

2022 Psychiatric Hospital Review Council Recommendations

– Adopted 1-4-23 –

- Follow-up on all reports recommended in the Council’s 2021 Final Report and 2021-2022 legislation.
- Require the Arizona State Hospital to provide an explanation to the Council as to why it is not providing statutorily required services to individuals living with an intellectual or developmental disability.
- Study new and existing traditional housing from prisons and other levels of care and their effectiveness in serving the serious mental illness population.
- Institute surveys for services received by the Arizona Health Care Cost Containment System and regional behavioral health authorities in the behavioral health system.
- Practice the Caregivers' Bill of Rights as directed by statute.
- Identify how many psychiatric beds does AZ need across the continuum of care:
 - Resolving the 55-person cap at the Arizona State Hospital
 - Is secure residential more integrated & clinically appropriate for some patients?
- Identify the private sector’s role in accepting involuntary commitments state-wide:
 - Tucson & Prescott private hospitals accept involuntary commitments. Why not statewide?
- Consider traditional housing from prisons and other levels of care as well as having a community commitment to providing housing as a necessity for this population.
- Address each of the following with regards to the Arizona State Hospital:
 - high levels of violence;
 - chronic staffing shortages;
 - use of registry staff;
 - clinical care for developmental disabilities and autism;
 - governance & accountability to the Legislature; and
 - clinical care of developmental disabilities, autism, and other complex behavioral and medical conditions not currently being treated.
- Consider whether the Arizona State Hospital should be extricated from the Department of Health Services and operated by an appointed board.
- As it relates to the Arizona Health Care Cost Containment System and regional behavioral health authorities:
 - Understand capitation financing;
 - Investigate behavioral health residential facilities' use of “medical necessity” criteria, short notification period and high readmission rates; and
 - Receive meaningful clinical outcome data; not just description of processes and Substance Abuse and Mental Health Services Administration metrics.
- Ensure behavioral health technicians are adequately trained, credentialed, compensated and certified by the state.

- Identify how to increase and/or incentivize community support for the serious mental illness population.
- Address each of the following as it relates to the Arizona State Hospital:
 - Governance and oversight;
 - Streamline readmissions;
 - Quality of care, violence and complaints; and
 - Services & payment for patients with developmental disabilities & autism.