

# DEEDS IN THE GENTLENESS OF WISDOM



**METHODIST BEHAVIORAL HOSPITAL'S  
COMMUNITY HEALTH NEEDS ASSESSMENT  
2021**



# PREFACE

The Community Health Needs Assessment for Methodist Behavioral Health System, Inc., previously issued in 2019, has been researched, compiled and updated for fiscal year 2021. The report is available on our website at [MethodistFamily.org/Behavioral-Hospital.html](https://MethodistFamily.org/Behavioral-Hospital.html) as well on our blog at [MethodistFamily.org/Our-Blog/](https://MethodistFamily.org/Our-Blog/). This report has also been distributed to media outlets in Arkansas. Our research strategy was planned and executed by Methodist Behavioral Health System, Inc. and Methodist Family Health, Inc. staff experienced in behavioral health for children, youth and families, and this report was vetted by a variety of public and private child welfare advocates.

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**ANDY ALTOM**

President and CEO

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# EXECUTIVE SUMMARY

According to the Internal Revenue Service (IRS), the Patient Protection and Affordable Care Act (the ACA), enacted March 23, 2010, added new requirements codified under Section 501(r) for organizations that operate one or more hospital facilities (hospital organizations) to be described in Section 501(c)(3), as well as new reporting requirements and a new excise tax.

A hospital facility is a facility that is required by a state (including only the 50 states and the District of Columbia) to be licensed, registered, or similarly recognized as a hospital. Multiple buildings operated under a single state license are considered to be a single hospital facility. In addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545, hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3).

These additional requirements are:

1. Community Health Needs Assessment (CHNA) - Section 501(r)(3),
2. Financial Assistance Policy and Emergency Medical Care Policy - Section 501(r)(4),
3. Limitation on Charges - Section 501(r)(5), and
4. Billing and Collections - Section 501(r)(6).

These provisions apply to taxable years beginning after the date of enactment of the Affordable Care Act (ACA), except for the CHNA requirement, which applied to tax years beginning after March 23, 2012.

Methodist Behavioral Health System, Inc.'s (MBH) initial Community Health Needs Assessment was issued in March 2019. We anticipated in that report that programs and processes set forth in that assessment would continue to change as we identified and prioritized needs for improving the psychiatric, behavioral and emotional health of the Arkansas children and families we serve. This report has been updated to reflect changes since 2019.



# ABOUT METHODIST BEHAVIORAL HEALTH SYSTEM, INC.



Methodist Behavioral Health System, Inc., (MBH), is a nonprofit behavioral health hospital for children ages three to 17. It is licensed to provide acute (short-term) care to boys and girls ages three to 17 and sub-acute (long-term) care to boys ages five to 11. If a child is assessed to be a danger, MBH can provide care to the child so the child can return to a less restrictive environment. This can mean the child can return to the family home, a psychiatric residential treatment center or therapeutic group home.

The care MBH provides includes:

- Compassionate and comprehensive care for children with anxiety, depression, and behavioral and emotional issues;
- Intensive therapy for individuals, families and groups;
- Board-certified psychiatrists for children and adolescents, experienced mental health therapists, case managers, registered nurses, certified teachers, recreational therapists and behavioral instructors;
- The Teaching-Family Model of Care, which emphasizes positive teaching of functional skills and behaviors;
- Patient aftercare and follow-up through therapeutic day treatment programs or outpatient and school-based counseling.

For fiscal year 2020-2021, 1,216 of MBH's 1,475 discharges (82 percent) representing 16,294 patient days (87 percent) were attributable to patients served by either the traditional Arkansas Medicaid program, the Arkansas Medicaid managed care PASSE programs, or were in the custody of state agencies, and, therefore, deemed indigent. Additionally, 82 percent of the patients receiving services in MBH's outpatient and school-based programs were served by these programs. These percentages are consistent with percentages for prior fiscal periods from 2013 to 2020.



