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Auditor General

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Office of the Auditor General
660 J STREET, SUITE 300
SACRAMENTO, CALIFORNIA 95814

October 7, 1982

Letter Report 116

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
925 L Street, Room 750
Sacramento, California 95814

Dear Mr. Chairman and Members:

In response to a request by the Joint Legislative Audit Committee, we reviewed state hospital policies and procedures related to field trips into the community by mentally ill patients who were committed to state hospitals by the court system or by referral from the Department of Corrections. We conducted this review under the authority vested in the Auditor General by Sections 10527 through 10528 of the Government Code. Further, we conducted this audit in accordance with generally accepted government auditing standards, although we limited our work to that requested by the Legislature.

We were asked to determine how the state hospital field trips are approved and controlled, who pays for them, and whether the Department of Corrections provides similar field trips for its inmates. Our work included a review of the three state hospitals that confine nearly 99 percent of the patients identified above; this review showed that the hospitals offer a variety of field trips and that they control these trips in three ways. First, they select those patients who will benefit from the field trips. Second, they require the staff who treat and supervise treatment of patients to approve the trips. Third, they require members of the hospital staff to supervise the patients during the trips. The transportation costs and wages of the hospital staff members who supervise field trips are charged to the State's General Fund. However, hospital personnel use their own money for the purchases they make during field trips. Patients also use their own private funds, which come from a variety of sources. Finally, in comparing the state hospitals with the Department of Corrections, we found that the Department of Corrections authorizes inmates of its institutions to be released temporarily for up to 72 hours.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 2

Recent temporary community releases were authorized for activities such as employment interviews or examinations and making residential arrangements. However, the Department of Corrections authorized no temporary releases for recreational field trips.

BACKGROUND

Eleven state hospitals provide care and treatment to mentally disabled and developmentally disabled patients. The State Department of Mental Health (DMH) operates three of these hospitals (Atascadero, Metropolitan, and Patton), and the State Department of Developmental Services (DDS) administers the remaining eight hospitals (Agnews, Camarillo, Fairview, Lanterman, Napa, Porterville, Sonoma, and Stockton). In addition, two DDS hospitals, Camarillo and Napa, operate treatment programs for mentally disabled patients for the DMH under policies established by that department.

Department of Mental Health hospitals and programs for mentally disabled patients at DDS hospitals serve persons who have been referred by county mental health programs, committed by the court system, or admitted under miscellaneous criteria, such as referral by the Department of Corrections. Patients committed by the courts or referred by the Department of Corrections are known collectively by the Department of Mental Health as "penal code patients."

Persons committed by the court system include the three major categories of penal code patients in the state hospitals: (1) mentally disordered sex offenders considered dangerous to the health and safety of others; (2) persons who have been found not guilty of offenses by reason of insanity (that is, juries have decided that these persons were insane at the time they committed their offenses); and (3) defendants who are incompetent to stand trial because they are unable to understand the nature of the criminal proceedings or to rationally assist counsel in their defense.

The table on the following page identifies the number of penal code patients and the total number of patients at each state hospital that normally receives penal code patients.

TABLE 1

NUMBER OF PENAL CODE PATIENTS AND
TOTAL NUMBER OF PATIENTS AT STATE
HOSPITALS THAT RECEIVE PENAL CODE PATIENTS
AS OF JUNE 30, 1982

<u>State Hospital</u>	<u>Number of Penal Code Patients</u>	<u>Total Number of Patients</u>
Atascadero	1,194	1,364
Camarillo	26	740
Metropolitan	18	851
Napa	238	1,295
Patton	<u>1,158</u>	<u>1,291</u>
Total	<u>2,634</u>	<u>5,541</u>

State hospitals include field trips among the services that they provide to their patients. However, hospitals offer different types of field trips. One hospital may permit patients to participate only in such activities as applying for a driver's license or becoming familiar with a residential facility in a county mental health program. Another hospital may include sporting events, museum trips, dining out, and shopping among the field trips it offers.

The hospitals offer these trips into the community because they consider them to be a legitimate part of a patient's treatment. Hospitals intend these trips to provide opportunities for patients to demonstrate their ability to behave in a socially acceptable manner in the community, to prepare patients to use community resources and leisure time appropriately, and to assist the patients in reentering the community.

