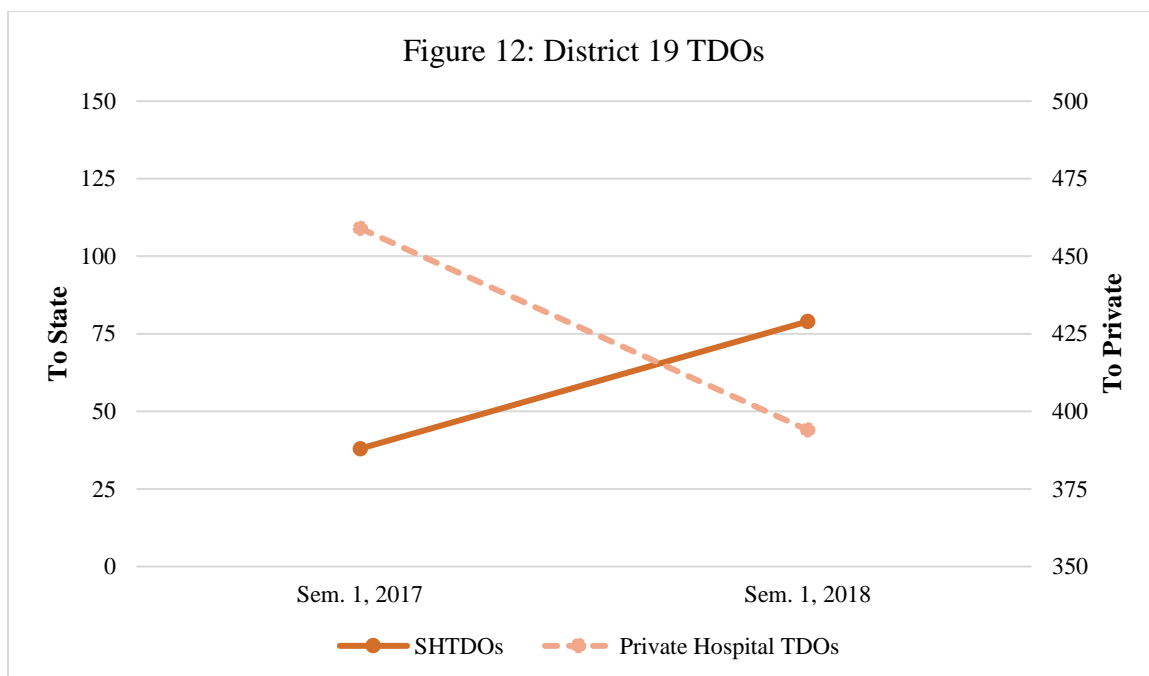


Figure 13 shows TDO admissions from Horizon CSB to state hospitals. There were 27 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 9% to 17%.

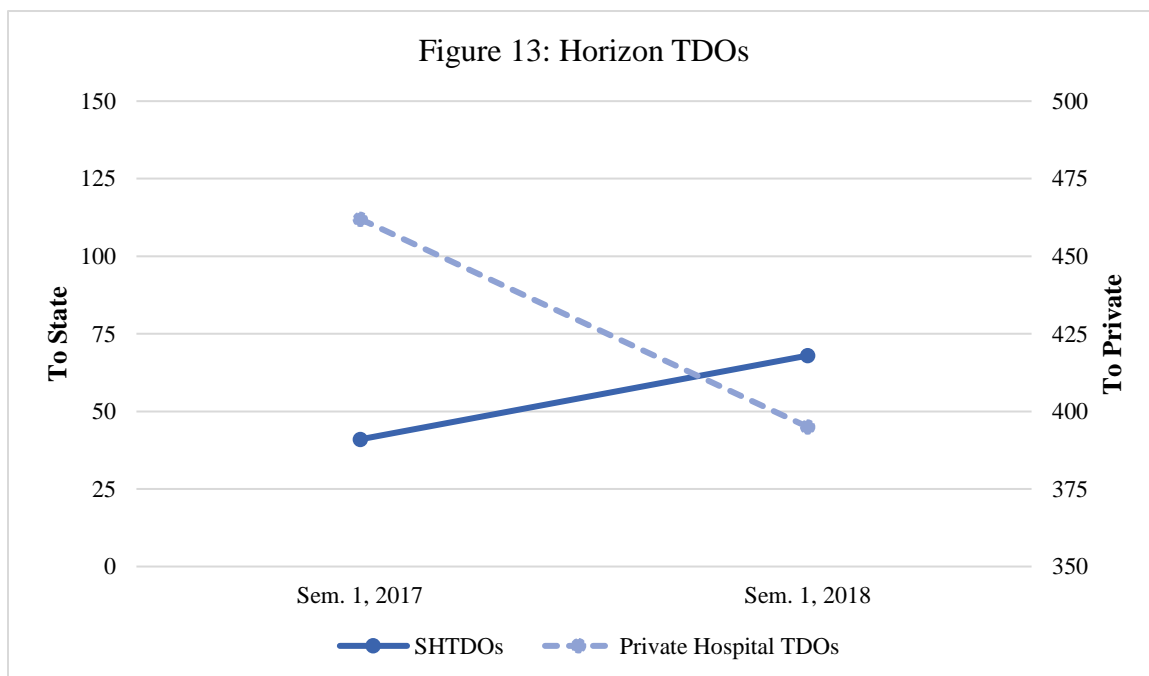


Figure 14 shows TDO admissions from Hampton-Newport News CSB to state hospitals. There were 26 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 4% to 7%.

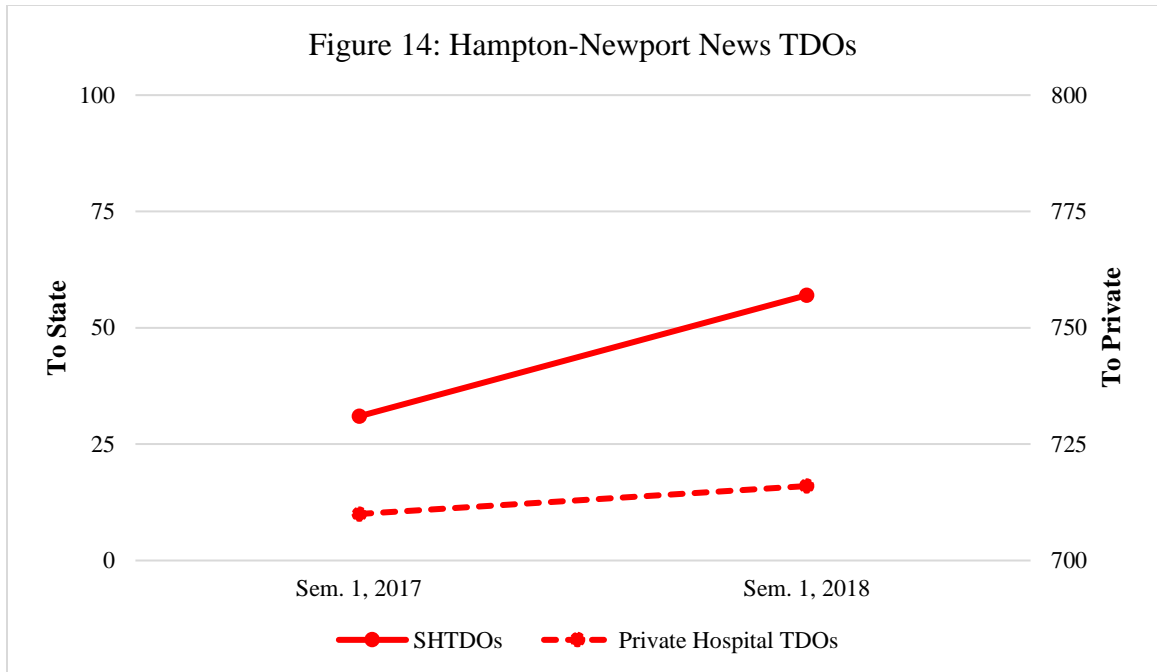


Figure 15 shows TDO admissions from Region 10 CSB to state hospitals. There were 24 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 13% to 20%.