# GROWING PROMISE

## About Methodist Family Health

Methodist Family Health, Inc. (MFH) is a management company jointly owned by Methodist Behavioral Health System, Inc. (MBH) and United Methodist Children's Home, Inc. (MCH). MFH provides management services to these entities along with Methodist Family Health Foundation, Inc. (MFHF), all three of which are 501(c)(3) nonprofit organizations. Collectively, these four entities are referred to herein as the Methodist Family Health Continuum of Care. Services provided by these entities within the Methodist Family Health Continuum of care include:

- Methodist Behavioral Hospital in Maumelle;
- Two psychiatric residential treatment centers, one located in northeast Arkansas and one located in Little Rock;
- Three qualified residential treatment programs in northeast, central and southern Arkansas;
- Eight outpatient counseling clinics located throughout the state;
- Eight school- and community-based outpatient counseling locations throughout the state;
- A therapeutic day treatment program in Little Rock;
- A supervised independent living home in Fayetteville;
- Arkansas Center for Addictions Research, Education and Services (Arkansas CARES) in Little Rock, a three-month, intensive, residential treatment program for mothers who have a dual diagnosis of a mental health issue and addiction in which the mothers can keep their children (up to the age of 12) with them during treatment; and
- Kaleidoscope Grief Center in Little Rock, which serves grieving children, teens and families in Arkansas by promoting healing through education, therapeutic and recreational services, support programs and counseling;

The mission of the Methodist Family Health Continuum of Care is to provide the best possible care to those who may need our help. Since 1899, the Methodist Family Health Continuum of Care has helped rebuild the lives of Arkansas children who are abandoned, abused, neglected and dealing with psychiatric, behavioral, emotional and spiritual issues. The Methodist Family Health Continuum of Care is accredited by The Joint Commission as well as the Teaching-Family Association.





# COMMUNITY HEALTH NEEDS ASSESSMENT OVERVIEW

The Internal Revenue Code, in addition to the general requirements for tax exemption under Section 501(c)(3) and Revenue Ruling 69-545, requires that hospital organizations must meet the requirements imposed by Section 501(r) on a facility-by-facility basis in order to be treated as an organization described in Section 501(c)(3).

Section 501(r)(3)(A) requires a hospital organization to conduct a community health needs assessment (CHNA) every three years and to adopt an implementation strategy to meet the community health needs identified through the CHNA. Section 501(r)(3)(B) provides that the CHNA must:

- Consider input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health, and
- Be made widely available to the public.

A hospital organization meets the requirements of Section 501(r)(3) with respect to a hospital facility it operates:

- If the hospital facility has conducted a CHNA in the taxable year or in either of the two immediately preceding taxable years, and
- An authorized body of the hospital facility has adopted an implementation strategy to meet the community health needs identified through the CHNA on or before the 15th day of the fifth month after the end of such taxable year.



