

6/25/2020==In order to gather data on behalf of North Coast EMS and Humboldt County Public Health from the other behavioral health facilities across California, I used the *LPS Designated 24-Hour Facilities* list of (154) facilities across California. I started at the front page and simply cold called each facility going down the list--- from the front I called a few pages, a few pages starting at the back and a couple in the middle to create a sampling across the State. Of the (154) listed, I called a total of (89) facilities, of which (67) offered information.

I asked (3) questions:

1. Do you accept a covid (+) BH patient?
2. Does everyone go thru the ED prior to admission?
3. Do you require a negative covid test or just the verbal screening?

It is important to point out that, Humboldt County's *Sempervirens* Psychiatric Health Facility is a special kind of Psychiatric Health Facility (PHF). It is a designated "**Super PHF**" (pronounced "super puff"). A "Super PHF" is a designated PHF that takes both MediCal & Medicare.

There are only (2) in the entire State of California: Humboldt & Santa Barbara

I made sure to include Santa Barbara in the research.

KEY: CSU=Crisis Stabilization Unit **SV**= Sempervirens Psychiatric Health Facility **ED**= Emergency Department **BH**= Behavioral Health

A summary of the answers here below. I have also attached a detailed document of each call & facility.

| (67) facilities responses | | | | | | | |
|--|--|--------------------------|---|----------|--|---|--|
| ACCEPTING | | | CLEARANCE | | TESTING | | |
| accept a covid (+) BH patient? | | | everyone goes thru the ED <i>prior</i> to admission | | require a (-) covid test prior to coming to facility | verbal screening only ** <i>w/testing if screening indicates</i> | |
| YES | NO | "trying to avoid taking" | YES | SOME | YES | YES | other |
| 3 | 63 | 1 | 64 | 3 | 40* | 23 | 3 = no answer |
| UCLA is one—see more information below | Facilities cited Title 22, Title 17 & Title 9 along with facility unable to adapt as not medical or facility incapable of adaptation | | | | *Of this (40) 1= required a (-) test x2 @ 24 hours apart 1= test prior to admit & again @ 14 days 1= test prior & surveillance testing if placement is required 1= required (-) test result within the last 4 days 1= test prior to in-pt admit facility but CSU= if no symptoms during verbal screening will swab & admit to CSU to await results. | **The facilities that reported screening <i>only</i> also reported very limited testing ability | 1 = If comes from congregate living must have (-) test. Others are verbally screened |

A couple facilities said they are not accepting ANY out-of-county transfers, another said only accepting from their ED. The (63) facilities who would not accept a covid (+) patient reported= If a (+) is discovered

on unit =transfer to medical hospital covid floor, 5150 becomes void *as medical issues supersede psychiatric*, reassess for 5150 criteria after medical issue resolved.

It is important to note that, **Santa Barbara's Super PHF= No admit of covid (+), everyone to ED for clearance prior to coming to the facility and requires a negative test result prior to coming to facility.**

One of the 'Yes' we take a covid (+) BH patients was UCLA—here is more information on their facility:

07/13/2020 UPDATE:

UCLA Harbor Hospital covid (+) unit ==**UCLA Harbor Hospital Manager: Debbie Rhodes (424) 306-4411**

How did they do it?

UCLA's Adult unit was in an old part of the hospital and could not be adapted. But they had an existing unit that was previously an adolescent psych unit already set up in a newer part of the hospital. They adapted the previous Adolescent unit into a covid (+) BH unit.

