



FORENSIC PSYCHIATRIC SERVICES COMMISSION

An agency of the Provincial Health Services Authority

ANNUAL REPORT 2002 - 03

*Message from
Leslie Arnold,
President*

With the completion of our first full fiscal year as a member agency of the Provincial Health Services Authority, the Forensic Psychiatric Services Commission can reflect back on many achievements, new opportunities and significant change. It has been another eventful year. >



FORENSIC PSYCHIATRIC SERVICES COMMISSION

REGIONAL SERVICES

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> *Message from the President, continued*

One recent accomplishment was the appointment of Lisa McMurray to the newly created position of Director of Patient Services, with responsibility for both the Forensic Psychiatric Hospital and the six Regional Clinics. Trained in Australia as a psychiatric nurse, Lisa has more than a decade of senior management experience. This includes a leadership role in a tertiary mental health facility in Charters Towers, Australia, and most recently as clinical nurse manager of forensic services at Saskatchewan Hospital in North Battleford, Saskatchewan. She also has extensive experience developing and implementing nurses training and orientation programs.

The appointment of Lisa McMurray is another progressive step in a series of changes designed to more closely align hospital and community-based forensic psychiatric services in a stronger care continuum. With one administrator overseeing both hospital and regional programs, the opportunity exists to enhance the continuity of care for patients and families as they move through our system.



Leslie
Arnold,
President

The need for better coordination of Forensic Psychiatric Services with other elements of the mental health system is a priority for our organization, and was acknowledged in the Provincial Mental Health Plan. With the growing number of people with mental illness coming into conflict with the law, there is an increasing need to improve community-based services and supports.

The Forensic Psychiatric Services Commission is addressing this priority in a number of ways, including building upon our current working relationships to strengthen linkages between forensic services and community mental health programs. Through closer collaboration among service providers including the regional health authorities, police, corrections, and other related agencies, we will continue to improve coordination of services and supports for mentally disordered offenders.

As we work to strengthen our community partnerships, FSPC clinical leaders conducted a series of meetings with judges and other court officials in the Lower Mainland last year to provide information on our services and clarify roles.

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Meetings were also held with the BC Review Board representatives and with Mental Health Directors in each of the Regional Health Authorities. As well, representatives from FPSC Regional Clinics participate in local Mentally Disordered Offender Working Groups and collaborate closely with community service providers to identify new opportunities for enhancing service delivery and coordination to improve outcomes for forensic clients and mentally disordered offenders.

Another recommendation in the Provincial Mental Health Plan was the transfer of the six FPSC Regional Clinics to the health authorities. Our concerns for this change related to the highly specialized nature of forensic psychiatry and the potential for this expertise to become diluted in a decentralized model. We were pleased at the government's preliminary decision to maintain the current service model for forensic psychiatric services in British Columbia. The FPSC clinics and hospital will remain together as part of an integrated, specialized provincial service with close linkages to each of the regional health authorities.



As an agency of the Provincial Health Services Authority (PHSA), the Forensic Psychiatric Services Commission participated in a major realignment of corporate and administrative services over the past year. This has included establishing closer links with Riverview Hospital as part of the PHSA Mental Health Portfolio.

This corporate realignment included bringing finance staff from Riverview and Forensic Psychiatric Services Commission together in one location at Riverview Hospital. While the work remains separate for each agency, the benefits of this co-location include a more efficient financial service for both sites, with enhanced accountability under one finance director. More changes to finance and other corporate functions, like Human Resources and Information Management/Information Technology are expected as the PHSA progresses with implementing its new corporate model.

Another example of our closer working relationship with Riverview Hospital is the joint accreditation process which is currently underway. Both Forensic

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Psychiatric Services Commission and Riverview Hospital were due for accreditation surveys in 2003 and have worked together on an integrated process that saves a significant amount of time for those individuals who would have been required to participate in both processes. We have also benefited financially by conducting a joint accreditation survey as the costs associated with one combined survey are significantly less than those required to support two independent surveys. This joint accreditation survey, scheduled for November 2003, is the first of its kind and will establish a standard for future accreditation process for the other PHSA agencies.