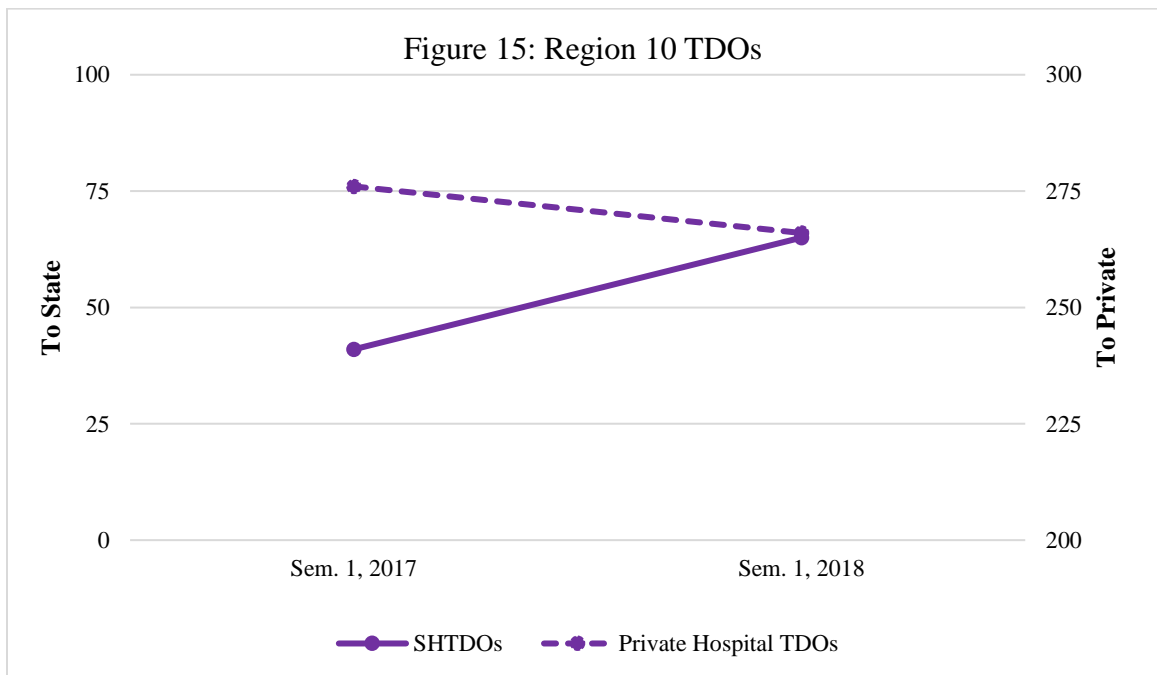


Figure 16 shows TDO admissions from Valley CSB to state hospitals. There were 24 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 19% to 29%.

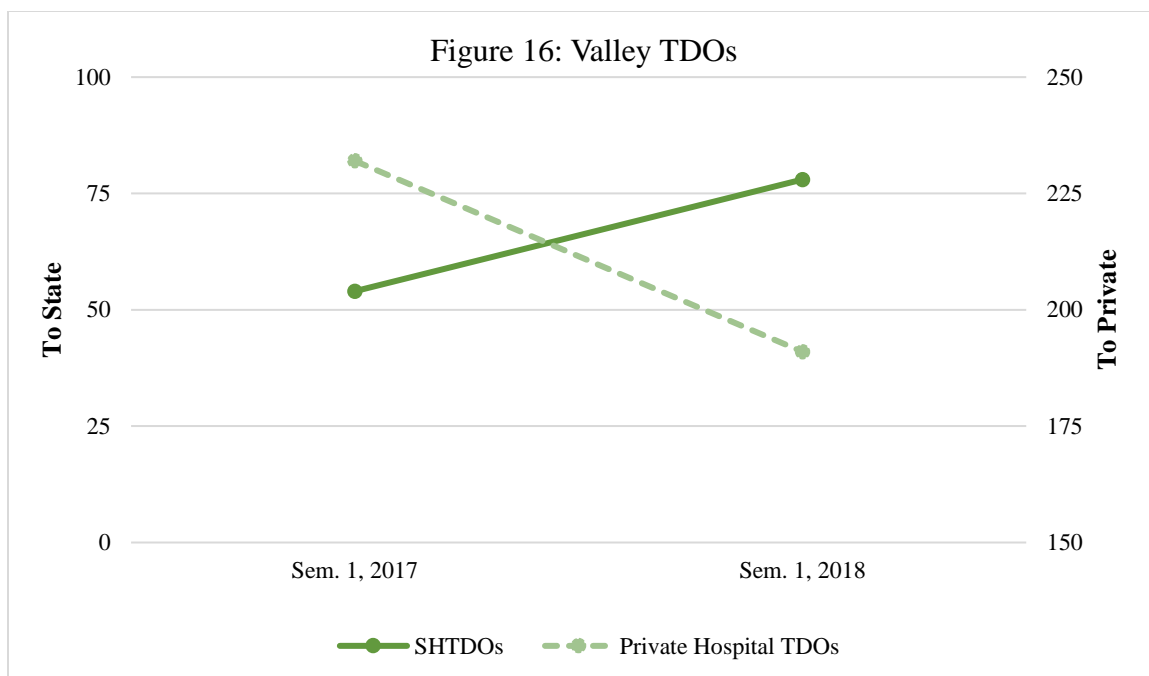


Figure 17 shows TDO admissions from Northwestern CSB to state hospitals. There were 22 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 18% to 26%.

