Community Linkage Program

A community partnership between Coleman Professional Services, Mercy Heath-St Rita’s and the Mental Health and Recovery Services Board of Allen, Auglaize and Hardin Counties providing medically managed withdrawal care and resources for those struggling with opiate addiction.
Opioid Withdrawal and Linkage Program

• Program Development History:
  • In 2016 SRMC ED had 1-2 opioid overdoses every day
  • Linkage to MAT services was difficult due to the high demand and limited resources available.
  • Patients were often unable to access care when they were ready for help or were sent out of town for withdrawal making linkages back to the community difficult.
  • In 2016, the Board, Coleman and SRMC began collaborations to discuss the development of a seamless system of care.
  • We committed to partner to bring services that were more easily accessible close to home for those who wanted to enter recovery.
  • We developed a project plan to include the commitment to a recovery-oriented system of care, reviewed research, other area best practices, developed detailed process, timelines, and a Business Associate agreement, as well as the staffing needs.
Key Learnings: Developing Collaborative Care Model

- Shift from crisis-oriented, problem-focused, and “professional is the expert” model to patient centered and solution-focused approach to recovery.

- Development of relationships and alignment between hospital and Coleman providers is essential.

- Overcoming historic barriers to collaborative care regarding HIPAA, not including patients in healthcare decisions, Policies/Process differences, expertise, competition, and pointing fingers at failures.

- Realizing patients with addiction to opioids are not “One Size Fits All”
  - Must have options for the patients that are meaningful and fit their health care needs.
Key Learnings: Access to Care

- We realized we needed to think about access to care differently and challenged the status quo of sending everyone to an ED for care and believing everyone needs to be hospitalized.

- We provide quick access to Coleman for service linkage to Screenings, Crisis Center, and peer support/recovery coaches.

- Quick Access to comprehensive substance abuse assessments provide a better picture of all the treatment and psychosocial needs of the patient.
How this works…

- Coleman Professional Services will provide the initial assessment and/or review of the presenting issue and consultation with the admitting provider.
- Mercy Health-St Rita’s provides inpatient services on 8AB.
- The admitting provider and a representative from Coleman will conduct daily rounds to meet with the patient in order to provide updated information as well as support and encouragement for the patient during this difficult time.
- Community linkage will be completed for the patient prior to discharge.
- Coleman staff will work with outlying county provider/referring agency to coordinate discharge planning for seamless transition of the patient back into his/her own community.
- Initially the wait time to get patients into care was 1-2 weeks. Currently, we are able to process admissions within 24-72 hours.
Collaboration with outlying counties…

- The outlying county provider/referring agency will identify the individual in need of detox from opiates.

- The outlying county provider/referring agency will complete the Diagnostic Assessment (DA) and labs (urine drug screen and liver function).

- Once this information is collected, the provider will contact Coleman Professional Services at (419) 229-2222 ext. 6047 Monday-Friday to coordinate a video appointment with a Coleman clinician to review the DA, explain the services we offer at the Crisis Stabilization Unit (CSU) and Mercy Health-St Rita’s, review Medication Assisted Treatment (MAT) options (if seeking MAT), and discuss treatment options in the patient’s community for post-discharge.
What happens next?

- After the video appointment, the assessing clinician at Coleman will review the information with the admitting provider to determine the appropriate level of care (outpatient, CSU or inpatient at Mercy Health-St Rita’s)
- If applicable, the location, date and time of the admission will be determined and communicated to the patient and outlying county provider
- Discharge planning will be coordinated between the patient, outlying county provider and the Coleman representative via phone call or video conference
- This will take place within 24-72 hours typically
Local Pre-Admission Requirements: What the outlying county provider/referring agency will need to complete…