In spite of the many challenges and changes of the past year, the Forensic Psychiatric Services Commission ended the fiscal year with a modest surplus of \$2,410. This is a reflection of staff dedication and creativity to ensure our resources are used in the most effective and efficient manner possible. Working within our allocated budget, FPSC actually increased the number of inpatients and outpatients cared for at the Forensic Psychiatric Hospital and

through the six Regional Clinics last year.

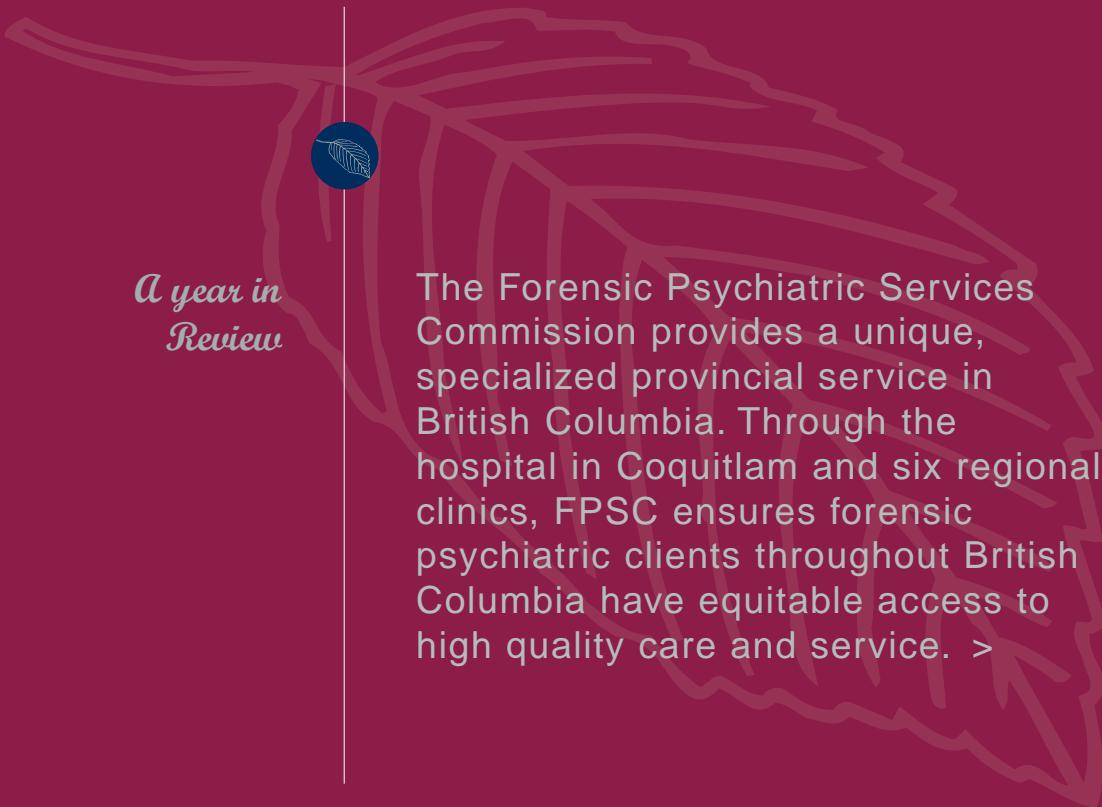
Details of the significant achievements of FPSC staff and physicians are outlined in this report.

It has been a busy and challenging year for everyone and I want to take this opportunity to recognize the tremendous efforts of all FPSC staff and physicians. As our organization continues to evolve as part of the PHSA we will continue to work together to build upon the high quality, specialized provincial services provided by the Forensic Psychiatric Services Commission.



Leslie M. Arnold, President

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A Year in Review



*A year in
Review*

The Forensic Psychiatric Services Commission provides a unique, specialized provincial service in British Columbia. Through the hospital in Coquitlam and six regional clinics, FPSC ensures forensic psychiatric clients throughout British Columbia have equitable access to high quality care and service. >

> *A year in review, continued*

Our specialized, multi-disciplinary health care teams also support the BC Review Board and court authorities across the province with expertise, advice and opinions to assist with sentencing and decision-making. The following provides a brief overview of organizational achievements and challenges for the 2002/03 fiscal year.