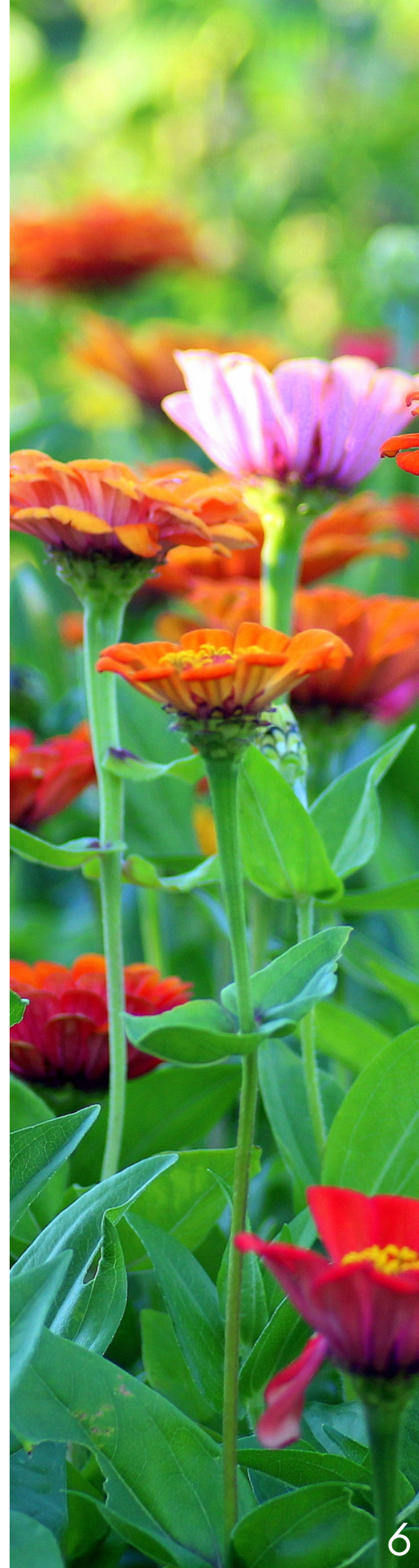
According to the Centers for Disease Control and Prevention, a community health needs assessment (CHNA), refers to a state, tribal, local or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis. A community health assessment gives organizations comprehensive information about the community's current health status, needs, and issues. This information can help develop a community health improvement plan by justifying how and where resources should be allocated to best meet community needs. Benefits include:

- Improved organizational and community coordination and collaboration;
- Increased knowledge about public health and the interconnectedness of activities;
- Strengthened partnerships within state and local public health systems;
- Identified strengths and weaknesses to address in quality improvement efforts;
- Baselines on performance to use in preparing for accreditation; and
- Benchmarks for public health practice improvements.

## Medical Service Area

During MBH's fiscal year, which ended June 30, 2021, the Methodist Family Health Continuum of Care provided care for 4,692 children and families with 127,582 services being provided throughout Arkansas. While MBH accepts patients from every county in the state, for this assessment, we have identified the medical service area based on the number of admissions by county over the last two years. The results were consistent year over year for these counties:

- Pulaski (19.4 percent),
- Craighead (8.2 percent),
- Faulkner (6.7 percent), and
- Garland (6.6 percent).







Of the 1,475 patients admitted to MBH in 2020–2021, 604 (**40.9 percent**) were from these four counties. According to the National Center for Children in Poverty, 51 percent of the children under the age of 18 in Arkansas are from low-income families. Compare this to 39 percent of the United States’ children under the age of 18 who are from low-income families. In Arkansas, 88 percent of children under the age of 18 who are from low-income homes have at least one parent in the home. Nationally, the percentage is 95 percent.

From March to June 2021, the administration of MBH and MFH began the process of contacting our community advisory committee from our previous 2017–2018 CHNA about participating in the 2020–2021 CHNA process. This CHNA steering committee consisted of:

- Kelli Reep, APR, director of communications for Methodist Family Health
- Shari Willding, administrator of Methodist Behavioral Health System, Inc.; and
- Amanda Pierce, director of business development for Methodist Family Health.





# COMMUNITY NEEDS

In March 2020, the administration of MFH, MBH and MCH grappled with how to continue to pursue our mission of providing the best possible care to those who may need our help while facing a global pandemic. The first confirmed case of the novel corona virus (COVID-19) in Arkansas was reported March 11, 2020, and since that time, the Methodist Family Health Continuum of Care deployed emergency plans to continue operations while keeping safety and health of our patients, staff and community our first priority.

According to the June 30, 2021 Arkansas Democrat-Gazette article based on information from the Arkansas Department of Health, Johns Hopkins University, the New York Times and the Centers for Disease Control, Arkansas ranked 12th in the nation for COVID-19 cases with 348,220 cases being reported. Reporting 11,539 per 100,000 people with 5,897 deaths being reported since the start of the pandemic. 2,842,720 tests have been administered with 12.2 percent being positive for Covid-19. Ranking .94 in tests per capita.

\*New curve cases, Arkansas jumped to 361 from 165.

\* Numbers used for new cases curves are 7-day averages. Total case counts are from Monday, the most recent day in which all states' data were available.