Penal code patients at Atascadero and Napa participate in field trips; penal code patients at Patton do not. Patton's executive director discontinued field trips for penal code patients in November 1981 because of adverse publicity regarding some field trips, and because of the large number of escapes from the hospital.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 4

SCOPE AND METHODOLOGY

Our objectives were to identify the processes for approving and controlling field trips at state hospitals, to identify the sources of the funds used to support these trips, and to determine whether the Department of Corrections offers similar field trips to its inmates. To identify the field trips offered by hospitals, we visited Atascadero, Napa, and Patton state hospitals. These three hospitals treat nearly 99 percent of the penal code patients in the state hospitals.

To identify the policies and procedures that these hospitals have established for field trips, we interviewed hospital administrative and treatment personnel, as well as officials from the headquarters of the Departments of Mental Health and Developmental Services. To document the approval process and the participation of patients in specific field trips, we also reviewed hospital records, including the medical files of patients. Because the staffs did not routinely maintain the documentation for field trips, we were unable to find documents showing that the staffs at Napa and Patton observed established procedures. We found nothing at either of these hospitals, however, to indicate that trips were not planned and conducted in accordance with hospital procedures.

To identify the sources and the specific uses of funds for field trips, we interviewed the hospital personnel responsible for administration, accounting, and transportation. We also reviewed payroll records and vehicle use records.

To determine if the Department of Corrections provides similar field trips to its inmates, we asked the department to provide us with the number and types of field trips attended by inmates, a description of how such activities are controlled, the authorizing statutes, and the sources of funds used to support such activities.

AUDIT RESULTS

In this section, we discuss the types of field trips offered, the state hospitals' legal authority to provide field trips, who approves and controls the trips, who pays for them, and whether the Department of Corrections offers similar field trips to its inmates.

Honorable Walter M. Ingalls
 Chairman, and Members of the
 Joint Legislative Audit Committee
 October 7, 1982
 Page 5

Types of Field Trips Offered

The Atascadero, Napa, and Patton hospitals offer field trips to their patients, although Patton offers the trips only to its patients who are not penal code offenders. Trips may be recreational, rehabilitative, or educational in nature, depending on the policy of the hospital. We identified 862 field trips that took place between January 1, 1981, and June 30, 1982. Table 2 presents the number of field trips, as well as the total number of participants, for each of the three hospitals.

TABLE 2
 NUMBER OF FIELD TRIPS AND
 NUMBER OF PARTICIPANTS
 FOR EACH HOSPITAL
JANUARY 1, 1982 THROUGH JUNE 30, 1982

<u>Hospital</u>	<u>Number of Field Trips</u>	<u>Number of Participants</u>	
		<u>Penal Code Patients</u>	<u>Other</u>
Atascadero	78	143	0
Napa	594	848	2,435
Patton	<u>190</u>	<u>414</u>	<u>242</u>
Total	<u>862</u>	<u>1,405</u>	<u>2,677</u>

Atascadero's field trips can include such activities as obtaining job and welfare applications, applying for driver's licenses, and practice in applying for community services, including mental health services. These field trips must help achieve specific goals related to treatment plans for individual patients. Atascadero does not permit recreational field trips for its patients. A typical Atascadero field trip involves two patients and two supervising staff members, and includes renewal of a driver's license, lunch, and a tour of the county mental health program's residential facility. The trip usually lasts four to six hours.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 6

Napa offers and Patton offered until November 1981 their penal code patients field trips such as shopping trips, attending baseball and football games, circuses and rodeos, and visits to museums and restaurants. According to personnel responsible for treatment at Napa, as well as the policy at Patton, the purpose of many of the trips is to help patients find constructive ways to use leisure time after they have been released from the hospitals. As a part of its treatment program, one unit at Patton also took penal code patients participating in an experimental therapy program to nightclubs to allow patients to socialize.

We cannot describe a typical field trip at Napa or Patton because of the variety of trips offered by each hospital. However, most of the trips appeared to last approximately one-half day; many took place in the vicinity of the hospitals; and usually one to three staff members accompanied groups of up to six patients.

