

TRIBAL INVOLUNTARY COMMITMENT PROCESSES

Arizona State Hospital

Admission Process

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Brief History



- 1885 - Territorial Legislature appropriates funds for the “Insane Asylum of Arizona”
- 1887 – Asylum opens with 61 patients

Hospital Census



1912	375
1950	1690
1952	2791
1965	1474
1985	493
1994	466
1998	310
2009	250

Historical view of institutional psychiatric care



- Overuse of long term hospitalization
- Historically poor medical interventions for psychiatric illness
- Lack of attention to human rights
- Lack of community support to prevent hospitalization

Where are we now?

- Current census – 250
- Average LOS – 210 days
- Recovery Model
- Evidenced-based treatments
- Partnership with RBHAs and TRBHAs Only admit clinically appropriate for highest level of care
- Develop discharge plan at admission
- Careful attention to human rights
- Strive for care in environment free of seclusion and restraint

What the State Hospital is not:

- It is not the first line of treatment
- It is not designed for emergency admissions
- It is not a substitute for appropriate local services
- It is not a warehouse for behavioral problems which are not the result of a mental disorder

Criteria for Medical Director's Decision

- The proposed patient has a mental disorder as defined by the statute
- The proposed patient is DTS, DTO, PAD or GD as a result of that mental disorder
- The proposed patient will benefit from care and treatment at the State Hospital
- The proposed patient has had an opportunity to receive treatment in a local setting
- The State Hospital is the least restrictive alternative available to meet the proposed patient's needs

Application Goals and Objectives:

- Identify clinical reasons treatment in the community has not been meeting the member's needs
- Specifically identify how the member is expected to benefit clinically from treatment at the State Hospital
- Review past treatment, what has worked well, and what has not been successful
- Define reasons why the State Hospital is the least restrictive alternative at the present time
- Identify anticipated plans for the member's return to the community and treatment needs, including type of placement
- Identify any barriers to community treatment that would need to be addressed prior to discharge
- Identify the expected length of stay

Admission Packet includes:

- Member is identified by Tribe or T/RBHA for referral
- Application completed with Goals and Objectives for Treatment
- Application sent to AzSH Admissions Office- Fax # 602-220-6355
- AzSH Admissions Manager will contact the referring tribe to provide application completion support , if needed
- Designated RBHA is contacted if the member is not in a GSA supported by a TRBHA
- Completed application is submitted to the AzSH Chief Medical Officer for review and approval.
- Additional information may be request if needed to ensure continuity of care
- Acceptance letter sent to referral contact
- Admission date is established

The Importance of Referral Information:

- It helps ensure Continuity of Care
- It assists in the Coordination of Benefits
- It allows for RBHA Involvement
- It initiates the Process of Effective Treatment Planning
- It facilitates the Process for effective Discharge Planning

Co-Case Management/ Discharge Planning:

- Arizona State Hospital supports a Co-Case Management and Discharge Planning model with our tribal partners and the designated RBHA.
- All monthly staffing reviews are held to include all community partners and treatment team members to review clinical progress and transition/re-integration to the tribal community

T/RBHA Involvement during Hospitalization:

- T/RBHA enrollment before or at time of admission
- SMI determination by RBHA before or at the time of admission
- Non-Title XIX member will be referred for AHCCCS benefits if eligible
- Attendance at all staffing to review clinical progress and transition/re-integration to the tribal community

Arizona State Hospital Contact Information:

- Admissions Manager, Telephone #-602-220-6120 Fax # 602-220-6355
- Director of Social Services, Carol Hirschberg-James- 602-220-6427
Hirschberg-JamesC@azdhs.gov
- Native American Social Worker, Megan Mitscher -602-629-7066
MitschM@azdhs.gov