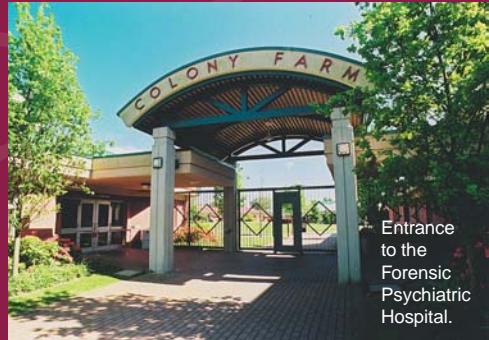
Performance Standards Achieved

FPSC has established a number of performance indicators to monitor the quality and effectiveness of the services provided.

In virtually all areas, FPSC has met or exceeded performance standards for the 2002/03 fiscal year. For example, FPSC has a standard to complete in custody court-ordered pre-sentence assessments within 30 days and all such assessments were completed within 28 days or less last year. The standard for completing out of custody assessments is 42 days, all of which were completed in less than 40 days. Patients waited less than ten days for admission to the Forensic Psychiatric Hospital for treatment or assessment



and the hospital occupancy rate averaged 98.4% More information on FPSC performance indicators is available on the FPSC Web site at www.forensic.bc.ca. A Patient Concerns Committee has also been established for FPH to review any complaints or concerns brought forward by patients and families. Working in cooperation with the Office of the Ombudsman, this committee is another example of how FPSC is working to ensure high quality patient-focused care.



Entrance to the Forensic Psychiatric Hospital.

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Hospital Bed Realignment Improves Access

In order to create more maximum security beds within existing financial resources, FPSC altered bed allocations at the hospital. This enabled FPSC to more effectively respond to the increasing number of court-ordered psychiatric assessments and to accommodate referrals from Corrections in a more timely manner.

Program Review Enhances Services

The Forensic Psychiatric Hospital conducted a comprehensive program review to evaluate current services and determine future needs. Recommendations from this review focused on enhancing patient programs based on current research demonstrating best-practice standards. These recommendations are currently being reviewed and once decisions are made program changes will be phased in over the next three years.

Creation of Transition Beds Improves Utilization

A service redesign resulted in the creation of 12 new outpatient beds

for FPSC clients who no longer require the specialized services and secure environment of the Forensic Psychiatric Hospital, but continue to need specialized housing and supervision. Cottages on the Riverview Hospital grounds were renovated to accommodate these clients as they make the transition from hospital to community living. Funding for these clients is provided through the government Access Program, which provides resources to facilitate supported discharges for patients ready to leave hospital. The Cottage Program is managed by a contract agency as part of FPSC Regional Programs. With the ability to discharge FPSC patients to the Cottage Program, beds are freed-up and available at the Forensic Psychiatric Hospital, improving utilization of hospital resources and increasing FPSC's ability to respond to referrals.

Telehealth Initiatives Reduce Costs and Improve Access

Recruitment challenges have required FPSC clinicians to travel from the Lower Mainland to provide court-ordered pre-sentence assessments to clients in Prince George. With implementation of

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Telehealth, these assessments are now done via video link with the Prince George Regional Clinic. This technology has reduced the travel costs and improved accessibility of services for FPSC clients in the north.



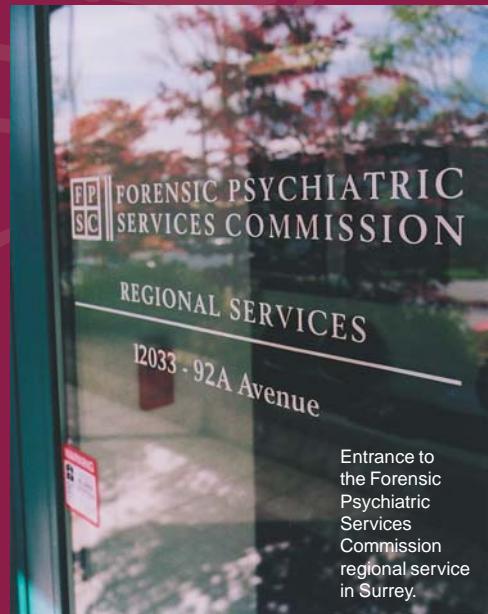
Recruitment Strategies Address Staffing Challenges in the North