Legal Authority to Provide Field Trips

State hospitals have the authority to provide therapeutic field trips to their patients. According to Section 4011 of the Welfare and Institutions Code, the DMH is responsible for carrying out the laws relating to the care, custody, and treatment of mentally disabled persons. The DMH directs the general policy of the hospitals, which then develop specific procedures to implement the general departmental policies. The DMH has not suggested a general policy or provided regulations to the hospitals for field trips. However, Section 4312 of the Welfare and Institutions Code permits hospital directors to establish rules and regulations for the care and treatment of their patients, provided that these rules and regulations are consistent with law and departmental regulations. The Legislative Counsel told us that there are no statutes restricting therapeutic field trips for patients and that, for purposes of treatment, the law does not distinguish between penal code patients and other types of patients.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 7

Approval and Control of Field Trips

Atascadero, Napa, and Patton have developed their own policies and procedures for approving and controlling field trips. Established approval and control processes include ensuring the appropriate selection of patients for field trips, requiring the staff who treat and who supervise the treatment of patients to approve the trips, and ensuring the safety of the community and the patient by having the hospital staff supervise patients during the trips. The hospital executive directors, who are responsible for overall operations of the hospitals, delegate authority for selecting and supervising patients and for approving trip requests to specific hospital staff members. Decisions about selection, approval, and supervision can occur at three levels of a hospital's organization: the administration, the directors of treatment programs, and the unit. Program directors oversee and guide the hospital units in the care and treatment of patients. Units provide day-to-day care and treatment to groups of patients.

Atascadero, Napa, and Patton use the same method of selecting patients for field trips. Treatment teams (composed of professional staff such as a psychiatrist, a psychologist, a social worker, a unit supervisor, a member of the nursing staff, and a rehabilitation therapist) prescribe and regulate patients' psychiatric and medical treatment, including field trips. We identified two means by which these treatment teams consider patients for participation in field trips. Patients either sign up for announced trips or staff members of the units recommend patients to the treatment team. To select patients for field trips, a treatment team will review an individual patient's potential benefit from or need for the trip. This review may consider such factors as the patient's ability to participate in the event, whether the activity will help the patient reach a goal in his or her treatment plan, the potential danger the patient will pose to the community, and the current behavior of the patient. If the team decides that the trip is appropriate for the patient, the team approves the patient's participation in the activity. Staff then prepare a field trip request, which specific personnel must approve.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 8

Each of the three hospitals has a different process for approving field trips. Patton requires the approval of the program director, or his designee, responsible for the patient(s). Atascadero requires the approval of the program director as well as the hospital medical director, who is responsible for all patient care and treatment. Napa's approval process depends upon the type of trip being planned; however, all trips require the approval of at least the unit team leader. A local trip of four hours or less needs only the signature of the ward team leader. Both full-day trips and overnight trips require the additional approval of the program director, while the hospital clinical director, who is responsible for the care and treatment of all patients, must approve all overnight trips.

All three hospitals require their staffs to supervise patients during field trips. Atascadero requires two professional staff members for up to two patients. Three patients (the maximum permitted at one time) must be supervised by a minimum of three staff members. Napa's policy stipulates a maximum of two professional staff per penal code patient, although the program director may permit staff members to supervise up to five "carefully selected" penal code patients. While Patton does not stipulate a particular ratio of staff to patients, its procedures do require the program director to determine such a ratio for trips, depending upon the type of patients and the nature of the trip. Based on information provided by personnel at Patton, the number of supervising hospital staff to patients ranged from one staff member per 1.4 patients to one staff member per 2.8 patients. The average for Patton was one staff member per 2.3 patients.

Sources of Funds for Field Trips

As part of our review, we were asked to determine who pays for the expenses of the field trips. We found that the State's General Fund bears the transportation costs and that the hospital staff and patients each pay for their own meals and purchases. Although the wages of staff who supervise the field trips are charged to the General Fund, these wages generally do not represent an added cost to the hospital.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 9

Hospital staff who supervise field trips told us that supervising field trips is a routine part of the job and that they usually conduct field trips during their normal working hours. As a result, they receive neither official compensating time off nor overtime for supervising field trips. Furthermore, the hospitals do not provide extra staff for days on which field trips occur. To ensure the continued normal staffing of the units, units schedule their staff to compensate for personnel who are supervising field trips, and trips are cancelled if supervising personnel are not available. The staff members who supervise the field trips also told us that they spend their own money for the purchases they make, usually for food and beverages, during field trips.

The State's General Fund pays for the transportation expenses for field trips. Hospitals generally use hospital vehicles or hospital-chartered vehicles for field trips. As mentioned earlier, the trips are usually of short duration and in the vicinity of the hospitals. Some trips at Napa are walking trips because the facilities to be visited are sufficiently close to the hospital. We were unable to identify amounts charged to the General Fund for transportation because the hospitals do not specifically account for the use of vehicles.

