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FISCAL IMPACT REPORT

SPONSOR: Sandoval DATE TYPED: 2/9/03 HB HJM 26
 SHORT TITLE: Need for Additional Beds for Violent Youth SB _____
 ANALYST: Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
			Significant See Narrative		

(Parenthesis () Indicate Expenditure Decreases)

Relates to: 23-9-1 to 23-9-7 NMSA 1978 (The Adolescent Treatment Hospital Act)

SOURCES OF INFORMATION

Responses Received From

Department of Health (DOH)
 Health Policy Commission (HPC)

SUMMARY

Synopsis of Bill

House Joint Memorial 26 requests that the Department of Health (DOH) conduct a study to determine the nature and scope of the need for additional treatment beds for violent, mentally ill adolescents, and the need for additional resources for the treatment of violent, mentally ill adolescent females. HJM 26 suggests that Sequoyah Adolescent Treatment Center (SATC) could provide such services. The DOH will report its findings to the legislative Health and Human Services Committee at its October 2003 meeting.

Significant Issues

The Children, Youth and Families Department (CYFD) is the agency statutorily responsible for services to children and adolescents with mental illness. Currently, the DOH is only a provider of services to children/adolescents at the SATC and the CARE Unit in Las Vegas, New Mexico.

DOH believes that CYFD would be the appropriate agency for the purposes of conducting a study, since the department knows about services currently available, what services are most critically needed, and have access to information regarding availability of state and federal fund-

ing. Through the study, CYFD could determine and articulate the most critical mental health needs of the female youth of New Mexico, and make recommendations regarding meeting those needs in the most efficient manner. The Department of Health could be asked to assist in terms of identifying alternatives such as creating new lodges to serve violent female adolescents and violent adolescents with acute mental illness.

DOH explains that the focus of this proposed study is narrow. The department proposes a gap analysis for adolescent girls' mental health services. A broader study could identify other service deficits and give a more accurate estimate of the needs for more beds. CYFD currently has most of the data needed for a study, so they should be included as the lead with a number of essential collaborators. Along with DOH, potential collaborators are the juvenile court judges and public defenders offices as well as Human Services Division (HSD), Parents for Behaviorally Different Children, the Alliance for the Mentally Ill, and the Indian Health Service.

There is general consensus that the mental health needs of adolescent females, especially violent ones, are underserved in the State. Sequoyah informally studied the need for such services in New Mexico several years ago. At that time, it was estimated that 50-60 girls could be referred to a provider similar to Sequoyah for treatment.

HJM 26 raises the question as to whether or not funds would be better-spent improving existing treatment services for girls to address female delinquency.

The Adolescent Treatment Hospital Act does not specify that any lodge must be reserved for any specific group (i.e., girls or acute care). Due to the nature of the population served at the SATC, a separate building would have to be constructed if violent female adolescents were also to be served. In addition, if one of the four pods would be dedicated to treatment of females, more males would be left without services.

The Memorial is accurate in stating that adolescents are often on the Sequoyah waiting list for long periods. Sequoyah is unable to accommodate emergency admissions due to this waiting list. There is general consensus that there is a lack of acute care beds for adolescents in New Mexico. Incentives are needed for hospitals to open more acute care beds across the state. Sequoyah can work with hospitals to transfer clients as beds become available.

ADMINISTRATIVE IMPLICATIONS

Administrative impact on the Department of Health would be significant. Conducting a study would require planning, study development and implementation, analysis and production of the final report. This must be completed by October 2003 in time for the legislative health and human services committee meeting.

TECHNICAL ISSUES

While the language of the Memorial refers repeatedly to the Sequoyah Adolescent Treatment Center, the actual request for the DOH study only refers to "treatment beds," without specifying that they are to be located at the Center.

OTHER SUBSTANTIVE ISSUES

The DOH does not have the day-to-day knowledge of the needs of children and adolescents in the State of New Mexico. CYFD's leadership is essential if accurate information and data are to be derived from a study. A study of all mental health needs of female children and adolescents must be conducted to ensure that limited state dollars are truly addressing the most pressing needs.

Nationally, girls' involvement in delinquency and crime, though less than boys', have increased significantly in the last two decades. There is little knowledge about the causes of girls' violence, and few studies have been conducted on young women's crime and delinquency. Girls are involved in more violent crime than they were a decade ago; their murder arrest rate is up 64 percent.

Violent crimes committed by girls differ significantly from boys' offenses. Boys are two to three times more likely to carry weapons, and girls are more likely to use knives. Girls are more likely than boys to murder someone as a result of a conflict rather than during a crime.

Girls jailed for crimes, compared with their male counterparts, are more likely to report previous sexual or physical abuse, ranging from 40 to 70 percent of respondents in various surveys.

It is unclear whether adding a limited number of treatment beds to a secure facility, serving the high end of the spectrum of adolescent female treatment needs, would impact the numbers of girls who might need treatment at an earlier level of intervention.

There will be considerable additional expenses for Sequoyah to add services for girls and acute care capabilities.

The Sequoyah Adolescent Treatment Center is a non-profit residential treatment center for adolescents who are violent or who have a history of violence, and have a mental disorder, and who are amenable to treatment. It is a facility of the Department of Health, and is accredited by JCAHO and Medicaid approved.

According to Sequoyah Adolescent Treatment Center:

- Sequoyah is the only center in the state that accepts violent, mentally ill adolescents with chronic conditions.
- Their waiting list contains the names of 10 to 15 clients, with a 2-3 month waiting period.
- 95% of Sequoyah's patients are from juvenile court. Approximately 10 beds are reserved for juvenile court adolescents.
- Sequoyah would have to change their licensing from residential to acute level licensing to accept and treat violent, mentally ill adolescents with acute conditions.
- Currently, violent, mentally ill female adolescents are sent to detention centers or to out of state facilities.

AMENDMENTS

Make CYFD the responsible agency and expand the nature of the study to look at the mental health service needs for all female youth.

BD/njw.prr