A recruitment firm was hired to address staffing issues in the northern areas of British Columbia. With emphasis on recruiting psychologists, psychiatrists, social workers and nurses, FPSC hopes to address the significant staffing shortages that currently exist. A half-time position of professional practice leader for psychologists has also been created to support these recruitment priorities and address professional practice and retention issues.

Enhanced Emphasis on Education Demonstrates Commitment to Excellence

FPSC's Grand Rounds is now accredited by the Certification Program of the Royal College of Physicians and Surgeons of Canada. This ongoing series of educational events, based at the Forensic Psychiatric Hospital, is published on

the UBC education Web site and accessible through Telehealth links to the six FPSC Regional Clinics. FPSC's commitment to excellence through education is also demonstrated through the recent appointments of Dr Wahan Wanis, Director of Medical Education and Judy Humeny, FPSC Education Services. A survey of educational needs for FPSC staff and clinicians was also conducted last year, to look at core competencies across all professions.



Entrance to the Forensic Psychiatric Services Commission regional service in Surrey.

Information gained through this survey will guide future educational programs at FPSC.

Realignment of Forensic Liaison Service Improves Consistency

Key changes to the forensic liaison roles focus responsibilities more specifically on bridging and transition services to clients. This emphasizes the important service FPSC provides in linking clients in correctional facilities to appropriate mental health services in the community. These changes enable FPSC to maintain consistent standards of practice throughout the province as well as improve utilization of our limited human and financial resources.

New Sex Offender Program Increases Service Capacity Within Existing Resources

The new Sex Offender Program, developed last year in consultation with the BC Corrections Branch, has improved the quality, consistency and increased the capacity of this specialized provincial service. The program now offers both psycho-



logical and psychiatric components and was designed with a built-in research component to aid in ongoing program planning, evaluation and data collection. Supporting more individuals in more communities across British Columbia at significantly lower costs, the new Sex Offender Program enables the expansion of this important provincial service without increasing the overall budget. The number of clients cared for increased from approximately 200 to 384 annually, with service locations expanding from 13 to 18 communities in British Columbia.

Clinical Records Review Standardizes Processes

A review of clinical records management in the six FPSC Regional Clinics resulted in new processes being established across all Regional Programs. This project has also positioned FPSC to explore future initiatives for sharing information across health regions. By establishing a standardized system, FPSC is supporting better patient care through improved information management.