We found that some activities at Napa and Patton such as ball games, circuses, and rodeos involve no admission cost to patients because the hospitals receive donations of admission tickets from concessionaires or operators of events. Hospital staff who supervise these trips told us that donated tickets also usually cover the admission of supervising hospital staff.

During field trips, patients use their own money to purchase items such as food, beverages, books, clothing, souvenirs, and personal items. Napa staff told us that unit fund raising events, such as cake sales, may occasionally assist a patient who has no money at the time of the trip.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 10

Welfare and Institutions Code Section 7281 requires each state hospital to maintain the patients' personal deposit fund. All money that comes into the possession of the hospital's executive director on behalf of any patient in that hospital must be deposited in the name of that patient in the patients' personal deposit fund.*

Money in the patients' personal deposit fund comes from a variety of sources, such as veterans' benefits, Social Security benefits, retirement benefits, personal assets, contributions from family or friends, and state contributions to indigent patients. Under Welfare and Institutions Code Sections 4136 and 4473, added by Chapter 429, Statutes of 1978, the State ensures that every patient who has resided in a state hospital for at least 30 days will have at least \$12.50 per month for personal and incidental needs. The State pays an amount that, when added to a patient's income, equals \$12.50 per month.

Field Trips at State Prisons

The Department of Corrections is responsible for the incarceration, training, education, and care of adult felons. It also supervises and treats parolees released to the community as part of their prescribed terms, and advises and assists other governmental agencies and citizens' groups in programs of crime prevention, criminal justice, and rehabilitation.

The Department of Corrections told us that between January 1, 1982, and May 30, 1982, it did not authorize recreational field trips for its inmates, although it did permit inmates to participate in what it terms "temporary community releases." These are trips of up to 72 hours that are taken outside the institution for specific approved purposes.

* Welfare and Institutions Code Section 7281 provides that the guardian or conservator of a patient may demand and receive money received by the hospital for his ward or conservatee.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 11

Under Penal Code Section 2690, the Director of Corrections may authorize the removal of inmates from prisons or other adult detention institutions. Unless the inmate is removed for medical treatment, the removal cannot exceed three days. Inmates may leave departmental institutions on temporary community releases for approved purposes only after such leaves have been approved in writing by the head of the institution or his designee. Recently approved purposes include employment interviews and examinations and arrangements for housing.

The Director of Corrections has statutory authority to require inmates to reimburse the State for total or partial expenses incurred by the State for temporary releases other than those involving medical treatment. Department policy does require inmates to reimburse the department for the expenses of the temporary releases.

The Department of Corrections will authorize releases for a period no longer than necessary to accomplish the stated and approved purposes. The department strictly interprets the maximum limit of three days as 72 hours and counts that time from time of departure from the institution to the time of return to that institution. Under statutory limitations, no extension of time may be legally granted.

The department has identified categories of inmates not eligible for temporary community releases, including wards of the Department of Mental Health and the California Youth Authority. However, these wards may be eligible if the agencies responsible for them approve the temporary releases.

The Department of Corrections categorizes inmates who are eligible for temporary community releases according to those who require supervision and those who do not require supervision. Inmates who require supervision include sex offenders and psychiatric patients who are not a menace to others. The Chief of Institution Services for the Department of Corrections told us that the department can permit unsupervised temporary community releases for its inmates whom the institution head considers not to be serious custody risks.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 12

Before obtaining the authorization for temporary release from the head of the institution, department staff prepare a detailed plan that includes the purpose of the proposed trip, the destination, travel arrangements, the telephone number and address of where the inmate may be contacted at all times, a budget, and the inmate's signature accepting the conditions of the leave. After the plan is approved, and before the inmate's departure, the regional parole administrator is notified. Inmates who fail to return from leave within the designated period are charged with escape.

Between January 1982 and May 1982, the Department of Corrections authorized community releases for the following reasons:

<u>Reason for Temporary Release</u>	<u>Number of Inmates</u>
Interviewing for Employment	81
Making Residential Arrangements	2
Taking Employment Examinations	10
Obtaining Necessary Licenses	2
Registering for College Courses	9
Miscellaneous*	<u>10</u>
Total	<u>114</u>

The inmate bears all expenses for the temporary community release, including costs of supervision when necessary. If the inmate is unable to pay, and if the escort is volunteered, a state vehicle may be provided. For the period from January 1982 through May 1982, the department charged an estimated \$5,400 to the General Fund, primarily for vehicle costs for these activities, and credited 81 hours of official business and compensatory time off, mainly for vocational education instructors to accompany inmates to employment-related examinations and licensing tests.

