



New Hampshire Hospital Overview

**February 3, 2023
Division III**

**Ellen Lapointe
Chief Executive Officer NHH, NHFH, Glencliff & PATH**

**Cynthia Babonis,
NHH, NHFH Director of Social Work and Health Information**



Who we are

- ❖ NHH is a secure inpatient psychiatric treatment facility supporting citizens who suffer from acute, severe and persistent mental illness.
- ❖ We are the largest psychiatric treatment facility in NH and are equipped to care for the most severely mentally ill patients in the state.
- ❖ There are 6 other Designated Receiving Facilities (DRFs) in the state who have capacity ranging from 6 to 16 beds. (approximately 60 total)

Our Mission

- ❖ To help citizens with acute mental illness stabilize their conditions and live their best lives.



Our Vision

New Hampshire Hospital will become a model of inpatient psychiatric care in the state and region, using standardized, evidence-based methods to stabilize symptoms and prepare patients to thrive in their home communities. We are an employer of choice who supports our staff's individual safety, wellness, growth and engagement by fostering high functioning teams.

Our Core Values

- ❖ Person-Centered: Caring for you, caring for our community
- ❖ Collaborative: Achieve more together
- ❖ Integrity: Always do the right thing
- ❖ Compassion: Be kind
- ❖ Excellence: Great staff, great people, great care



NHH Staff:

❖ Total number of NHH staff:

733 total staff comprised of 624 NHH staff and 109 Dartmouth and other agency staff

❖ Clinical Unit Teams:

RNs, Mental Health Workers, Social Workers, Psychiatric Practitioners, and Rehabilitative Professionals

❖ Clinical and Operational Teams:

Laundry, Food and Nutrition, Environmental Services, Administration, Facilities, Staff Development, Medical, Materials Management, HR, State Office Complex Police, Safety, IS/IT, Finance, HR, Pharmacy, Health Information.

❖ Executive Leadership:

Rosie Costanzo, Chief Nursing Officer

Stefanie Shea, Chief Quality Officer;

Beth Nagy, Director of Therapeutic Services

Tim Whitman, Chief Operating Officer

Chuck Bagley, Director of Staff Engagement

Jeff Fetter, Chief Medical Officer

Cynthia Babonis, Director of Social Work & HID

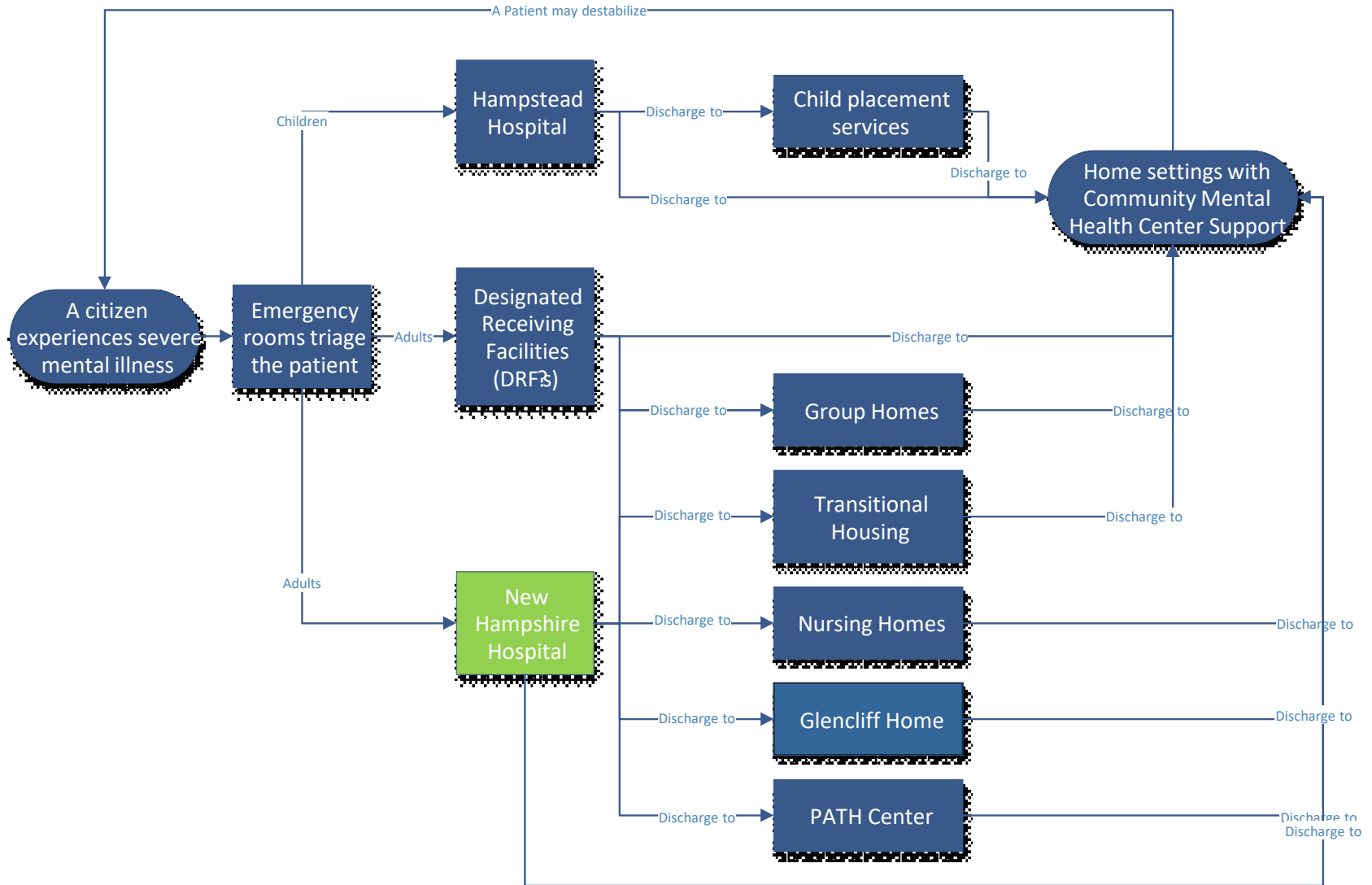
Bret Mason, Chief Financial Officer;