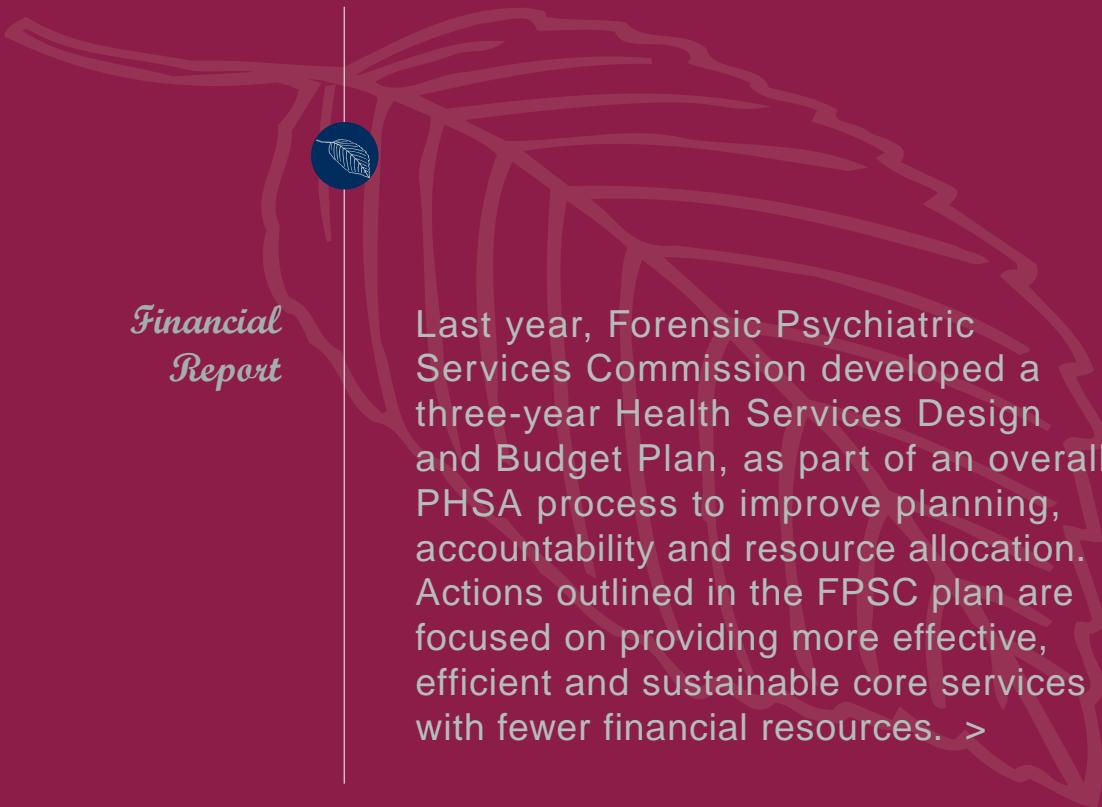
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Research Initiatives Strengthen Academic Links

FPSC continues its long tradition of advancing and creating knowledge relating to risk of violence and recidivism. There is active collaborative research underway with colleagues in Ontario for a new risk assessment tool and FPSC Regional Programs developed a unique tool currently being piloted to track the clinical effectiveness of programs. Four FPSC staff recently had a follow-up study published in the Canadian Journal of Psychiatry, focused on persons found Not Criminally Responsible on Account of Mental Disorder (NCRMD). FPSC research initiatives are frequently partnered with the University of BC and with Simon Fraser University.

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Financial Report





Financial Report

Last year, Forensic Psychiatric Services Commission developed a three-year Health Services Design and Budget Plan, as part of an overall PHSA process to improve planning, accountability and resource allocation. Actions outlined in the FPSC plan are focused on providing more effective, efficient and sustainable core services with fewer financial resources. >

> *Financial report, continued*

This commitment to improve resource allocation is demonstrated with service redesigns like the new Sex Offender Program, which increases access and service capacity and reduces costs, and the realignment of beds at the Forensic Psychiatric Hospital to improve access to secure beds. The redesign of the Forensic Liaison Program is also an example of how resources can be reallocated to reduce costs, improve the quality and consistency of services while ensuring the best use of limited staffing resources.

The need to meet increasing service demands within existing financial resources is an ongoing challenge for Forensic Psychiatric Services, and all PHSA agencies. However this priority must be met in order to create and maintain a high quality provincial mental health system that is sustainable for the future.



Selected financial information is presented on the following pages. (Comprehensive audited financial statements are available on the FPSC Web site: www.forensic.bc.ca).

FINANCIAL INFORMATION

Auditors' Report To the Board of Commissioners of Forensic Psychiatric Services Commission

We have audited the balance sheet of the Forensic Psychiatric Services Commission as at March 31, 2003 and the statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the Commission's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Commission as at March 31, 2003 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

The financial statements as at and for the year ended March 31, 2002 were audited by another firm of chartered accountants, except for the adjustment related to the change in the Branch's accounting policy for capitalization of assets, as described in note 3 to the financial statements*.

**KPMG LLG, Chartered Accountants,
Vancouver, Canada, May 13, 2003**

*Comprehensive audited financial statements are available on the FPSC Web site: www.forensic.bc.ca.

