

HB 183

STAFFING AND CAPACITY AT API

"AN ACT RELATING TO THE DUTIES OF THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES; RELATING TO THE DUTIES OF THE DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT; AND RELATING TO STAFFING AND WAGE STANDARDS FOR THE ALASKA PSYCHIATRIC INSTITUTE."

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HB 183 :

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- HB 183 would expand capacity at Alaska Psychiatric Institute (API) by addressing staff retention, correcting wage disparities with the private sector, and enhancing bed capacity by:
 - Ensures that compensation cannot fall below current prevailing rates of wages for work
 - Increases and maintains bed counts, reviews safe staffing standards and establishes wages as determined by the Department of Labor and Workforce Development
 - Requiring the Department of Health and Social Services to continue to prepare an annual report of its activities. If the department is not able to meet staffing standards under AS 47.30.660(c), the department shall give the State Legislature details regarding staffing issues

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Historical Bed Counts

Table 1. A Twenty-Five Year Snapshot of Alaska Psychiatric Institute Utilization

Calendar year	Official bed capacity	Total number of admissions	Total number of actual bed days used as a percentage of maximum days possible		Average number of admissions per month	Number of days in the year with 5 or more admissions in a single day	Number of discharges
			Number	%			
1990	160	831	33,147	57%	69	32	831
2000	74	1,448	23,954	88%	121	140	1,448
2011	80	1,489	25,225	85%	124	143	1,506
2015	80	1,547	23,276	88%	129	166	1,555

Source of data: API Dashboard, Alaska Division of Behavioral Health (http://dhss.alaska.gov/dbh/Documents/api/API_Dashboard.pdf)

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2019 Ombudsman's Report notes:

“...adult acute units (Katmai and Susitna) were at or above 90% capacity for at least 83% of days each month in 2017. The entire hospital was at or above 90% for at least 89% days each month in 2017.”

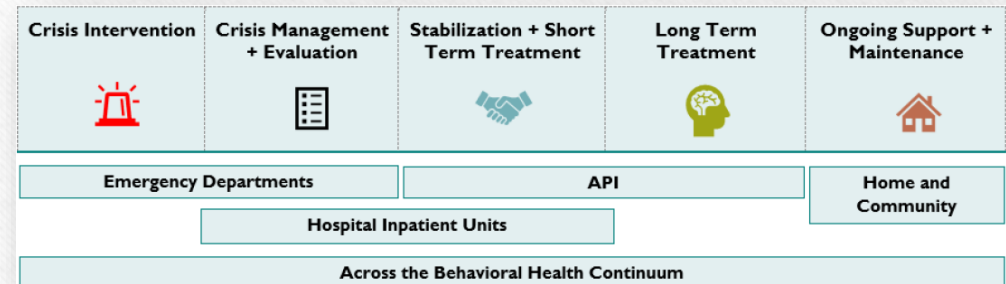
Bed Counts: Anchorage (as of 2/11/2020)

- Total # of beds: 73
- Total # of bed occupied: 65
- Total # of bed at API: 60
- API and Providence are the only facilities in Anchorage able to offer psychiatric inpatient care for adults
- The Adolescent Unit is non-operable

Facility Information		Bed Availability	
Facility:	API - Adolescent Unit	Total Number of Beds/Total Capacity:	0
Program:	SOA/DHSS/API	Number Of Beds Occupied:	0
Community:	Anchorage	Number of Beds Available:	0
Level:	Adolescents Acute Care	Number Of People On The Wait List:	0
Gender:	CO	Estimated Days Wait Time For Next Available Bed:	0
		Updated:	2/14/2020 10:51 AM
Facility:	API - Adult Civil Units	Total Number of Beds/Total Capacity:	40
Program:	SOA/DHSS/API	Number Of Beds Occupied:	39
Community:	Anchorage	Number of Beds Available:	1
Level:	Adult Acute Care	Number Of People On The Wait List:	9
Gender:	CO	Estimated Days Wait Time For Next Available Bed:	3
		Updated:	2/14/2020 10:50 AM
Facility:	API - Forensic Unit	Total Number of Beds/Total Capacity:	10
Program:	SOA/DHSS/API	Number Of Beds Occupied:	10
Community:	Anchorage	Number of Beds Available:	0
Level:	Adult Secure	Number Of People On The Wait List:	25
Gender:	CO	Estimated Days Wait Time For Next Available Bed:	90
		Updated:	2/14/2020 10:52 AM
Facility:	Providence Crisis Recovery Center (CRC)	Total Number of Beds/Total Capacity:	16
Program:	Providence	Number Of Beds Occupied:	14
Community:	Anchorage	Number of Beds Available:	2
Level:	Observation Care	Number Of People On The Wait List:	0
Gender:	CO	Estimated Days Wait Time For Next Available Bed:	1
		Updated:	2/17/2020 1:36 AM
Facility:	Providence Psychiatric Emergency Room	Total Number of Beds/Total Capacity:	7
Program:	Providence	Number Of Beds Occupied:	7
Community:	Anchorage	Number of Beds Available:	0
Level:	Emergency Room & Triage	Number Of People On The Wait List:	3
Gender:	CO	Estimated Days Wait Time For Next Available Bed:	2
		Updated:	1/26/2020 3:23 AM