Ellen Lapointe, Chief Executive Officer



Delivery System – The inpatient mental health system

(for serious mental illness)



NHH Census

- ❖ Our total building capacity for patient's is 185. We have 31 beds offline due to the workforce shortage. Our adjusted capacity is 154 with fluctuations related to COVID management.
- ❖ We continue to prioritize efforts to not only increase staffing and ensure we are using our resources to the best of our ability in an attempt to bring additional beds back online.
- ❖ We have vacancies in several departments, both clinical and operational
- ❖ Our largest staff vacancy rates include Registered Nurses and Social Workers
 - ❖ Between 50-60% vacancy rates



Admissions

- ❖ Virtually all of the admissions to NHH are involuntary as the patients have been deemed imminently dangerous to themselves or others as a result of mental illness.
- ❖ We primarily accept patients from Hospital Emergency Departments throughout the state who are there via an IEA.
- ❖ We also occasionally accept patients from county jails and from the SPU.
- ❖ By statute, we do not accept patients who are dangerous due to substance use disorder (SUD) or intellectual disability (ID). However, several of our patients have co-occurring SUD or ID.
- ❖ While Designated Receiving Facilities (DRF's) are able to accept IEA admissions, they defer to NH Hospital to treat the most dangerously ill.



Barriers to discharge

- ❖ In 2022 the monthly average number of patients stable and awaiting discharge for greater than 15 days was **62**
 - ❖ The lowest month was **57** and the highest month was **72**
 - ❖ These numbers adequately represent data back to 2018 when tracking began
 - ❖ **The number of patients awaiting discharge has consistently exceeded the number of patients awaiting admission (commonly known as the ED boarding queue).**
- ❖ The vast majority of stable patients awaiting discharge are awaiting long-term placement in supported residential settings as they are, at baseline, unable to remain stable in independent settings even with the most intensive out-patient support provided by their Community Mental Health Center.
- ❖ The following types of supportive housing exist but are so limited that the wait times are several months or longer.
 - ❖ 24 hour supervised mental health housing such as community residence or “transitional housing”
 - ❖ Nursing Home and Assisted Living beds for individuals who have mental illness and medical issues related to aging
 - ❖ Specialized and supervised housing for people with intellectual disabilities.



NH Forensic Hospital (NHFH)

- ❖ DHHS has hosted 5 community outreach sessions to update the public on the status of the NHFH project. We intend to hold more as the project progresses.
- ❖ The original timeline intended to begin patient occupancy of NHFH mid-late 2024.
- ❖ The updated timeline reflects intended occupancy to begin in mid-late 2025.
- ❖ The timeline is being amended to take into consideration:
 - ❖ The current general status of the construction industry
 - ❖ Allowing for sufficient time to complete foundation work as a result of some of the ground studies that have occurred
 - ❖ Minimize the disruption of the occupancy and workflows that need to continue to occur at NHH during construction
- ❖ DHHS continues forward with project teams focused on the design and construction as well as the operational readiness of NHFH



NH Forensic Hospital (NHFH) Patients

- ❖ Some forensic patients are treated at New Hampshire Hospital currently, which is designed to provide short-term acute psychiatric care. Forensic patients typically require longer lengths of stay.
- ❖ Because of this, access to treatment at NHH becomes restricted and this can impact patients who are referred from emergency departments and can increase the waitlist for NHH.

- ❖ NHFH will include:
 - ❖ Patients involved in the criminal justice system and suffering from serious mental illness.
 - ❖ Patients accused of an unlawful act but can not go to trial because of their illness. (Incompetent to Stand Trial)
 - ❖ Patients have been found not guilty of the unlawful act because the act was the result of their illness. (Not Guilty by Reason of Insanity)
 - ❖ Patients who have not committed an unlawful act but, because of their mental illness, are too dangerous to be treated at a conventional psychiatric hospital.





Questions