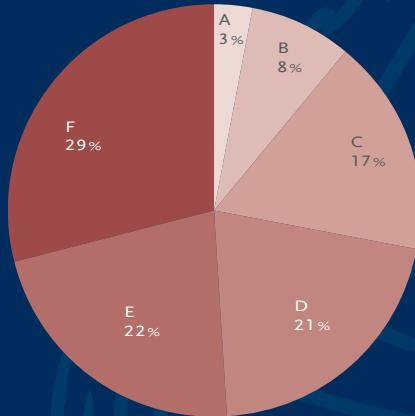
Statements of Financial Position (expressed in thousands of dollars), March 31, 2003 and 2002

	2003	2002 (Restated)
Assets		
Current assets:		
Cash	\$ 7,384	\$ 5,557
Accounts receivable	1,656	1,242
Inventories	67	314
Prepaid expenses	90	56
	9,197	7,169
Long-term receivable	–	1,023
Capital assets	2,525	1,897
	\$11,722	\$10,089
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 6,512	\$ 5,850
Deferred contributions for designated purposes		1,245
	6,512	7,095
Accrued sick and severance	729	694
Deferred capital contributions	1,845	2,074
	9,086	9,863
Net assets:		
Invested in capital assets	680	
Unrestricted	1,956	226
	\$11,722	\$10,089

Statements of Operations (expressed in thousands of dollars), March 31, 2003 and 2002

	2003	2002 (Restated)
Revenues:		
Contributions:		
Provincial Health Services Authority operating grants	\$ 49,865	\$ –
Ministry of Health Services operating grants	45,374	
Medical Services Commission	4,389	4,118
Investment income	176	266
Other revenues	146	205
	<u>54,576</u>	<u>49,963</u>
Expenses:		
Compensation and benefits	33,330	32,521
Supplies	2,630	2,065
Sundry	2,267	2,297
Equipment and building services	9,187	8,845
Referred out/contracted services	4,752	4,186
	<u>52,166</u>	<u>49,914</u>
Excess of revenues over expenses before invested in capital assets	2,410	49
Invested in capital assets:		
Amortization of deferred capital contributions	384	849
Amortization of capital assets	(384)	(849)
	<u>Excess of revenues over expenses</u>	<u>\$49</u>

STATISTICS



FPSC Fiscal 2002/2003 Expenditures

- A** Access/HOP Patient Housing Programs \$1,755,050
- B** Professional/Medical Services \$4,055,925
- C** FPSC Corporate Service & Patient Programs \$8,960,191
- D** FPH Facilities \$11,206,040
- E** Regional Outpatient Programs \$11,339,075
- F** FPH Inpatient Nursing Units \$14,849,719

Inpatient Admissions

	00/01	01/02	02/03
Assessment	272	207	341
Treatment	100	194	119
Total	372	401	460

Regional Clinics Admission Statistics

	00/01	01/02	02/03
Assessment	908	818	914
Treatment	1577	1382	1382
Total	2485	2200	2395

Inpatient Bed Days

	01/02	02/03
Total bed days available	74,315	72,030
Total bed days used	71,637	70,845
Percent occupancy	96.4	98.4

FPSC at a glance >

The Forensic Psychiatric Services

Commission is a multi-site health organization providing specialized hospital and community-based services for adults with mental illness who are in conflict with the law. *Our mandate* is to provide court-related forensic psychiatric assessment, treatment and community case management and to enable the safe reintegration of patients/clients back into the community. These services are provided through the Forensic Psychiatric Hospital in Coquitlam and through six FPSC Regional Clinics located in: Kamloops, Nanaimo, Prince George, Surrey, Vancouver & Victoria.