1-1 ER Holds: Providence Hospital

- Individuals who are on the waitlist to get placement in Providence ED are not waiting in the main ED
- Psych patients in the ED require one-on-one observation. This requires bringing in RNs for OT or shifting them from active floor duty
- Psychiatric EDs and Eds are not designed to stabilize patients during a time of crises
- In January, there were 202 patients in the main ED with a psych complaint at Providence. In February, they've had 114 so far. These numbers are in addition to patients in the psychiatric ED. It is probable that these patients required a 1-1



Acute Behavioral Health Improvement Project 2019

1-1 ER Holds: Regional Hospital

PATIENT/ASSESSMENTS													
HCA Facility/Service- 2019	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
ASSESSMENTS- LCSW/PSYCHIATRIST	96	52	126	124	91	91	81	63	58	68	80	49	979
ADOLESCENT ASSESSMENTS			1			1	2	1	1	3	3		12
PATIENTS SEEN										19	10	11	40

TRANSFERRED													
HCA Facility/Service	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
ALASKA REGIONAL HOSPITAL	4	1	5	9	1	2	7	4	8	5	10	3	59
ALASKA PSYCHIATRIC INSTITUTE					1		2		3		1		7
NORTH STAR BEHAVIORAL				1		1	2	1		2	2		9
BARTLETT REGIONAL HOSPITAL	4	1	4	7		1	1	1	2	1	5	2	29
FAIRBANKS MEMORIAL HOSPITAL				1				1					2
PROVIDENCE ALASKA MEDICAL CTR			1				2	1	3	2	2	1	12

1-1 ER Holds: Bartlett Hospital

- For the past year, Bartlett Hospital has had an average of 7 psych patients a day that require 1-1 holds
- Patients that require holds usually wait an average of 2-3 days before moving to the psych unit or being transferred to another facilitate with bed openings.
- 1-1 holds are not facilitated by nurses but instead Behavioral Health Techs. These Techs are to comfort the patient and de-escalate as needed. These Techs are not able to provide medical treatment however.

Safety Issues

- In 2019, federal investigators found over 80 substantial deficiencies, all categorized as “immediate jeopardy” to the patient
- State reports in 2014 revealed frequent workplace safety violations, leading to over \$7k in citations, including for workplace violence
- This trend continued into 2017, when fines totaled over \$40,000, leading investigators to declare the facility had not done enough to protect employees:
 - “In the first half of 2017, patients attacked API employees 140 times, with punches, kicks, thrown objects, bites, choking, ripping off clothing, scratches and cuts and spitting. Many injuries required emergency medical care.”

Opinions

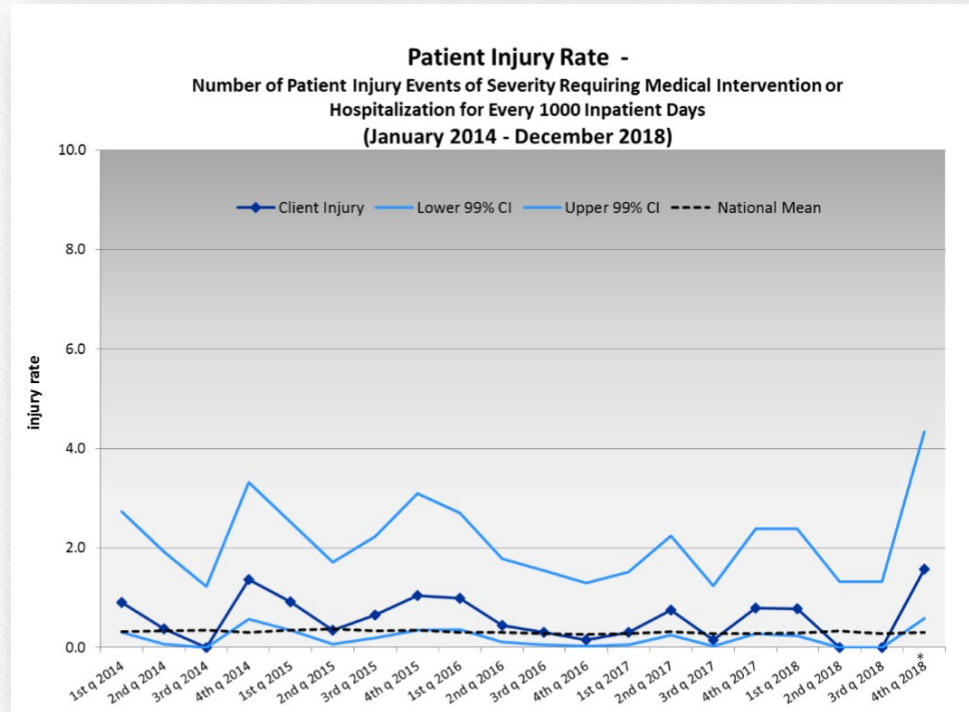
API is an unsafe workplace, investigators say. This caregiver suffered the consequences.