- By turning the area where the patients are into negative pressure. The nursing station is not.
- Installed doors at each end of the unit. Staff don PPE prior to entrance. Once in pt room, spend as much time as possible to do as many duties in the one entrance, including bathroom wipe down.
- They put ipads instead of TV's in the patient rooms as well as baby monitors, A full glass window in front of pt rooms to be able to observe patients→ doing most of the monitoring via these devices to decrease exposure.
- Also put in a sound system for patients who desire music
- Have not had to restrain anyone but has capability to do if indicated
- **Total Beds= 3 rooms (no cohorting)**
- Patient must be covid (+) asymptomatic→ once patient become symptomatic, they are transferred to the covid **medical** unit of the hospital for further care
- Discussed discharges:
 - 1. If the BH issue is resolved or can be handled out-patient, and pt has resources→ pt can be discharged to home to self-quarantine with follow-up BH resources
 - 2. Can also discharge to a dedicated Covid (+) Hotel for 14 day quarantine and follow-up BH resources
 - **Asked:** Who pays for Hotel?
 - **Answer=** County of LA pays
 - 3. Can be kept in-house medical for 14 day quarantine → dc'd if (-), no temp or other signs/symptoms of covid
- **Asked:** What things would you change if starting fresh?
 - **Answer=** 'Nothing. It is working really well'
- **All patients are tested prior to entering either the BH covid (-) unit, or BH covid (+) unit.**

07/24/2020 UPDATES:

Mercy San Juan acute care hospital that also has a CSU= BH patient must have (-) covid to enter CSU facility. This is done in their hospital ED.

Due to the impact of the BH patient on the ED and no state solutions---

- Mercy San Juan along with other acute care hospitals In the Sacramento region, have formed a health system group in an attempt to come up with a solution/options for

- **1) COVID+ asymptomatic behavioral health** patients - seeing more of these cases and they are remaining in hospitals for very long periods of time, at a time when quickly becoming overwhelmed with the COVID surge and,
- **2) acute behavioral health patients non-COVID** that we are housing in our hospitals because increased volumes have maxed the capacity of our inpatient psychiatric hospitals and testing

California Hospital Association contact update 7 /24/2020: I asked if there were any updates= replied:

- Yes, CHA, DHCS and the County Behavioral Health Directors Association have been discussing. Also CEO leaders from CHA's Center for Behavioral Health had a call (today) with John Connolly, Deputy Secretary, Behavioral Health and today with Dr. Kelly Pfeifer, DHCS Deputy Director

UPDATE: 8/3/2020

- Sent suggestion to CHA, HCC, DHCS to consider:
 - Consider using empty Juvenile Hall facilities to adapt for the Behavioral Health patient? Finding a unique facility with the capabilities to house Behavioral Health (BH) patients on a 5150 hold, as you well know, is quite difficult ---I have been continually looking for possible (quick) solutions. Perhaps you have already considered this one, but just in case...
 - Across California for the last 10 years there has been a movement toward modernizing the juvenile justice system. This prudent modernization has left some Juvenile Hall facilities **vacant** or a great number of vacant beds per facility. Perhaps this is a place that could be quickly adapted for the BH patient on a 5150 hold.
- <https://www.thedowneypatriot.com/articles/la-county-sets-date-for-los-padrinos-juvenile-hall-closure>
- <https://projects.sfchronicle.com/2019/vanishing-violence/part-2/>
- <https://www.cpoc.org/post/number-youth-juvenile-detention-california-has-quietly-plummeted>
 - Because many of these facilities are antiquated, they may not be able to be adapted for the Covid (+) BH patient---but could be a resource for the vast number of *negative Covid* BH patient being housed in ED's due to lack of accepting facilities with increased volumes having maxed the capacity of inpatient psychiatric hospitals.
 - I also feel compelled to caution that this difficult task ahead could be compounded by the *March CMS guidelines* that hospitals can convert their current psychiatric & rehab units into ICU beds for Covid positive patients *without BH issues* in order to meet surge capacity requirements. I have attached an article about New York hospitals reassignment of psych units in hopes you might find ways for California hospitals to avoid this reassignment of their psych units.
- <https://champ.gothamist.com/champ/gothamist/news/many-psychiatric-units-went-offline-during-the-pandemic-healthcare-workers-wonder-if-theyll-ever-return>

8/3/2020= CHA responds RE: March CMS guidelines...

- CHA is not currently seeing the need to convert existing psych unit beds, in our med/surge hospitals. Most hospital have identified surge capacity in other medical specialty areas within their walls better designed to care for acute physical health needs like serious covid+ cases. Psychiatric patient rooms are typically barren with no piped in O'2 and other infection prevention safeguards.

--End---