- Once the diagnostic assessment and video conference has been completed, the turn-around time will be based on bed availability and admitting provider accessibility.
  - This will typically be within the same business day to 48 hours
- The admitting provider will determine and confirm the Level of Care needed for the client
- Prior to beginning the process, the outlying county provider/referring agency will be required to have the following completed:
  - Diagnostic Assessment
  - Lab work and Urine Drug Screen
  - Standing orders for lab work, medication needs, etc.
- Transportation for the client to and from inpatient stay is the responsibility of the outlying county provider/referring agency and the client
- Discharge plans, including medication provider, housing, transportation and other needed services should be in place. Coleman will work with the outlying county provider/referring agency to arrange appointments for the client’s ongoing care.
- Discharge planning will be facilitated at both the CSU and hospital locations
Community Linkage in the Client’s Home area

- Before contacting Coleman to begin this process, we ask that the referring agency/provider initiate discharge planning with the client.
- This includes transportation to and from the place of admission as well as follow up appointments (case management, counseling, medication, peer support, etc.).
- Because we recognize that discharge planning will be unique to each individual, Coleman staff will offer consultation services to assist in discussion of the necessary and needed services for a successful discharge plan for the client.
Consultation Services

- Our team from Coleman Professional Services will meet with the outlying county provider/referring agency to discuss the details of this program.
- Development of the procedures and information based on the outlying county’s needs for the Community Linkage Program will be coordinated with the staff at a specialized meeting.
- This meeting will help us to finalize each county’s unique needs.
- We will also be utilizing Tele-Health services to decrease the need for multiple trips for client and staff in order to coordinate care and assess client needs.
Crisis Stabilization Unit

- Sub-acute detoxification services with 7 beds
  - Urine Drug Screens (UDS) upon admission
  - Nursing assessment within 24 hours of admission
  - An individualized treatment plan developed within 24 hours of assessment
  - Routine nursing assessment
  - Group and Individual counseling
  - Medications to provide comfort during the withdrawal process
  - Medical services as needed

- Located at 797 S. Main Street, Lima
What’s the return on investment?

- Please note that payer source will not drive the admission or services offered to the client! No client will be turned away due to financial barriers.
- Level of Care and Capacity will determine the admission location
- Medicaid will be billed for Medicaid-reimbursable services
- We are receiving reimbursement for client care
- The Grant providing these funds is available for a two-year time period
- Grant funds will cover any uncompensated care costs
- We have been able to reduce ED visits, utilize lesser community mental health services and reduce cost for crisis center services and hospitalization
- We have a partnership with the MHRS Board and grant funding to provide MAT services for clients/patients regardless of income
What the Grant covers…

- Ancillary services
  - Med-Data services
  - Video Conferencing
  - Urine Drug Screen
  - Labs
  - Consultation
  - Clothing/Scrubs (for CSU)
  - DA Screener
  - PCP services at Coleman by LMH Provider
  - Other services as needed

- Other costs that could be barriers to treatment
- Per Diem rate at the CSU for indigent clients
- Any other uncompensated care costs
- Any and all indigent services
Our story to date...

- 53 admissions to date
- 48 patients
- 5 duplicated patients
- 48 patients have been connected to outpatient services
- 23 of those are still connected
- 43 patient completed the inpatient treatment stay
- Only 10 left AMA
- 33 patients were connected with a Recovery Coach
- 28 patients are still compliant with the medication plan
Algorithm for Services

1. Walk in Patient will come to admitting on main floor (main radiology & admitting)
   - Volunteer assists patients to AIDS

2. Coleman contacts physician for medical withdrawal admission: 923-228-9020
   - Physician assigns a designee to contact HUB (9020) with admitting dx.
   - And determine bed availability
   - The HUB (9020) contacts BAB with bed assignment

3. Coleman engages patients day one to work on discharge planning and will have a recovery coach 24-7

4. Coleman completes H&P within 24 hours
   - Coleman/Physician provides daily rounds M-F
   - Include nursing available, holiday/weekend rounding, hospitalist, no Coleman, recovery coach PRN

5. Patient transported via agency, cab, or other
   - Come to admitting, no main floor, volunteer will assist to AIDS

6. Pt. emergencies: Physician M-F 8-4p
   - Hospitalist after hours, weekends, and holidays
Community Linkage Program…

SAVING LIVES

and SOLVING PROBLEMS