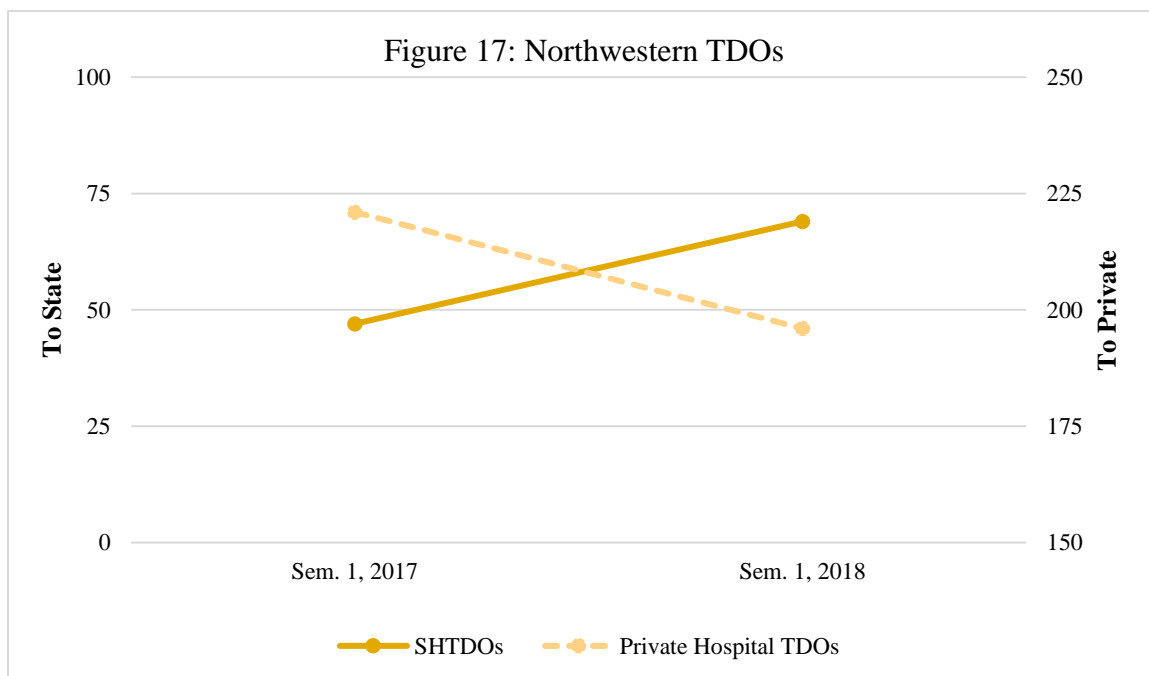


Figure 18 shows TDO admissions from Chesterfield Mental Health Support Services to state hospitals. There were 21 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 6% to 17%.

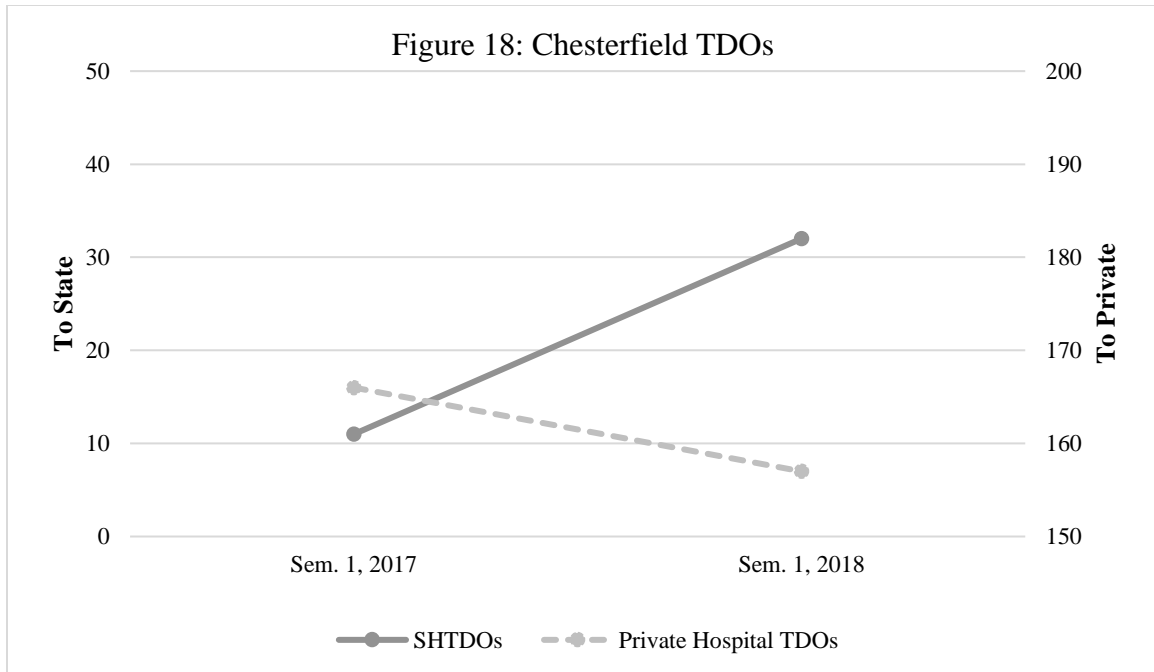


Figure 19 shows TDO admissions from Rappahannock-Rapidan Community Services to state hospitals. There were 21 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 8% to 24%.

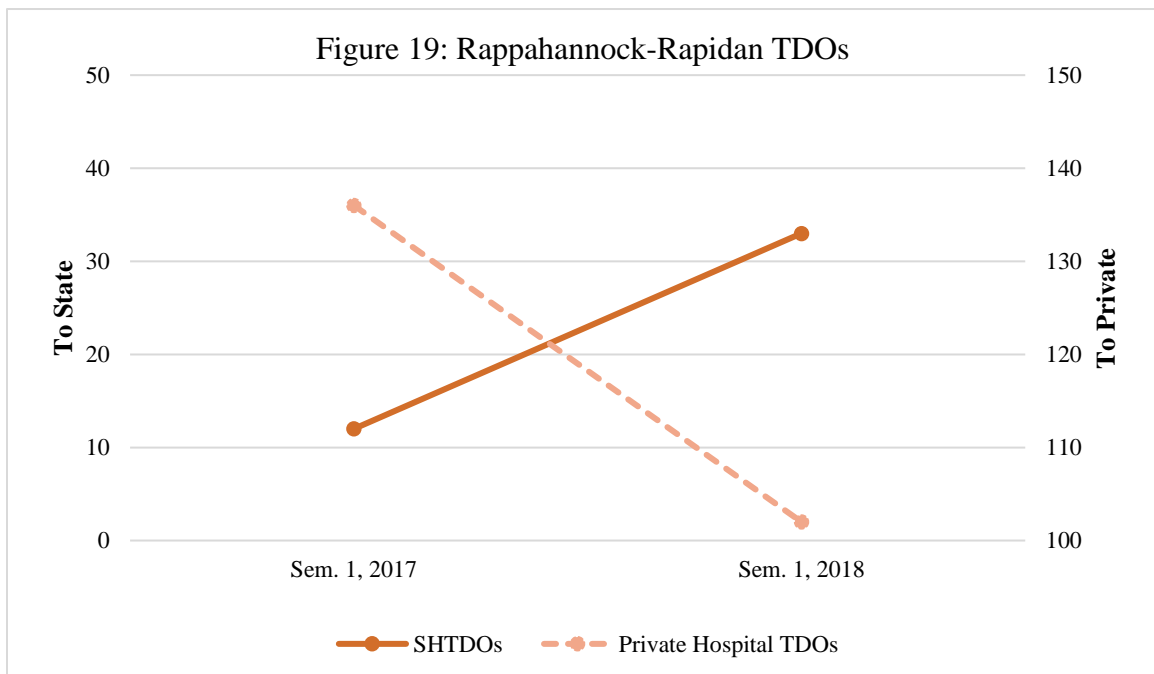


Figure 20 shows TDO admissions from Crossroads CSB to state hospitals. There were 16 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 8% to 27%.

