COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 1034-02

Bill No.: SCS for SB 178

Subject: Mental Health; Mental Health Department

Type: Original

Date: March 11, 2013

Bill Summary: This proposal modifies provisions relating to safety provisions in mental

health facilities.

FISCAL SUMMARY

| ESTIMATED NET EFFECT ON GENERAL REVENUE FUND | | | | |
|---|---------------------------------|---------------------------------|---------------------------------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| General Revenue | Unknown, less than \$100,000 | Unknown, less than \$100,000 | Unknown, less than \$100,000 | |
| | | | | |
| Total Estimated Net Effect on General Revenue Fund | Unknown, less than \$100,000 | Unknown, less than \$100,000 | Unknown, less than \$100,000 | |

| ESTIMATED NET EFFECT ON OTHER STATE FUNDS | | | |
|---|---------|---------|---------|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 |
| | | | |
| | | | |
| Total Estimated Net Effect on Other State Funds | \$0 | \$0 | \$0 |

Numbers within parentheses: () indicate costs or losses.

This fiscal note contains 5 pages.

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| ESTIMATED NET EFFECT ON FEDERAL FUNDS | | | |
|--|---------|---------|---------|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 |
| | | | |
| | | | |
| Total Estimated Net Effect on <u>All</u> Federal Funds | \$0 | \$0 | \$0 |

| ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE) | | | | |
|--|---------|---------|---------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| | | | | |
| | | | | |
| Total Estimated Net Effect on FTE | 0 | 0 | 0 | |

- ☐ Estimated Total Net Effect on All funds expected to exceed \$100,000 savings or (cost).
- □ Estimated Net Effect on General Revenue Fund expected to exceed \$100,000 (cost).

| ESTIMATED NET EFFECT ON LOCAL FUNDS | | | |
|-------------------------------------|---------|---------|---------|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 |
| Local Government | \$0 | \$0 | \$0 |

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FISCAL ANALYSIS

ASSUMPTION

Officials from the **Department of Mental Health (DMH)** state using Advanced Practice Registered Nurses (APRNs) to order seclusion and restraint when needed during evenings and weekends will result in a savings compared to the cost of using a psychiatrist for that same purpose. The number of times when this will be used is unknown. Therefore, the savings are unknown, less than \$100,000. Also, using APRNs for those purposes gives the DMH facilities more timely access to mental health professionals capable of ordering seclusion and restraint, therefore, better ensuring facility compliance with national accreditation and certification standards.

Officials from the **Department of Health and Senior Services** assume the proposal would not fiscally impact their agency.

| | <u>\$0</u> | <u>\$0</u> | <u>\$0</u> |
|---|---------------------------------|---------------------------------|---------------------------------|
| FISCAL IMPACT - Local Government | FY 2014 (10 Mo.) | FY 2015 | FY 2016 |
| ESTIMATED NET EFFECT ON THE GENERAL REVENUE FUND | Unknown, less than \$100,000 | Unknown, less than \$100,000 | Unknown, less than \$100,000 |
| Savings - DMH Reduction in wages and benefits paid to psychiatrists | Unknown, less than \$100,000 | Unknown, less than \$100,000 | Unknown, less than \$100,000 |
| FISCAL IMPACT - State Government GENERAL REVENUE FUND | FY 2014 (10 Mo.) | FY 2015 | FY 2016 |

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

HWC:LR:OD

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FISCAL DESCRIPTION

Under current law, physical or chemical restraints, isolation, or seclusion cannot be used on patients, residents or clients of a mental health facility or mental health program unless it is determined by the head of the facility or the attending licensed physician that it is necessary to protect the health and safety of the individual or others and that it provides the least restrictive environment. This proposal allows such orders to also be made by the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician.

If the attending advanced practice registered nurse orders the use of restraints, isolation or seclusion, it shall be reviewed in person by the attending licensed physician if the episode of restraint extends beyond 4 hours duration for a person under 18 years of age, or beyond 8 hours duration for a person 18 years of age or older, or for any total length of restraint lasting more than four hours duration in a 24 hour period in the case of a person under 18 years of age, or beyond eight hours duration in the case of a person over 18 years of age in a 24 hour period.

Depending on the circumstances under which an individual has been committed to the facility, security escort devices may be used when such individuals are transported outside a mental health facility based on the determination of the head of the facility or the attending licensed physician. This proposal allows such determinations to also be made by the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician.

All orders made by the attending advanced practice registered nurse under this proposal shall be reviewed in person by the attending licensed physician of the facility within 24 hours or the next regular working day of the order being issued, and such review shall be documented in the clinical record of the patient, resident, or client. The attending advanced practice registered nurse shall also document the use of the restraint, isolation or seclusion.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Department of Mental Health Department of Health and Senior Services

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> Ross Strope Acting Director March 11, 2013