✍ Author: Charles Wohlforth | Opinion ⓘ Updated: December 13, 2019 📅 Published December 29, 2017

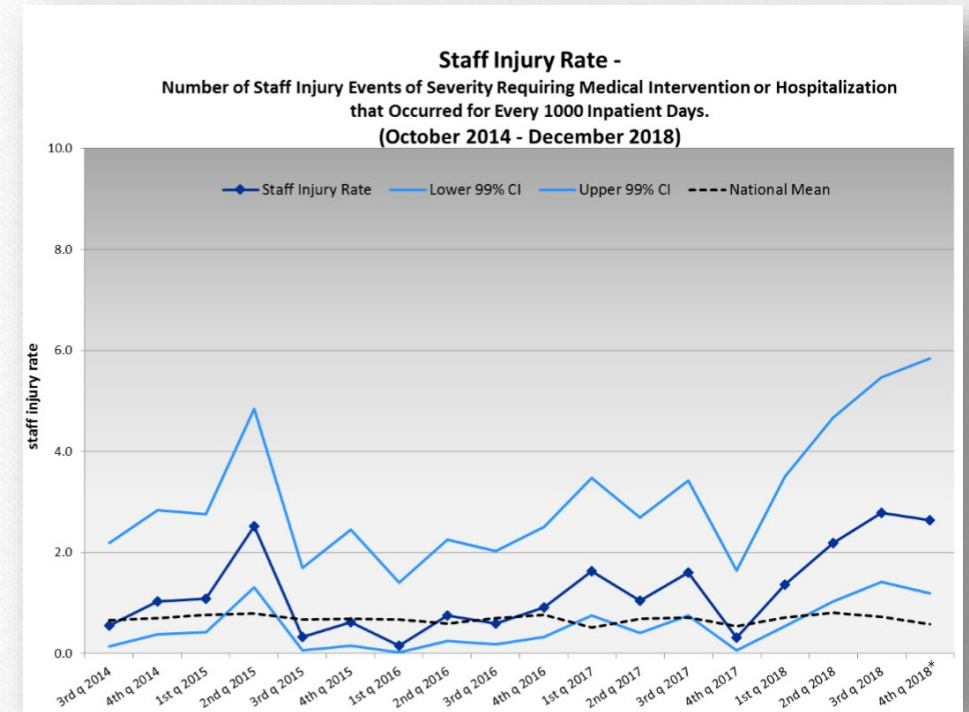


Samantha Atlas, who works as a psychiatric nursing assistant at the Alaska Psychiatric Institute, was assaulted by a patient in November 2016 and is still recovering from her injuries. Atlas wears sunglasses because of the brain injury she sustained in the attack. (Bill Roth / ADN)

Safety Issues Cont'd



Feasibility Study of the Privatization of Alaska Psychiatric Institute 2017



Feasibility Study of the Privatization of Alaska Psychiatric Institute 2017

Staffing Issues

- Scheduling practices often have led to over-staffing on some shifts while other shifts had just enough (or not enough) staffing
- Due to staffing shortages, critical duties have been left undone such as security monitoring
- Overtime workers are being asked to cover shortages
- “A 2015 report by a consultant, Dr. Joel Dvoskin, underlined staffing as the single most important problem...The hospital needs full-time, permanent staff positions. All it normally takes to hire the nursing assistants is to increase wages, he said.”

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★★★★☆

Lots of overtime available

Psychiatric Nurse's Assistant I-II (Former Employee) - Anchorage, AK - December 16, 2019

You may be required to turn a 12-hour shift into a 16 hour shift with less than an hour of notice. Lunch breaks are not guaranteed. This is a dangerous job and the facility is understaffed and underfunded.

Was this review helpful?

Yes 1

No

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HB 183 Consistent with:

- Ombudsmans' report 2019 has recommendations to improve capacity and service
- 2017 Feasibility Study suggests that staffing and capacity are primary concerns
- Subsequent Legislatures have included significant API funding to meet these goals: HB 183 seeks to provide floor and operation guidance...if HB 183 passes it could minimize the need for supplemental asks

Thank you