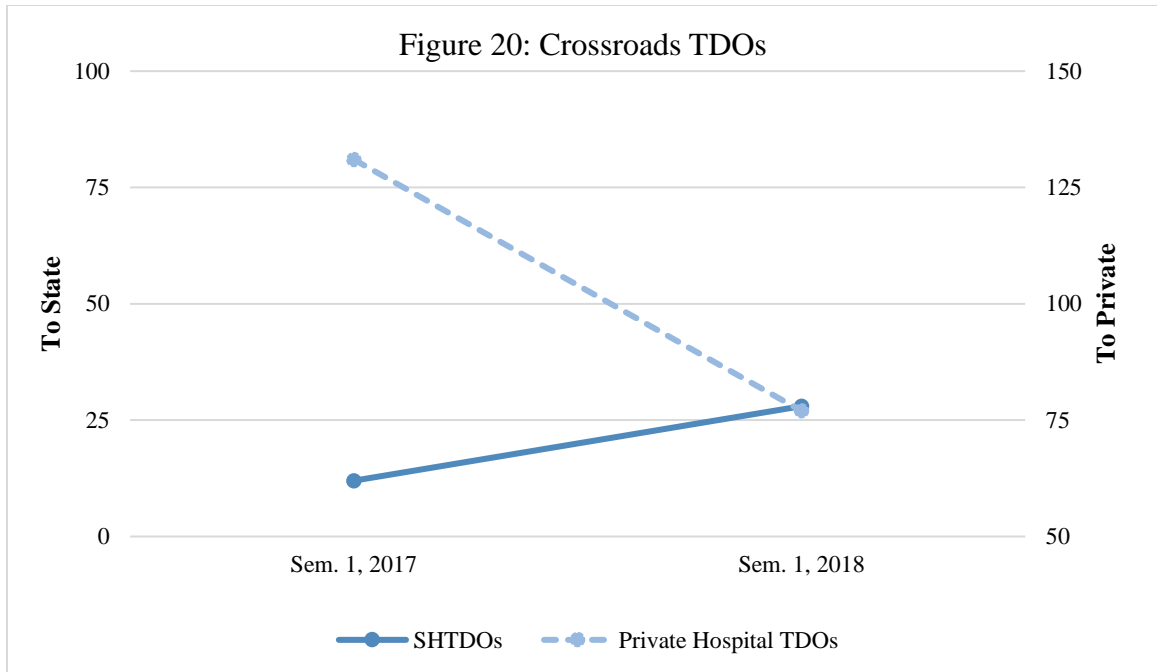
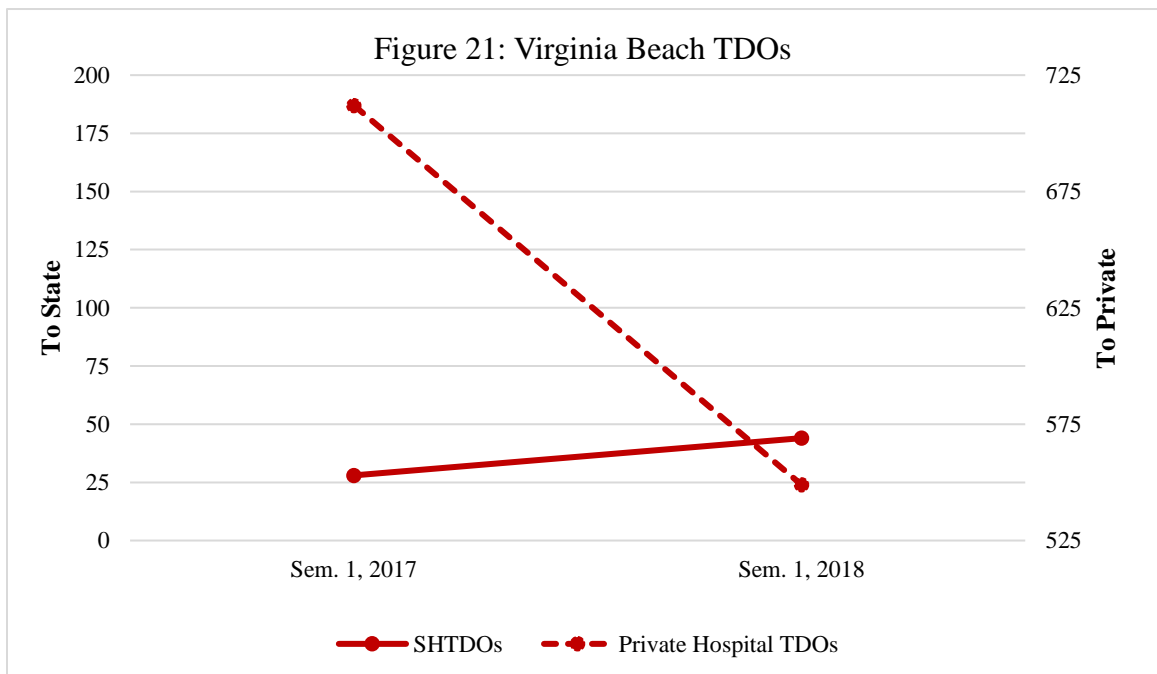


Figure 21 shows TDO admissions from Virginia Beach to state hospitals. There were 16 more admissions in fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals rose from 4% to 7%.