In Pulaski County where MBH is located, there were more than 32,000 confirmed positive cases with more than 31,000 people who have recovered, and more than 500 confirmed deaths, according to the Arkansas Department of Health. Because Pulaski County is the most populous of the 75 counties in the state, serves as the home to the state's capitol, and has more hospital and healthcare clinics per capita than any other county, it is reasonable to expect it would be the hardest hit by COVID-19. In addition, MBH serves children as young as four and as old as 18 from every county within the state, which increased our need to approach the pandemic as swiftly, prudently, and calmly as possible.





Safety measures put into place in the Methodist Family Health Continuum of Care included:

Employee and Visitor COVID-19 health screening

- Daily patient health screening
- Mask mandate
- Face shield mandate (when transmission rate reached moderate)
- Suspension of therapeutic leave of absence and visitation (resumed in January 2021)
- Socially distant therapeutic programming

HVAC Systems:

- MBH contracted to have five new HVAC units installed. The addition of these units is allowing for the removal of the PTACs on UNITS 1, 2, 3 and 4.
- In terms of infection control, they offer better air circulation and increased fresh air intake which relates to increased air exchange rates improving the facility's indoor air quality.

HVAC UV lights:

- Ultra-Violet lights were installed in all HVAC units at MBH.
- These lights work by killing bacteria, mold and viruses as the air passes by the light.
- These lights also create ionized particles in the air, and when these particles come in contact with surfaces, they continue to kill bacteria, mold and viruses in the areas served by the HVAC units.

Disinfecting Equipment:

- The most recent addition is the Clorox Total360 disinfecting system, a machine which electrostatically charges the disinfectant chemical.
- By electrostatically charging the chemical as it is dispensed, this system helps to ensure total coverage of all surfaces.
- This system is being utilized in addition to our normal housekeeping practices.

Housekeeping Department

- Housekeeping has implemented a two-hour disinfecting schedule in areas of high traffic from outside of the facility to include the front lobby, admissions intake waiting room and admissions intake room.



#### Cleaning Chemicals:

- MBH contracted with Cintas to install automatic dispenser system for the cleaning chemicals in use by the housekeeping department.
- The dispensers ensure the proper mix and concentrations of the chemicals, which are the same hospital-grade chemicals in use in medical hospitals throughout the United States.

Because the Methodist Family Health Continuum of Care prioritizes the well-being of our patients, clients, staff and community, we chose not to assemble a formal committee for this Community Health Needs Assessment update. Instead, our business development team requested our referral sources complete surveys and return to MBH in compliance with every health and safety guideline for COVID-19 set out by the Arkansas Department of Health as well as the Centers for Disease Control and Prevention. The survey results were compiled and are provided here:

## Implementation Strategy of Methodist Behavioral Health System, Inc.

With consideration given to the feedback from the original Community Advisory Committee and the Steering Committee, and in lieu of formalized committees for this Community Health Needs Assessment because of COVID-19, it is recommended that Methodist Behavioral Health System, Inc. continue to implement the following strategies to most effectually impact the medical service area:

1. Continue to work in collaboration with the Department of Health and Human Services to explore opportunities to develop specialized programming for those in foster care.
2. Continue to stay connected to child exploitation research and advocacy groups as screening tools and treatments are being normed and standardized on our population then look to implement these tools and seek training in this area.
3. Explore certification in alternate programming offered under the new service model.
4. Continue to advocate and educate policy makers and decision makers at local and state levels of the gaps in care.
5. Provide community outreach via social media platforms of the great services offered in these areas.