* This category includes appearances before the Assembly Ways and Means Committee in Sacramento and the Prison Law Offices Board of Directors at San Quentin. It also includes training-related trips to a metal fabrication and silk screen demonstration as well as a trip to a dry cleaning plant.

Honorable Walter M. Ingalls
Chairman, and Members of the
Joint Legislative Audit Committee
October 7, 1982
Page 13

CONCLUSION

Atascadero, Napa, and Patton state hospitals provide field trips for their patients, although Patton no longer permits its penal code patients to participate in these trips. All three hospitals approve and control field trips by selecting patients who will benefit from the trips, by having the staff who treat and supervise the treatment of patients to approve the field trips, and by having hospital staff supervise patients to ensure the safety of both the community and the patient.

The wages of supervising hospital staff and the costs of transportation for field trips are charged to the State's General Fund, although supervising staff wages do not represent an additional cost to the hospitals. Patients and staff use their own money for the purchases they make during field trips.

Finally, the Department of Corrections permits inmates to leave its facilities for temporary community releases. Recent temporary community releases were authorized for activities such as participating in employment interviews and examinations and making residential arrangements. The department did not authorize any recreational releases. The Department of Corrections has specific procedures for temporary community releases, and under department policy, inmates reimburse the department for costs associated with the temporary releases.

Respectfully submitted,



THOMAS W. HAYES
Auditor General

Staff: Steven L. Schutte, Audit Manager
Allison G. Sprader

Attachment: Responses to the Auditor General's Report

Department of Mental Health
Department of Developmental Services
Department of Corrections

DEPARTMENT OF MENTAL HEALTH

1600 — 9th STREET
SACRAMENTO, CA 95814
(916) 323-8173



September 22, 1982

Mr. Thomas W. Hayes
Auditor General
660 J Street, Suite 300
Sacramento, CA 95814

Dear Mr. Hayes:

Thank you for providing us the opportunity to respond to your report concerning field trips of state hospital patients. Your report accurately portrays the data and current procedures regarding field trips from state hospitals.

I should point out that as these procedures relate to Penal Code (PC) patients, we are in the process of "tightening up". Patton's procedures now virtually prohibit any field trips for a PC patient. Atascadero's rules do not allow recreational trips, although, by exception, carefully supervised field activity can be allowed. Napa has a more limited PC patient population (both in size and security risk level), and has allowed some outside recreational activity for selected PC patients. We are reviewing the policies of all three hospitals to assure uniform application to all patients of high risk.

We will continue to work to carefully assure that our policies meet the dual goals of treatment and safety and will continue to monitor all the hospitals' activities in this area closely.

Sincerely,

A handwritten signature in black ink that reads "K. Wagstaff".

KENNETH J. WAGSTAFF
Director

cc: Douglas X. Patino
Steven Shon, M.D.
Delmar R. Gregory, M.D.

DEPARTMENT OF CORRECTIONS

SACRAMENTO , CA 95814

630 K Street, (916) 445-7688



September 24, 1982

Mr. Thomas W. Hayes
Auditor General
Officer of the Auditor General
660 J Street, Suite 300
Sacramento, CA 95814

Dear Mr. Hayes:

I have reviewed that portion of your report that discusses the temporary release of inmates from Department of Corrections institutions. The report is an accurate account of the policies and practices of the department regarding temporary releases for pre-parole preparations and for training.

In addition to the 114 temporary releases listed on page 12 of your report, we also had 255 temporary releases due to family emergencies such as serious illnesses or deaths. I understand that the scope of your inquiry did not include this type of release but I am giving you this information for whatever use as you may wish to make of it.

Sincerely,

A handwritten signature in cursive script that reads "Ruth L. Rushen".

RUTH L. RUSHEN
Director of Corrections

DEPARTMENT OF DEVELOPMENTAL SERVICES

1600 9TH STREET
SACRAMENTO, CA 95814
TTY 323-5901



(916) 323-3131

September 17, 1982

Mr. Thomas W. Hayes, Auditor General
660 J Street, Suite 300
Sacramento, CA 95814

Dear Mr. Hayes:

Thank you for the opportunity to review the draft of your report concerning field trips attended by patients at state hospitals. To the best of my knowledge, the report accurately reflects process and practice at hospitals now, or formerly, under the jurisdiction of this Department.

Sincerely,

A handwritten signature in cursive script that reads "David E. Loberg".

David E. Loberg, Ph.D.
Director