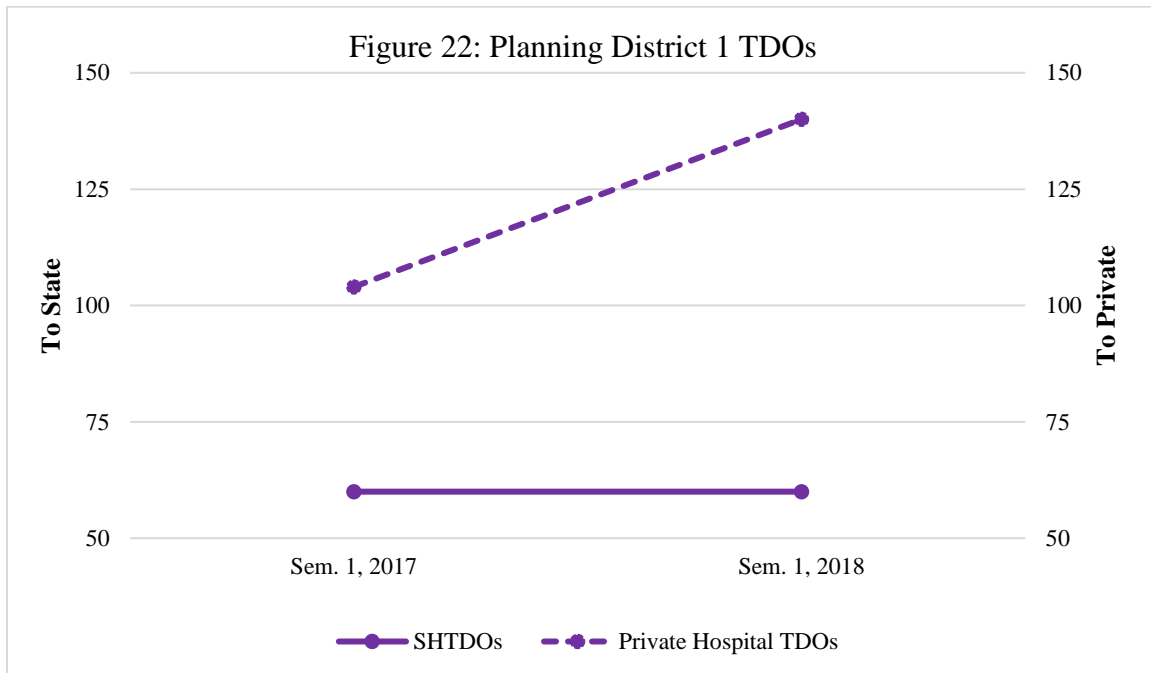


## V. CSBs with Increased TDOs, without an Increase in TDOs to State Hospitals (Category 3)

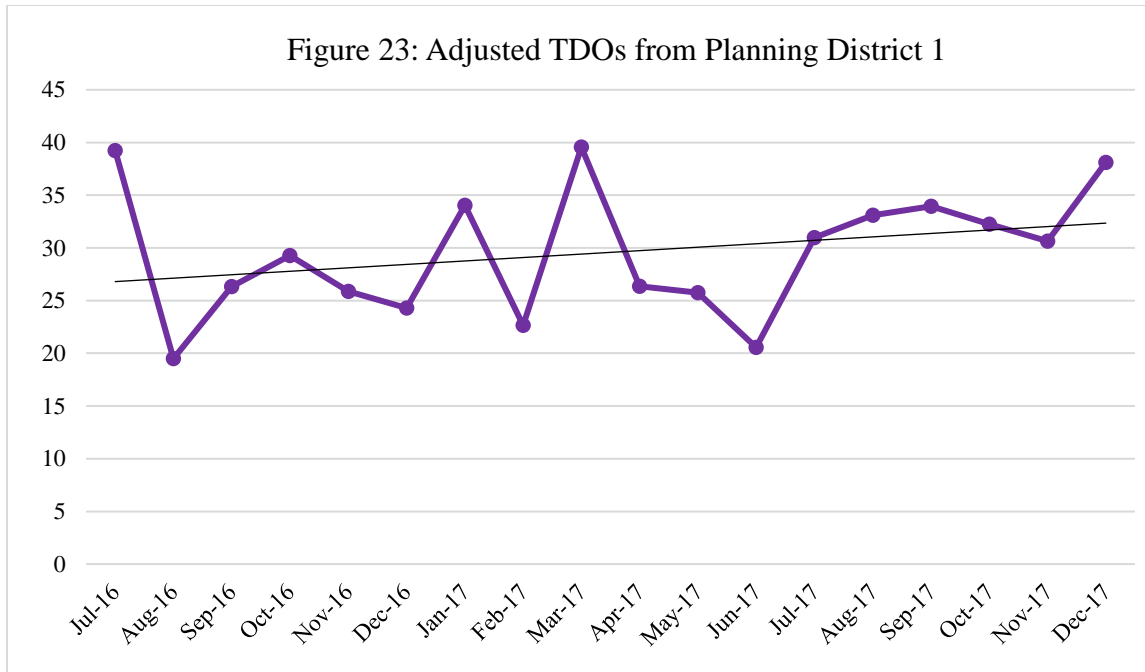
There were five CSBs that did not experience a sizable increase in state hospital TDO admissions, in spite of a marked increase in TDOs overall. Where this is the case, the increase in TDOs has been absorbed by private psychiatric facilities. The following charts demonstrate the increases in TDOs for each CSB, as well as the lack of change in TDOs to state hospitals. Information related to each CSB is presented in descending order of the number of TDO admissions to state hospitals in fiscal year 2017.

### F. Planning District 1 Behavioral Health Services

Figure 22 shows TDO admissions from Planning District 1 to state hospitals. There number of state hospital admissions was unchanged from fiscal year 2017 than 2018. The percent of TDOs that were admitted to state hospitals declined from 37% to 30%. This decline may have been the result of a 7% decrease in TDOs overall in the Southwestern MHI catchment area, which could have reduced competition for private beds in that area.

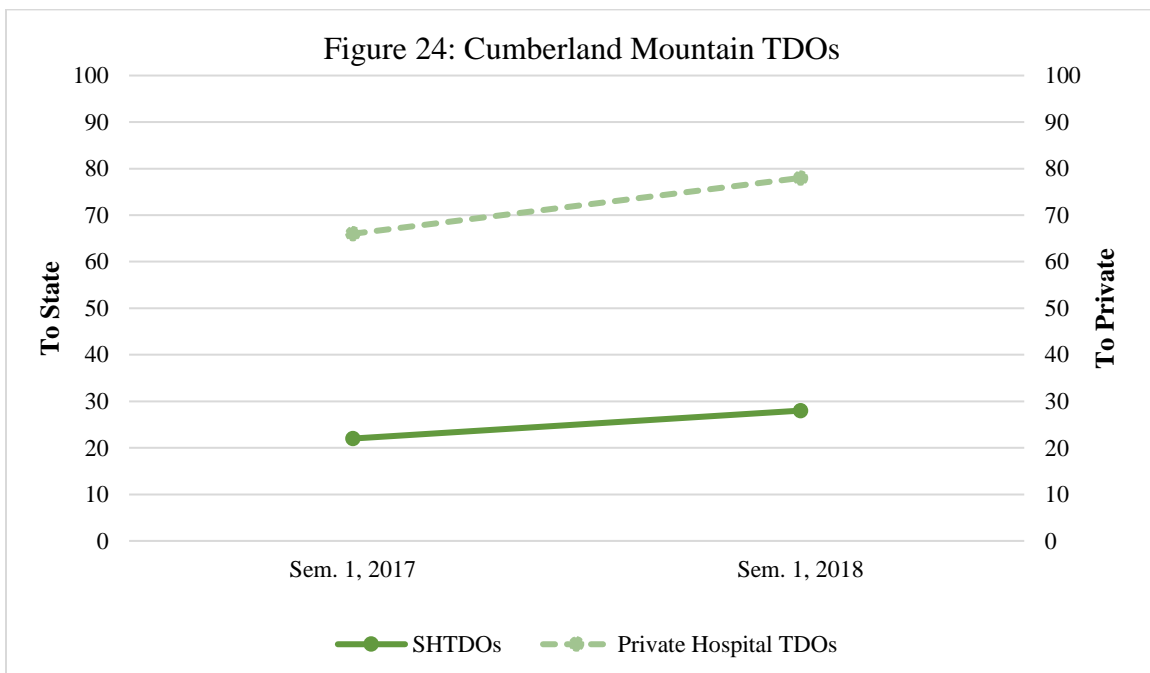


From the first half of fiscal year 2017 to the first half of 2018, TDOs from Planning District 1 rose 21%, from 164 to 200. Figure 23 shows seasonally adjusted TDOs. Although dramatic monthly fluctuations were typical for Planning District 1, TDOs stabilized to a new, higher level in the summer of 2017.

