

Availability of Psychiatric Hospital Beds

Scott Acus, MA, MSW, LICSW
Executive Director, CSC / Second Spring
scotta@cscorp.org



Collaborative Solutions (CSC)

- Nonprofit
- Owns/operates three intensive residential programs (hospital step-downs):
 - Second Spring South in Williamstown (16 beds)
 - Second Spring North in Westford/Underhill (8 beds)
 - Pearce House in Williamstown (3 beds)
- State-wide catchment
- Length of stay varies. Average is about one year.
- Founded in 2007 as an alternative/step-down for VSH
- Programs are voluntary, not locked, and no involuntary procedures are used (e.g. restraint/seclusion, involuntary medication)



Hospital

CSC/ 2nd Spring

Prescribers (MD, APN)

Daily + 24/7 on-call

Near-Daily + 24/7 on-call

Nursing

24/7

Daily + 24/7 on-call

Therapists

✓

✓

Social Workers

✓

✓

Case Management

✓

✓

Primary Care

✓

✓

Creative Arts Therapy

✓

✓

Individual nutrition plans

✓

✓

Individual treatment plans

✓

✓

Hospital

Grocery or restaurant

Cookouts, baby goats, pets

Concerts, skiing, fair, etc.

Gardening

Mostly locally-sourced food

Family visits

COVID Safe

Limited

Safe

CSC/ 2nd Spring

Yes, nearly upon request

✓

✓

✓

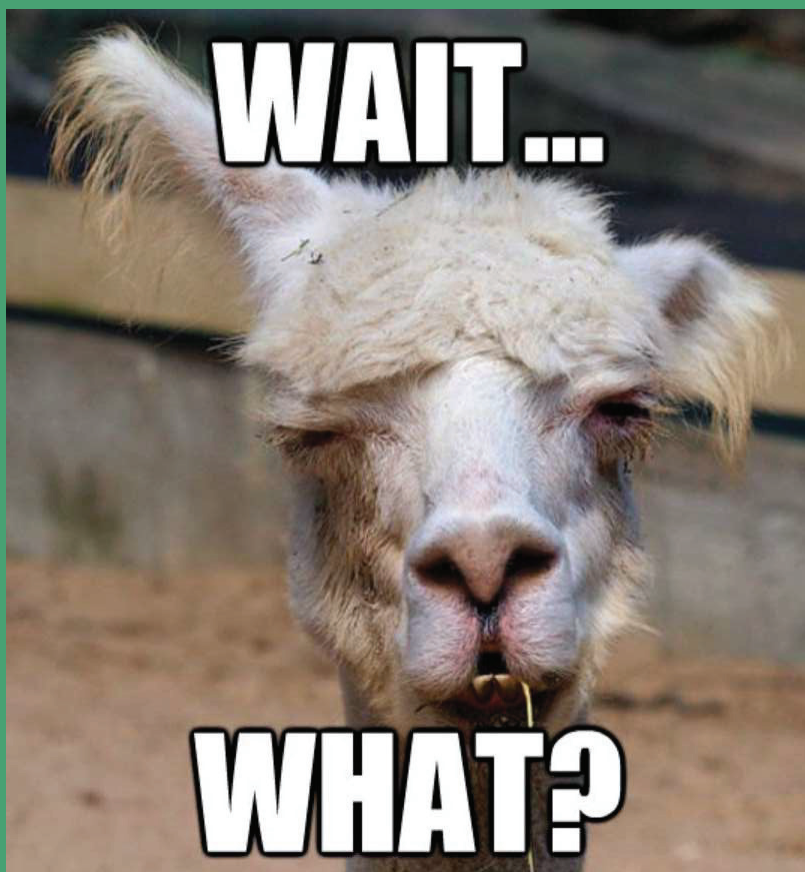
✓

Any time

3 years of ZERO patient
COVID cases at 2nd
Spring residences

People get better here.

. . . at $\frac{1}{3}$ to $\frac{1}{2}$ the cost.



WAIT...

WHAT?

People with many hospitalizations over the past 5 years frequently do not need hospitalization while they are with us. . . or even after they leave (or for a long time after they leave).



And they experience that progress, and all it means for their lives and for their loved ones, at $\frac{1}{3}$ to $\frac{1}{2}$ the cost of a hospital bed.



Hospital

CSC/ 2nd Spring

Anti-ligature doors

✓

Prohibit sharps

✓

Controlled, not prohibited

Physical restraints

✓

Seclusion

✓

Involuntary medication

✓

**CSC / Second Spring does not have
hospital-level protections against
violence / self-harm. When those risks
are high . . .**

... Our therapeutic effectiveness is dramatically reduced (which leads to more hospitalizations).

	<u>Hospital</u>	<u>CSC/ 2nd Spring</u>
Grocery or restaurant		Yes, nearly upon request
Cookouts, baby goats, pets		✓
Concerts, skiing, fair, etc.		✓
Gardening		✓
Mostly locally-sourced food		✓
Family visits	Limited	Any time
COVID Safe	Safe	3 years of ZERO patient COVID cases at 2nd Spring residences

. . . And the risk of a catastrophic event becomes unacceptable.



The Two Main Contributors to Risk at CSC:

1. Lack of placement options leads to pressure to admit individuals who present a high level of risk
2. System pressure not to hospitalize individuals who have decompensated at CSC and now present significant risk (of violence or self-harm)

Neither of these is necessarily caused by lack of hospital beds. Another explanation is if beds are filled with those not needing hospital-level safety interventions, or if beds are filled with people who ONLY need safety interventions (not CSC- or hospital-level mental health treatment).

- 1. Lack of placement options leads to pressure to admit individuals who present a high level of risk**
- 2. System pressure not to hospitalize individuals who have decompensated at CSC and now present significant risk (of violence or self-harm)**

The big question about hospital beds is actually two questions:

- 1. Do we have enough beds in Vermont?**
- 2. Are we using the beds only for those who need them?**

A “no” answer to either question will negatively impact CSC’s effectiveness, leading to increased hospitalizations.

1. Do we have enough beds in Vermont?
2. Are we using the beds only for those who need them?

And “only for those who need them” means people who need BOTH intensive mental health treatment AND high-level safety precautions.

- 1. Do we have enough beds in Vermont?**
- 2. Are we using the beds only for those who need them?**

Are we currently only using hospital beds for people who need BOTH intensive mental health treatment AND high-level safety precautions.

**Do we know the answer to this question?
And if not, how will we find out?**

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