

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

April 9, 2003

TO: Honorable Jane Nelson, Chair, Senate Committee on Health & Human Services

FROM: John Keel, Director, Legislative Budget Board

IN RE: SB59 by Zaffirini (Relating to the mangement of behavior of residents of certain facilities.),
Committee Report 1st House, Substituted

Estimated Two-year Net Impact to General Revenue Related Funds for SB59, Committee Report 1st House, Substituted: a negative impact of (\$273,000) through the biennium ending August 31, 2005.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2004	(\$273,000)
2005	\$0
2006	\$0
2007	\$0
2008	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from GENERAL REVENUE FUND 1
2004	(\$273,000)
2005	\$0
2006	\$0
2007	\$0
2008	\$0

Fiscal Analysis

The bill would require each health and human services agency that regulates the care or treatment of a resident at a facility to adopt rules to define acceptable restraint holds that minimize the risk of harm to a facility resident and to govern the use of seclusion of facility residents.

The bill would direct the Commissioner of Health and Human Services to establish an interagency workgroup to develop and recommend best practices in policy, training, safety, and risk management for a health and human services agency to use in managing the behavior of the residents of a facility. The bill would direct that representatives of certain agencies be appointed to the workgroup. As a member of the workgroup, the bill would require the Department of Human Services to develop a comprehensive reporting system that collects and analyzes data on the use a behavioral management

techniques, complies with federal reporting requirements, and documents the death/serious injury of a resident related to restraint use.

The commissioner would file a report with certain legislative committees no later than July 1, 2004 which describes the workgroup's recommended best practices. The commissioner would file a report with certain legislative committees no later than January 1, 2005 which describes the actions taken by health and human services agencies to implement the best practices identified by the workgroup.

Methodology

Most health and human services agencies identified to participate in the workgroup indicate that related activities could be absorbed within existing resources.

The Health and Human Services Commission (HHSC) estimated that administrative activities provided by the agency related to support of the workgroup study and preparation of the required reports would require 624 work hours during fiscal year 2004 or an increase of 0.3 of a Full-time-equivalent (FTE) and an appropriation of approximately \$13,000 in General Revenue and All Funds. HHSC indicates that it could absorb this responsibility within existing resources.

The Department of Human Services (DHS) indicated a fiscal impact of \$260,000 cost to General Revenue related to the technology necessary to create the "comprehensive reporting system". The agency indicated that by modifying the CARES information system to track incidents of a specific nature related to restraints the agency would meet the requirements of the bill. DHS indicated that federal matching funds would not be available for this modification.

Technology

The Department of Human Services provided an estimate of 2,500 hours for the modifications needed to develop the comprehensive reporting system required in this bill. This cost should occur in fiscal year 2004. Programming hours for fiscal year 2004 are estimated at \$104 for a total of \$260,000.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 324 Department of Human Services, 501 Department of Health, 517 Commission on Alcohol and Drug Abuse, 529 Health and Human Services Commission, 530 Department of Protective and Regulatory Services, 655 Department of Mental Health and Mental Retardation

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