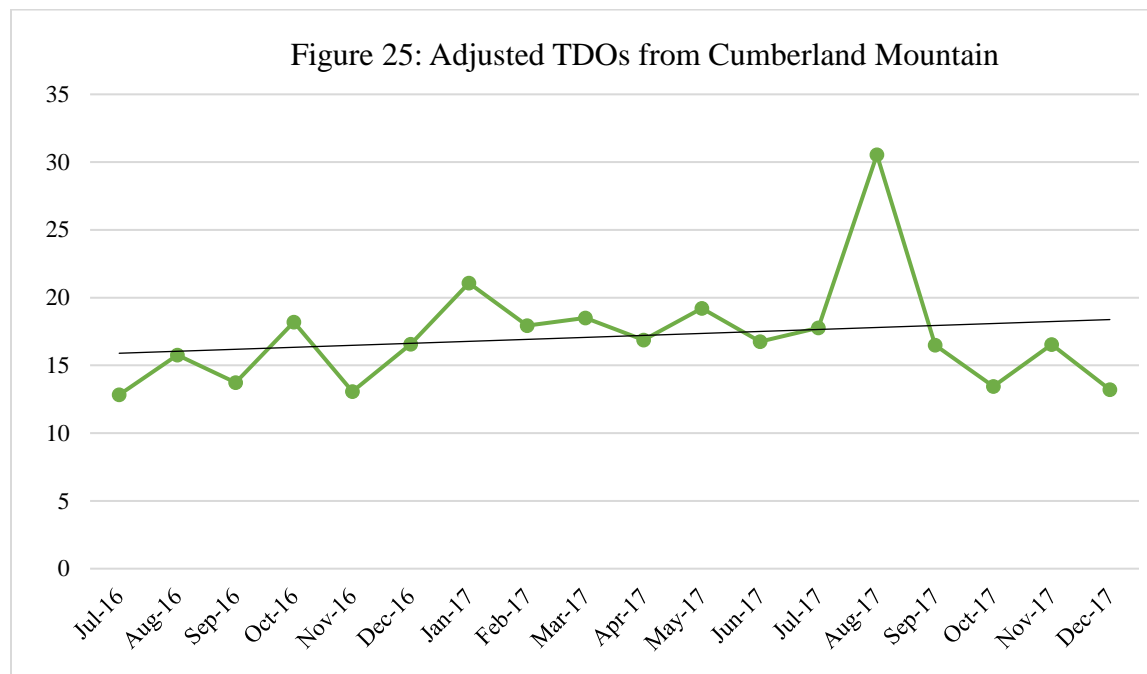


#### G. Cumberland Mountain CSB

Figure 24 shows TDO admissions from Cumberland Mountain CSB to state hospitals. There were only six more admissions in 2017 than there were in 2018. The percent of TDOs that were admitted to state hospitals rose slightly from 25% to 26%.

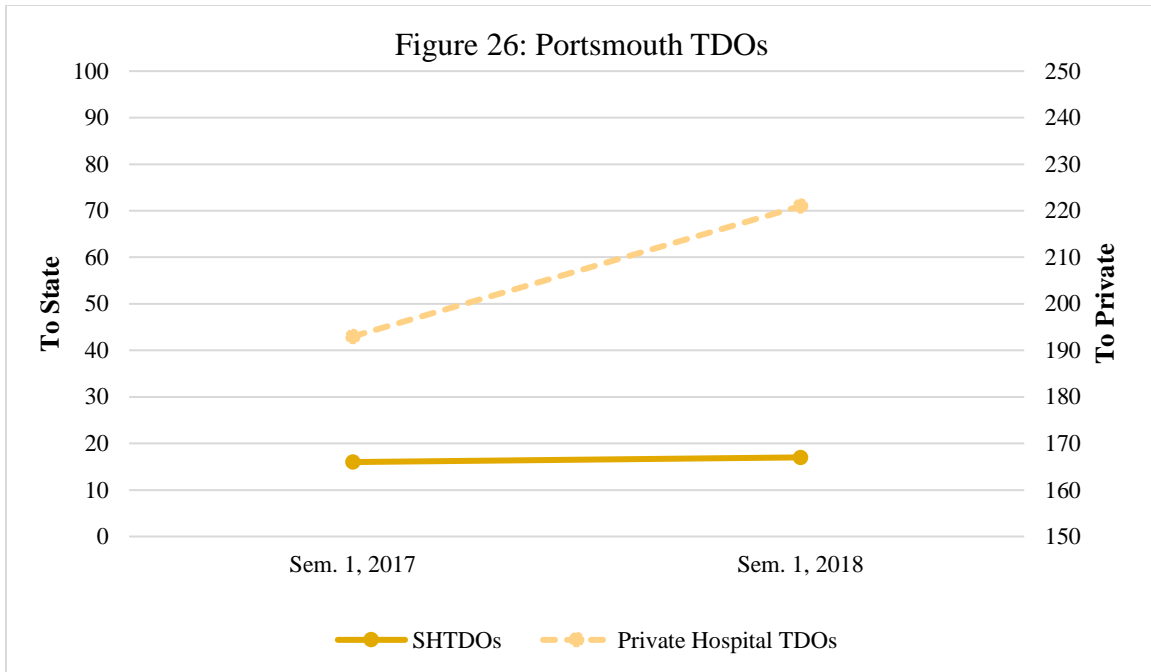


From the first half of fiscal year 2017 to the first half of 2018, TDOs from Cumberland Mountain rose 20%, from 88 to 106. Figure 25 shows seasonally adjusted TDOs. The increase from 2017 to 2018 seems to be the result of a spike in August of 2017. TDOs have since been in decline in that area.