- Annual operating budget: \$50,000,000
- Number of inpatients admitted annually: 460
- Number of outpatients admitted annually: 2,395
- Number of inpatient beds at Forensic Psychiatric Hospital: 211
- Number of FPSC regional clinics: 6
- Number of FTEs (full time equivalent staff): 450
- Number of psychiatrists & psychologists: 68 (FT/PT)
- Number of general practitioners: 2.5 FTEs

CONTACTING FPSC

Forensic Psychiatric Hospital

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Port Coquitlam, B.C. V3C 5X9
Canada
Telephone: 604.524.7700
Facsimile: 604.524.7905

Regional Services & Community Offices

Nanaimo

101 - 190 Wallace Street
Nanaimo, B.C. V9R 5B1
Canada
Telephone: 250.741.5733
Facsimile: 250.741.5740

Victoria

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Canada
Telephone: 250.387.1465
Facsimile: 250.356.2145

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12033 92A Avenue
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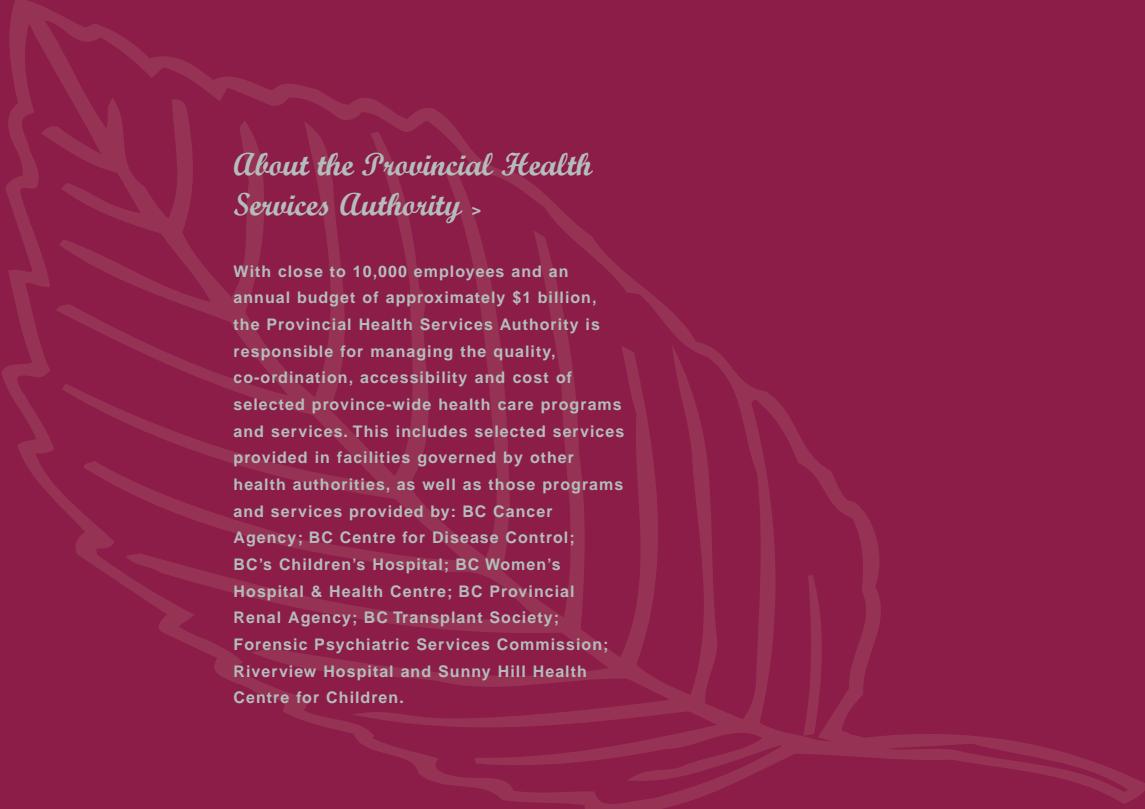
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www.forensic.bc.ca



*About the Provincial Health
Services Authority >*

With close to 10,000 employees and an annual budget of approximately \$1 billion, the Provincial Health Services Authority is responsible for managing the quality, co-ordination, accessibility and cost of selected province-wide health care programs and services. This includes selected services provided in facilities governed by other health authorities, as well as those programs and services provided by: BC Cancer Agency; BC Centre for Disease Control; BC's Children's Hospital; BC Women's Hospital & Health Centre; BC Provincial Renal Agency; BC Transplant Society; Forensic Psychiatric Services Commission; Riverview Hospital and Sunny Hill Health Centre for Children.



FORENSIC PSYCHIATRIC
SERVICES COMMISSION

An agency of the Provincial Health Services Authority