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To: 2022 Special Committee on Mental Health Beds

From: Connor Stangler, Research Analyst

Re: Timeline of Committees' Recommendations Concerning Mental Health Beds

This memorandum lists past recommendations from Committees that related to mental health beds, state hospitals, and the topics covered by the 2022 Special Committee on Mental Health Beds. This list does not include every recommendation from the listed Committees, only those deemed most relevant. Recommendations tangentially related to mental health beds (e.g., on childhood mental health services) are not listed.

2021 Special Committee on Kansas Mental Health Modernization and Reform

• Recommendation 2.2: Addressing Inpatient Capacity: Implement and fund a comprehensive plan to address voluntary and involuntary hospital inpatient capacity needs while providing all levels of care across all settings, supplementing the traditional State hospital setting with regionalized facilities accepting both voluntary and involuntary admissions for persons in acute services as well as longer-term/tertiary specialized care. Explore the need for State-certified beds in south central Kansas. Ongoing analysis should be conducted to identify geographic areas of need and gaps in levels of care. (Recommendation Topic: Funding and Accessibility)

2020 Special Committee on Kansas Mental Health Modernization and Reform

- Recommendation 2.2: Addressing Inpatient Capacity: Implement and fund a
 comprehensive plan to address voluntary and involuntary hospital inpatient
 capacity needs while providing all levels of care across settings.
 (Recommendation Topic: Funding and Accessibility)
- Recommendation 9.1: Regional Model: Develop a regional model that would supplement the traditional State hospital setting with regionalized facilities accepting both voluntary and involuntary admissions for persons in acute services as well as long-term/tertiary specialized care. Currently, there is a particular gap in capacity in south central Kansas. (Recommendation Topic: System Transformation)

2016 Special Committee on Larned and Osawatomie State Hospitals

The Committee makes the following recommendations:

- Before vendors submit bids for the Kansas Department for Aging and Disability Services' (KDADS) request for proposal for operations at Osawatomie State Hospital (OSH), they consult with community mental health providers;
- Full funding of all crisis centers, including Rainbow Services, Inc., in Kansas City, COMCARE in Wichita, and Valeo Behavioral Health Center in Topeka;
- KDADS provide an interim plan to utilize 20 additional beds at OSH or through third-party facilities and such plan be included in the 2017 rescission bill;
- The University of Kansas and the state hospitals establish a working relationship that will create partnerships, such as internships, fellowships, and other collaborative ventures;
- Noting staffing shortages at the state hospitals, urge Larned State Hospital (LSH) and OSH to establish programs, such as internships, fellowships, and similar initiatives, to enhance recruitment measures;
- KDADS develop a comprehensive salary and benefits schedule to enhance recruitment; and
- Noting the destructive nature of bullying in the workplace and condemning it at all
 employment levels in state hospitals, KDADS investigate incidents of employee
 bullying and develop policies to curtail such behavior.

2012 Legislative Budget Committee

- The Committee requests the House Appropriations and Senate Ways and Means Committees continue to monitor census management at the state hospitals. The Committee expressed concern over the average daily census at LSH and OSH and requested a monthly report be provided to the appropriate committees and subcommittees. The Committee also requested unfilled positions be examined, along with the recruitment and hiring process at the state hospitals as a whole. In addition, the Committee requested the defunding of community mental health centers be examined.
- The Committee recommends, with regard to hospital staffing and salary issues, including pay parity within the state hospital system, the House Appropriations and the Senate Ways and Means Committees and appropriate subcommittees continue to monitor salary issues at state hospitals.

2010 Legislative Budget Committee

• The Committee recommends that, in light of budget constrains and high patient census demands for the State mental health hospitals, the Department of Social and Rehabilitation Services (SRS) reevaluate medication and food expenses needed for higher patient census services to function at current budget levels, and providing for adequate staffing levels without jeopardizing accreditation, patient and employee safety, and active treatment results. In addition, the Committee suggests that SRS continue to develop public-private mental health inpatient bed partnerships as a long-term solution to avoid delays in voluntary admissions.

2006 Legislative Budget Committee

- The Committee requests that SRS be prepared to provide testimony on the nature of the challenging behaviors issues presented to the Committee and the following options be considered:
 - Supplemental funding be added to the SRS budget for FY 2007 (amount to be identified by SRS and legislative staff) to support the opening of one 30-bed inpatient unit at Osawatomie State Hospital within the existing and available physical plant with funding added to continue this unit in FY 2008:
 - Supplemental funding be added to the SRS budget for FY 2008 (amount would need to be identified by SRS and legislative staff) to allow SRS to enter into contractual arrangements with local hospitals who have the capacity to provide acute care inpatient services with funding added to continue these contracts in FY 2008;
 - SRS and mental health stakeholders shall work together to define what the future role of the State mental health hospitals (SMHHs) is going to be; determine the appropriate number of inpatient beds that is necessary to meet the needs of the citizens of Kansas based on the state's current population and respective population growth projections (either SMHH beds or a combination of SMHH beds and local acute care inpatient resources); and to propose a plan as part of the agency's budget hearings in 2007 to the Ways and Means and Appropriations Committees that would support the needs identified in the plan.

2003 Legislative Budget Committee

 The Committee recommends Larned and Osawatomie State Hospitals remain open and that the 2004 Legislature review bed capacity and staffing levels at these institutions to ensure that the needs of the mental health community are being met.

2000 Mental Health System Task Force

• SRS should convene a conference for the purpose of developing a strategic plan for the delivery of mental health services which includes public system members, private system members, families, consumers, and other representatives of stakeholder groups. As part of the development of the strategic plan, SRS should consider appointment of a task force to study and make recommendations regarding the future role and structure of the state hospitals in the continuum of mental health services. The strategic plan report is to be prepared and presented to the 2002 Legislature.