The Methodist Family Health Continuum of Care has recently completed a capital campaign, which raised funding for the construction of a new, multipurpose facility on the Fillmore campus of MCH. As part of our commitment to improving organization and community coordination and collaboration as well as increasing knowledge about public health issues and interconnectedness of activities, MCH intends to make the facility available to the public. In addition to housing a welcome center, chapel, administration offices and storage, this new building will provide neighborhood associations, Alcoholic/Narcotics Anonymous groups and other civic organizations the space to meet (and park) free of charge and within walking and driving distance as well as accessible by public transportation. MFH is planning to develop a regular schedule of speakers and presentations, which will be free and open to the public to attend, based on mental and behavioral health topics such as effective parenting techniques, suicide prevention, working with at-risk youth, etc. The groundbreaking for this facility is set for October 2021, and its construction is scheduled for completion in 2022.







## Considerations for the following Community Health Needs Assessment

1. Engage the Hispanic and/or Latino community by designing the survey tool early in the process with Spanish interpretation and disseminate to the Mexican Consulate in Little Rock as quickly as possible with ample response time.
2. Explore more closely the types of services needed by expanding selections and allowing for qualitative data gathering in the research.

This assessment is being completed prior to the full implementation of behavioral health transformation, and access to care is expected to improve with care coordinators under the provider-led managed care models to more adequately meet the needs of Arkansans.

Once 85 percent of the population of Arkansas has received a vaccine for COVID-19, health and safety guidelines have been amended to allow for in-person meetings, and the health and safety of our patients, clients, staff and community are assured, future MBH assessments are expected to include expanded community involvement as current protocols are eased.



# IMPLEMENTATION STRATEGY FOR METHODIST BEHAVIORAL HEALTH SYSTEM, INC.

## Survey Outcome

With consideration given to the feedback from the original Community Advisory Committee and the Steering Committee, and as a result of the restrictions arising from COVID-19, it is recommended that Methodist Behavioral Health System, Inc. continue to implement the following strategies to most effectually impact the medical service area:

1. Continue to work in collaboration with the Department of Health and Human Services to explore opportunities to develop specialized programming for those in foster care.
2. Continue to stay connected to child exploitation research and advocacy groups as screening tools and treatments are being normed and standardized on our population then look to implement these tools and seek training in this area.
3. Explore certification in alternate programming offered under the new service model.
4. Continue to advocate and educate policy makers and decision makers at local and state levels of the gaps in care.
5. Provide community outreach via social media platforms of the great services offered in these areas.





## Considerations for Future Community Health Needs Assessment

1. Engage the Hispanic and/or Latino community by designing the survey tool early in the process with Spanish interpretation and disseminate to the Consulate of Mexico in Little Rock as quickly as possible with ample response time.
2. Explore more closely the types of services needed by expanding selections and allowing for qualitative data gathering in the research.

NOTE: This assessment was completed prior to the full implementation of Arkansas's behavioral health transformation under which access to care is expected to improve and expand through the utilization of patient care coordinators under the provider-led managed care model. MBH will assess changes and opportunities arising from full implementation and will adjust its programs and services to address identified needs.





# APPENDICES





# ABOUT METHODIST FAMILY HEALTH

In 2019, the Methodist Family Health Continuum of Care celebrated its 120th anniversary. As an organization providing comprehensive psychiatric, emotional, behavioral and spiritual care to children and their families throughout Arkansas, the Methodist Family Health Continuum of Care is comprised of:

- Methodist Behavioral Health System, Inc. in Maumelle, an acute and sub-acute, 60-bed facility for crisis stabilization for children and adolescents in immediate danger of harming themselves, someone else or both;
- Psychiatric residential treatment centers (RTCs) in Little Rock (Fillmore Campus) and Bono (near Jonesboro, known as the Dacus RTC), which assists children and adolescents struggling with chronic psychiatric, emotional and behavioral issues. Psychiatric RTCs stabilize the client's behavior so the client can move to a less-restrictive environment, be that their own home or another facility;
- Three qualified residential treatment programs (QRTPs), which are located in Helena-West Helena, Little Rock and Magnolia, which are residential, community-based programs that provide homes for clients while also providing therapeutic treatment services;
- A day treatment program in Little Rock, which serves kids from several school districts in the state who cannot function in a regular academic setting (such as a classroom) and may need additional support for their educational, behavioral or emotional needs;
- Outpatient counseling clinics, which offer individual, family and group counseling, psychological testing, psychiatric assessments, medication management and other therapeutic services. Our outpatient counseling clinics locations include Alma, Batesville, Fayetteville, Heber Springs, Hot Springs, Jonesboro, Little Rock and Magnolia;
- Community and school-based counseling programs, which provide mental health services to students at and during their normal school days. These programs are located in Jonesboro, Lakeside (Hot Springs), Lincoln, Nettleton, SUCCESS (Jonesboro), Van Buren County and Vilonia;
- Arkansas Center for Addictions Research, Education and Services (Arkansas CARES), which is the only program for adults which MFH offers. Arkansas CARES works with mothers who have a dual diagnosis of a substance addiction and mental health issue. Women can enter this intensive, three-month program and keep their children with them (participants can be pregnant at the time of acceptance into the program and/or have children from infants up to age 12); and
- Kaleidoscope Grief Center, one of the state's only grief centers for children and their families, located in Little Rock.

Initially established in 1899 as the Arkansas Children’s Home, the Methodist Family Health Continuum of Care began as a mission of the Methodist Church in Arkansas. The orphanage in downtown Little Rock later moved to what is now the campus of the United Methodist Children’s Home, Inc. at Fillmore and Charles Bussey in midtown Little Rock. This campus is our oldest and houses our psychiatric residential treatment center, which was completed in 2018, a therapeutic group home and the Arkansas CARES program. When orphanages gave way to the foster care system, our continuum of care likewise expanded our services.

In 2001, the United Methodist Children’s Home, Inc. (MCH) established a sister corporation, the Methodist Behavioral Health System, Inc. (MBH), which purchased a behavioral health facility. In 2003, MCH and MBH jointly formed Methodist Family Health, Inc. (MFH), which serves as the management company of all programs in the Methodist Family Health Continuum of Care.



# METHODIST BEHAVIORAL HEALTH SYSTEM, INC. TIMELINE

1. 1897 - George Thornburgh largely responsible for the establishment of the Arkansas Methodist Orphanage in Little Rock.
  - a. Little Rock Conference appoints committee in 1897, led by Thornburgh, to begin planning the orphanage. Goal - provide short-term care for orphaned children and help find them homes.
2. 1899 - Arkansas Methodist Orphanage was incorporated, officially as The Arkansas Methodist Orphanage of the Methodist Episcopal Church South. A two-story framed house on three lots at 15th and Commerce Streets in downtown Little Rock.
  - a. The house was formerly the Women's Industrial Home.
  - b. Mrs. L.W. Tabor donated a "good frame" building to serve as the orphanage.
3. 1902 - First location of the Arkansas Methodist Orphanage opens.
  - a. First child in the home was Jessie Miller, who was brought in February of that year by Pastor F.E. Taylor of the McCrory Circuit of the White River Conference.
4. 1903-1905 - Mrs. Charles Wightman serves as superintendent of the home.
5. 1905 - J.M.D. Sturgis serves as superintendent of the home.
6. 1905-1907 - T.W. Fisackerly serves as superintendent of the home.
7. 1907-1908 - M.B. Umstead serves as superintendent of the home.
8. 1908 - Thornburgh begins campaign to build a new home and almost single-handedly raised more than \$20,000.
9. 1908-1922 - George Thornburgh serves as superintendent of the home.
10. 1909 - New location secured at 16th and Elm in Little Rock.

11. 1910 – Second location of the Arkansas Methodist Orphanage opens at 16th and Elm Streets in Little Rock.