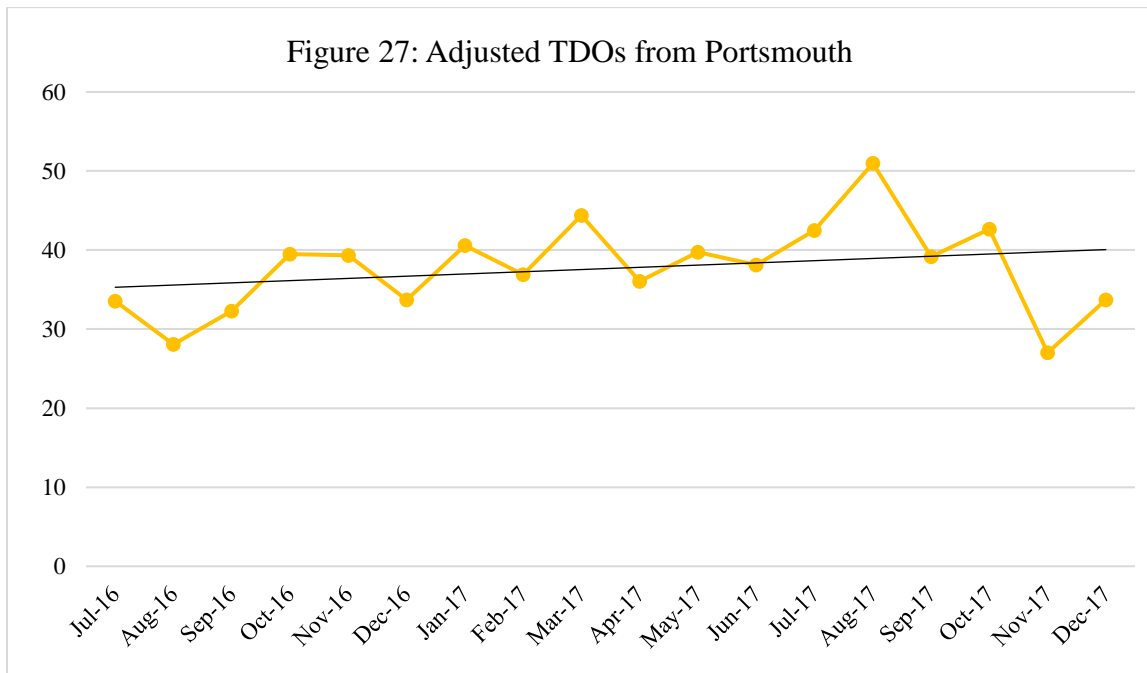


#### H. Portsmouth Department of Behavioral Healthcare Services

Figure 26 shows TDO admissions from Portsmouth to state hospitals. There was only one more admission in 2018 than there was in 2017. The percent of TDOs that were admitted to state hospitals declined slightly from 8% to 7%.

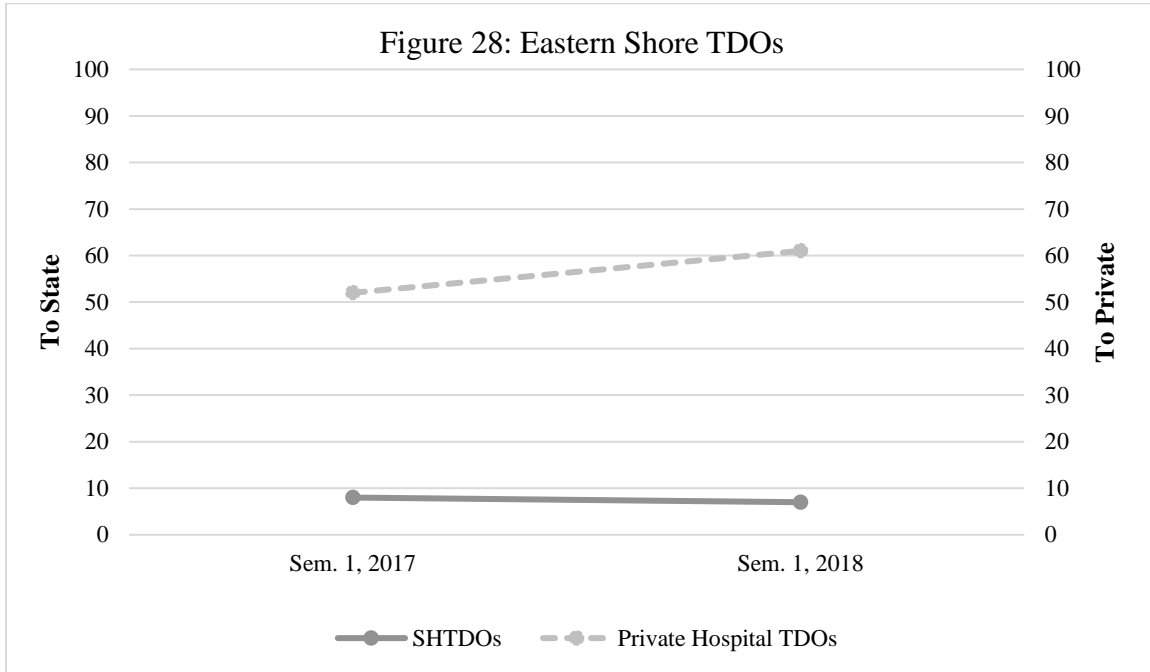


From the first half of fiscal year 2017 to the first half of 2018, TDOs from Portsmouth rose 14%, from 209 to 238. Figure 27 shows seasonally adjusted TDOs. TDOs increased in October of 2016. As with Cumberland Mountain, on the other side of the state, the increase from 2017 to 2018 seems to be the result of a spike in August of 2017, which has been followed by a decline.

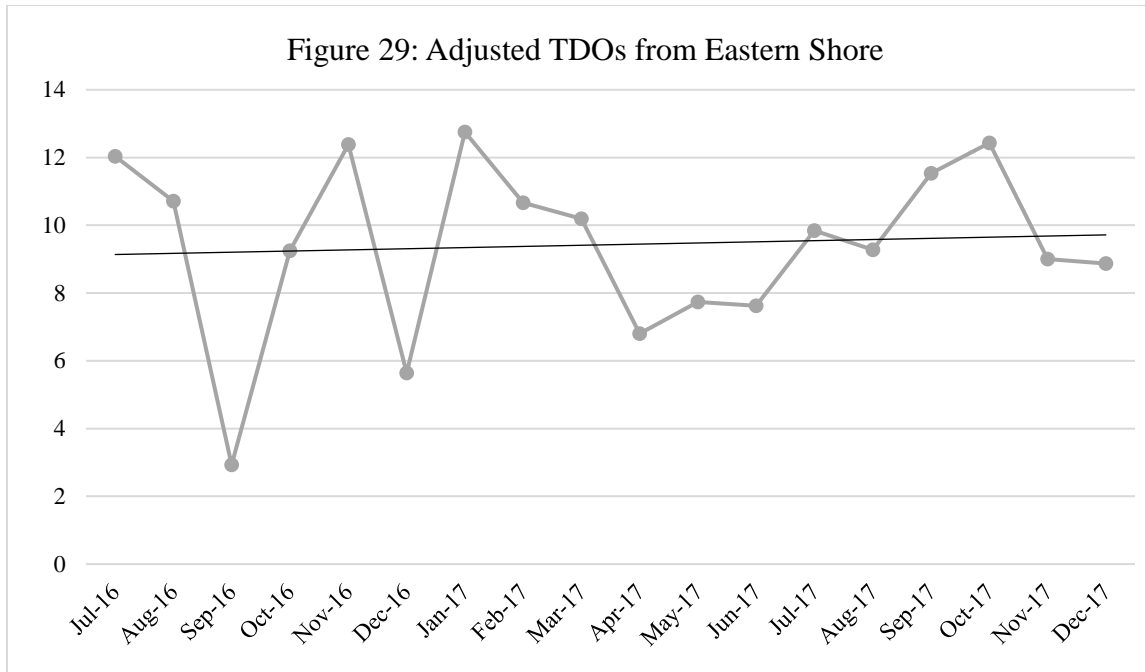


## I. Eastern Shore CSB

Figure 28 shows TDO admissions from Eastern Shore to state hospitals. There was one fewer admission in 2018 than there was in 2017. The percent of TDOs that were admitted to state hospitals declined from 15% to 11%.

