

Stabler Rehab, LLC

Project Description

ATTACHMENT B

Introduction

Stabler Rehab, LLC is a proposed 56-60 bed project comprised of one or more licenses for non-hospital acute (Psychiatric Health Facility - PHF) or sub-acute (Mental Health Rehabilitation Center - MHRC) programs licensed by the California Department of Health Care Services under the California Code of Regulations, Title 22, Division 5 and Title 9, Division 1. The project will serve adults 18 and older who are experiencing a psychiatric emergency or other acute or sub-acute mental health challenges.

In order to respond to the increasing demand for these services in northern California, Stabler Rehab, LLC is planning to develop a facility to improve access to this level of care.

Program

The program may include a Psychiatric Health Facility and Mental Health Rehabilitation Center providing therapeutic and rehabilitation services in a non-hospital 24-hour setting. Services are provided to individuals experiencing an acute or sub-acute psychiatric episode or crisis, whose physical health needs can be met by an affiliated hospital or in outpatient setting.

The proposed facilities located at 1251 Stabler would be locked, with 24/7 awake staff providing care, supervision and security to all clients. Clients will not have access to any outdoor areas on their own, and staff would be trained to work with severely and persistently mentally ill adults and to handle escalating client situations. All staff receive training in crisis prevention techniques from a certified trainer. In circumstances where a client is a danger to self or others, and cannot be managed with less restrictive interventions, seclusion and/or restraint is permitted by the licensing agency (Department of HealthCare Services) and with a physician's order.

The primary focus of the program is continuous diagnostic assessment of the individual's mental health status, stabilization and maintenance of the mental health condition, improvement of patient's functioning ability, and transitional planning with appropriate referrals. It is expected that referrals will come from multiple sources, including higher levels of acute, locked, or other long-term placements, such as state hospitals; or from lower levels of supervised or independent living. All programs are intended for individuals who have a qualified mental health condition or crisis requiring

temporary care in a safe and secure environment.

The program plans to accept “involuntary” and “voluntary” adult patients who are referred from county mental health agencies who meet the admission criteria established for the program(s). All care provided by the program(s) will be pre-authorized by the referring county mental health agency and subject to utilization review criteria for medical and service necessity.

The program will provide a patient-driven, clinician supervised model that will assist the patient in identifying, practicing and implementing those skills necessary to reduce the number of inpatient hospital days and maximize their opportunity to succeed in community-based or independent living arrangements.

It is expected that the two proposed providers operating at 1251 Stabler would contract with up to 25 northern California counties, including Sutter and Yuba Counties. Other counties of origin are likely to include (in no particular order): Plumas, Placer, Yolo, Napa, El Dorado, Colusa, Shasta, Marin, Kings, Lassen, Humboldt, Tehama, Mendocino, Solano, Del Norte, Butte, Trinity, Glenn, Mariposa, Merced, Lake, Amador, and Sacramento. Depending on county utilization, it is anticipated that Yuba/Sutter County clients will comprise up to 20% of the clientele at these new facilities, though additional clientele from SYMH may be accommodated at the request of the host County.

Patients will be discharged or transferred from the program(s) when: 1) the patient has successfully completed a treatment plan and no longer meets medical or service necessity criteria, 2) the patient no longer meet criteria for an involuntary hold, or 3) the patient needs a higher level of medical or psychiatric care.

Patients are typically transported by a private 3rd party provider (e.g. ambulance, private security, etc.), or by the contracted County via cage car. Upon arrival clients will be escorted directly from the vehicle into the locked facility. Upon discharge clients will return via a 3rd party transportation provider or county vehicle back to their county of origin (typically home, board and care or shelter) or to an alternative level of care in another community approved by the referring County. Clients will not be discharged directly into the Yuba City community unless it is a Sutter Yuba client and it is pre-authorized and at the directive of SYMH, the client’s Public Guardian or similar public agency. Non Sutter-Yuba clients will not be discharged directly into the community.

It is expected that all patients moving to a lower level of care (e.g. board and care, supervised living, etc.) would be returned to the county of origin for placement or other disposition upon discharge from the program.

Though some clients placed at the proposed locked facilities may have criminal records, the primary reason for placement and/or hospitalization will be to address and treat their mental health diagnosis. Those diagnoses are likely to include: depression, bi-polar disorder, schizophrenia, schizo-affective disorder, and other major mental disorders.

The intended program has established relationships with other providers to handle medical care, health emergencies, higher levels of psychiatric care and other referral needs.

Staffing

The program will be staffed by professional and paraprofessionals, which may include one or more of the following, but not limited to: Psychiatrist, Primary Care Physician, Physician's Assistant, Nurse Practitioner, Clinical Psychologist, Registered Nurse, LVN/LPT; as well as direct care staff. Adjunctive staff, such as Recreation Therapists, Chemical Dependency Counselors, etc., may be utilized depending on the needs of the patients and programs. Ancillary patient services such as medical appointments, consults, lab, dentistry, etc., will be provided to patients on an outpatient basis with appropriate referrals.

Average Length of Stay

The length of stay at the program is planned to meet the acute and/or sub-acute psychiatric needs of the patients referred to the program. The program will accept both voluntary and involuntary patients who meet the admission criteria.

It is expected that many of the patients referred to the PHF program will be on an involuntary hold, which is limited to 72 hours, or to the MHRC as a referral from their Conservator or Public Guardian for longer-term rehabilitation needs. These patients may receive ongoing treatment if they meet continued medical necessity. To continue treatment, a patient must either agree to be treated on a voluntary basis or must be mandated to continue on an involuntary basis by the proper legal authority.

It is anticipated that the average length of stay at a PHF program will be between 3 to 5 days. Stays of less than three days or longer than five days will be dependent on the individual needs of the patient. It is anticipated that the average length of stay at an MHRC program will be between 60-90 days. In all cases, individual care will be coordinated with the referring county mental health agency. Discharge planning and Aftercare will be coordinated with the patient's referring agency/caseworker to ensure post-discharge placement, medication support and social, vocational and educational services as appropriate.

Facility

The proposed location for Stabler Rehab, LLC is in the community of Yuba City, California at 1251 Stabler Lane. The subject property provides a 50,000 square foot building on 5+ acres with more than adequate indoor and outside activity space, including 32 semi-private bedrooms with a shower, a dining space, activity/group

rooms and office spaces. Located on the grounds is are multiple outdoor patio spaces for activities and relaxation. The site offers security and privacy for patients and families.