- a. The Mission of the Arkansas Methodist Orphanage in 1910 was to seek homeless orphans, find loving homes for them and make it possible for families to adopt a child who would be a blessing to their home.
- b. The home was financially supported by church conference claims, Christmas offerings, memorial and the generous support of Little Rock's church women.
- c. The home employed a full-time matron as well as a physician.
- d. Anywhere from 30 to 60 kids were in residence of the home at a time.
- e. Some of the original rules of the home were:
  - i. Children were sent to public schools and usefully employed at the home when not in school.
  - ii. Boys older than 10 and girls older than 14 were not accepted in the home.
  - iii. Mandatory worship services were held each morning and evening in the home.
  - iv. Recreational activities were planned to contribute to the health and physical development of the kids in residence.
  - v. Not allowed were games that "tended toward gambling" or tobacco use.
  - vi. If the matron approved, relatives of the residents could visit them. Regular visiting hours for the public also were available.

12. 1920 – 19 children lived in the orphanage. Of those 19, 17 were received in 1919, and another 20 had been placed in permanent homes.

13. The home received support from church conference assessments as well as quilts, used clothes, an automobile and a fireless cooker.

- a. The Mount Tabor Missionary Society and Sunday School in Cabot, Arkansas gave the home 27 jars of fruit, 11 sacks of potatoes, one sack of turnips, a quilt and a dress.
- b. One donor contributed 10 lbs. of chocolate, three cakes and two gallons of ice cream.
- c. Highland Methodist Church in Little Rock took the residents on a shopping trip, providing each of them with \$1 to spend.

14. 1923 – George Thornburgh dies. Rev. James Thomas takes over as superintendent of the Arkansas Methodist Orphanage and serves until 1943.

15. 1925 – Arkansas Methodist Orphanage had placed 440 children.

16. 1936 – Rev. Thomas reports 22 children were received this year in the home, 15 were placed in permanent homes, and 40 remained in the care of the home. 528 children had been placed since the orphanage was founded.



17. 1943 – E.T. Wayland serves as interim superintendent.
18. 1943–1952 – John S.M. Cannon serves as superintendent of the home.
19. 1943 – a delegation visits the Methodist Children’s Home in Waco, Texas to tour their cottages housing smaller numbers of residents.
20. 1945 – Superintendent Cannon identifies 84 acres of land at, what at that time, was the western edge of Little Rock, that could be purchased for \$10,000 and serve as the United Methodist Children’s Home.
21. 1949 – the Arkansas Methodist Orphanage moves to an 84-acre area at 20th, 28th, Hayes (now University Avenue) and Fillmore Streets in Little Rock.
22. 1952 – the Arkansas Methodist Orphanage changes its name to the Methodist Children’s Home, Inc. (MCH). Four cottages, each under the supervision of a housemother, provides residents with family-style living. The purpose of the home changes from finding a home to making a home for each child in our care. Services expanded from housing orphans to also include abandoned and neglected children who needed special long-term care.
23. 1952–1955 – T.T. McNeal serves as superintendent of the home.
24. 1955–1962 – R. Connor Morehead serves as superintendent of the home.
25. 1956 – satellite homes opened in Searcy, Magnolia, Ft. Smith and Marked Tree.
27. 1959 – residents of MCH are offered educational opportunities after completing high school, including business courses, beauty school, nurses’ training and college. In fact, Hendrix College offered financial assistance to those students in the home who qualified.
28. 1961 – a seventh cottage constructed on campus.
29. 1962–1977 – J. Edwin Keith serves as superintendent of the home.
30. 1969 – St. James United Methodist Church organizes and holds worship services in the chapel at MCH.

