

A collaboration among the University of Minnesota, University of Minnesota Physicians and Fairview Health Services

Minnesota Department of Health 625 Robert Street North P.O. Box 64975 St. Paul, MN 55164-0975

Dear Mr. Gildemeister:

Thank you for the opportunity to provide comments in your review of plans submitted by Fairview Health Services and Acadia Healthcare to establish a 144-bed adult and geriatric mental health hospital in St. Paul. We strongly believe a new mental health hospital is in the public interest, as it would contribute to a long-term solution to Minnesota's persistent shortage of inpatient mental health care beds.

Our community is in the midst of a mental health crisis, pushing an already strained mental health system to the brink. M Health Fairview University of Minnesota Medical Center operates more inpatient mental health beds than any tertiary or quaternary care hospital in the state. The M Health Fairview Mental Health and Addiction teams are in constant communication with hospitals and providers inside the Fairview system and across our state to help people with the most acute psychiatric conditions, often in crisis, access the care they need.

Sadly however, patients who arrive at the UMMC emergency department, or at an emergency department elsewhere in our system, consistently must wait for care while staff search for a bed, boarding in our emergency department for hours or even days. For someone experiencing an acute illness, any delay care can be damaging. This is equally true for someone experiencing an acute psychiatric emergency, where time spent awaiting care, in the high-stress environment of an emergency department, can also be traumatic. All too frequently, after this time spent waiting, the only option for patients are hospitals located hours away from their family and support network.

Building a new 144-bed inpatient mental health hospital would reduce strain on hospitals like ours, who manage scarce capacity for inpatient mental health care. Simply put: more inpatient mental health and addiction beds in St. Paul would mean patients get care sooner and can move faster toward further treatment and recover.

In operating one of the state's largest hospitals, we also believe the opening of the new mental health hospital will have a net positive impact to our overall operations. The positive impact on patient flow at UMMC alone will create a positive downstream impact on our staff and patients' experience, as well as the hospital's long-term financial health.

Certainly, our hospital, like all of healthcare, is navigating a historically difficult period as it relates to our workforce and staffing. The new mental health hospital would not create any new challenges to what is

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universally known to be a very challenging environment. In fact, we believe welcoming a wellestablished leader like Acadia Healthcare – that can deploy national recruitment strategies and robust talent development efforts – could enrich the overall market for mental health professionals in our state.

Finally, we are optimistic about the model of care planned for the new mental health hospital. Building a new, specialized mental health hospital would mean a step toward treating the needs of patients experiencing mental illness with the same urgency and intention as those patients experience acute physical health issues. The new hospital's integration with the Fairview system means patients will benefit from the full capabilities of M Health Fairview, in an environment designed for their needs, no matter their income, insurance status, or where they seek care.

Thank you again for the opportunity to provide comments for consideration by the department.

Sincerely,

Mary Johnson/ / / Chief Operating Officer M Health Fairview University of Minnesota Medical Center

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## SURVEY RESPONSES

Enter hospital name, location, and primary contact email M Health Fairview University of Minnesota Medical Center 2450 Riverside Ave, Minneapolis, MN 55454 Mary Johnson, <u>Mary Johnson1@fairview.org</u>

We are collecting an inventory of ADULT inpatient mental health beds. How many PHYSICAL inpatient mental health beds (dedicated primarily for psychiatric disorders) does the hospital have? **150** 

*On <u>June 1, 2022</u>, how many STAFFED inpatient mental health beds (dedicated primarily for psychiatric disorders) did the hospital have?* **100 beds** 

Within the past six months, what is the number of increased or decreased STAFFED inpatient mental health beds (dedicated primarily for psychiatric disorders) at the hospital? (Please use negative "-" sign for decrease and enter "0" for no change). +20 beds

Does this hospital have special units for STAFFED inpatient mental health beds? **Yes** 

How many STAFFED inpatient mental health beds are in specialized units? (Please provide number and type of specialty (i.e., Co-occurring chronic health condition med/psych bed, Co-occurring substance use disorder, Crisis Stabilization, Extended Stay, Geriatric, Forensic or Law Enforcement, and any other type). **20 Adult Detox; 16 Young Adult; 16 Senior; 14 ITC** 

Next, we would like to discuss how many ADULT inpatient mental health beds were occupied <u>on June 1,</u> <u>2022</u>. To the best of your ability, please estimate how many ADULT inpatient mental health beds were <u>occupied at midnight census</u>?

## 100 census

<u>How many patients</u> on June 1, 2022 in ADULT inpatient mental health beds were medically unstable (i.e., require oxygen, intravenous therapies, transfusions, or other chronic health condition)? 0 patients

<u>How many patients</u> right now are unable to be discharged from ADULT inpatient mental health beds for <u>non-clinical reasons</u> e.g., administrative or insurance difficulties; lack of appropriate step-down transfer

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destination such as community-based services, residential treatment, or nursing home; lack of availability for state operated services mental health bed; or, other reason? On average, 25% of adult patients remain hospitalized for placement issues only

*Finally, we would like to ask about patients waiting in your hospital emergency department. What is the average wait time in the emergency department for an adult inpatient mental health bed, in days (please estimate)?* 

Across the Fairview system, average wait time for adults in the emergency department prior to admission to an inpatient bed is approximately .75 days. However, at times patients may wait as long as 7.8 days.

<u>How many people</u> are on the waitlist right now in the emergency department for an ADULT inpatient mental health bed (please estimate)? **24 patients** 