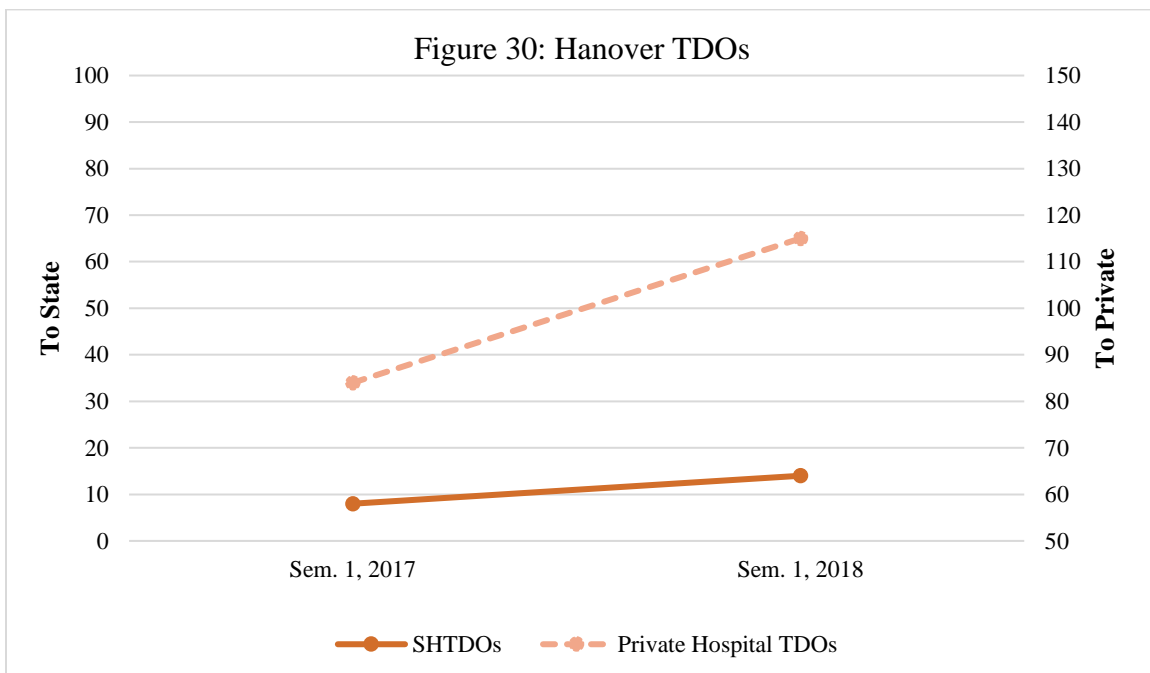


From the first half of fiscal year 2017 to the first half of 2018, TDOs from Eastern Shore rose 17%, from 52 to 61. Figure 29 shows seasonally adjusted TDOs. TDOs fluctuated considerably in calendar year 2016, before beginning a steady increase in the summer of 2017. This increase appears to have partially subsided.

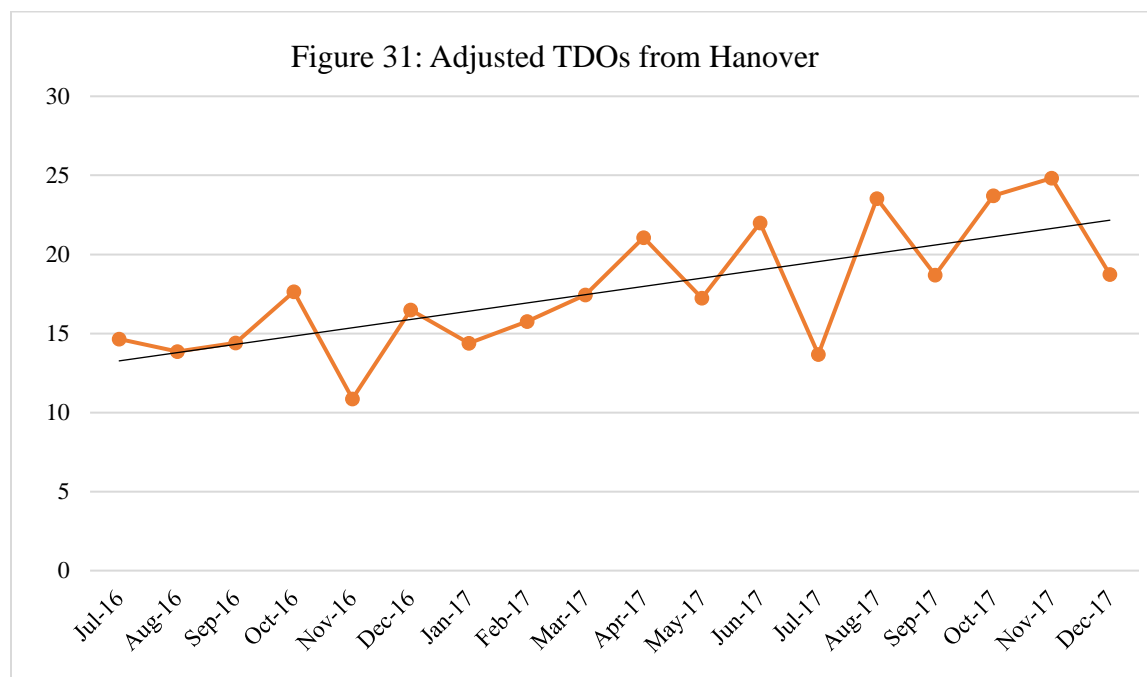


#### J. Hanover CSB

Figure 30 shows TDO admissions from Hanover to state hospitals. There were only six more admissions in the first half of 2018 than there was in 2017. The percent of TDOs that were admitted to state hospitals increased from 9% to 12%.



From the first half of fiscal year 2017 to the first half of 2018, TDOs from Hanover rose 37%, from 84 to 115. Figure 31 shows seasonally adjusted TDOs. TDOs have been on the rise since the spring of 2017.



## VI. Conclusions

From the first half of fiscal year 2017 to the first half of fiscal year 2018, only one fifth of CSBs saw a substantial increase in TDOs. In most such cases the increase occurred in late spring or summer of 2017. Totaled across the state, TDOs were nearly static, increasing by only 20 admissions, or 0.2%. At the same time, TDO admissions to private hospitals declined by 770, or 7%, although ten CSBs admitted more TDOs to private hospitals than they did in the previous year. This overall decline in private hospital TDO admissions resulted in a large increase in admissions to state hospitals. If an increase in private voluntary admissions is the cause, then it may be time to change the focus of discussion from reducing involuntary or state hospital admissions specifically, to reducing hospitalizations in general. Greater coordination is needed between the private and public systems to address this problem.