31. 1970 – the first group home outside of Little Rock – Magale Youth Home in Magnolia – is dedicated. Other groups homes were established in Arkadelphia, Fort Smith, Marked Tree and Searcy.
32. 1973 – MCH sold 56 acres of the Fillmore Campus's 84 acres to the University of Arkansas at Little Rock.
33. 1978 – MCH's residents and staff are integrated.
34. 1977-1987 – Joe R. Phillips, Jr. serves as superintendent of the home.
35. 1986 – MCH adds a basic skills learning center to its Little Rock campus. This center helped children who had problems in school or needed tutoring.
36. 1987-1991 – Rev. Bob Orr serves as superintendent of the home. Rev. Orr introduces the Teaching-Family Model to MCH.
37. 1991 – Rev. Robert Regnier serves as president/CEO of the home.
38. 1995 – MCH certified as a Teaching-Family Sponsor site.
39. 1995 – Community-based teaching-family group homes established in Batesville, Searcy, Magnolia and Little Rock. Two additional group homes opened in Fayetteville and Springdale.
40. 1997 – MCH is accredited by Joint Commission on Accreditation of Healthcare Organizations.
41. 1999 – MCH celebrates 100th anniversary.
42. 2000 – Andy Altom named CEO of Methodist Behavioral Health System, Inc.
43. 2001 – Established Methodist Behavioral Health System, Inc. (MBH) in Maumelle.
44. 2003 – Methodist Family Health, Inc. (MFH), the management company of MCH and MBH, is incorporated.
45. 2003 – Methodist Family Health Foundation (MFHF), the nonprofit fundraising arm of MFH, is incorporated.



46. 2005 – present – Andy Altom serves as president and CEO of Methodist Family Health Continuum of Care.
47. 2005 – Therapeutic group home opened in Helena-West Helena.
48. 2006 – The emergency shelter opens in Little Rock, two school-based counseling clinics open in Jonesboro and Vilonia, and the Fayetteville Counseling Clinic opens.
49. 2007 – Arkansas CARES becomes a program of Methodist Family Health Continuum of Care.
50. 2007 – Psychiatric residential treatment center opened in Bono in northeast Arkansas.
51. 2008 – MCH acquires Kaleidoscope Grief Counseling.
52. 2009 – MCH celebrates 110th anniversary in March.
53. 2017 – Methodist Family Health Continuum of Care breaks ground on a state-of-the-art psychiatric residential treatment center on its Little Rock campus.
54. 2018 – Methodist Family Health Continuum of Care opens and dedicates the three-story psychiatric residential treatment center on its oldest campus.
55. 2019 – Methodist Family Health Continuum of Care celebrates 120 years of rebuilding the lives of Arkansas children and families.
56. 2019 – Methodist Family Health Foundation launches a capital campaign to fund construction of a multipurpose building on the Fillmore Campus in Little Rock.
57. 2020 – Methodist Family Health Continuum of Care deploys emergency plans to manage COVID-19 pandemic affecting patients, staff and community in our continuum of care.
58. 2021 – MBH celebrates 20 years of acute and sub-acute care to Arkansas children and their families.



# METHODIST BEHAVIORAL HOSPITAL ADMISSION SUMMARY

## Defining Medical Service Area

County	2019		2020		2021	
	Discharges	Percent	Discharges	Percent	Discharges	Percent
Craighead	143	8 percent	133	9 percent	125	8.5 percent
Faulkner	130	7 percent	101	7 percent	99	6.7 percent
Garland	141	8 percent	95	7 percent	97	6.6 percent
Pulaski	325	17 percent	299	21 percent	277	18.9 percent

There were 1,868, 1,412 and 1,475 discharges in 2019, 2020 and 2021 respectively. The top four (4) referring counties remained consistent between the three years and with the previous CHNA. Lonoke County came in the next highest referring county at 6, 4 and 5 percent, respectively.

## Client Demographic Survey

	2019		2020		2021	
<b>Average Age</b>	15		14		15	
<b>Race</b>						
American Indian	1	0 percent	2	0 percent	2	0.1 percent
Asian	9	0 percent	3	0 percent	2	0.1 percent
Black	415	22 percent	343	24 percent	325	22.1 percent
Hispanic	4	0 percent	6	0 percent	53	3.6 percent
Other	3	0 percent	1	0 percent	0	0 percent
White	1,436	77 percent	1,057	75 percent	1087	74.0 percent
<b>Ethnicity</b>						
American Indian	1	0 percent	4	0 percent	2	0.1 percent
Hispanic	69	4 percent	52	4 percent	56	3.8 percent
Non-Hispanic	1,798	96 percent	1,356	96 percent	1,411	96.1 percent





*Methodist*  
BEHAVIORAL HOSPITAL

