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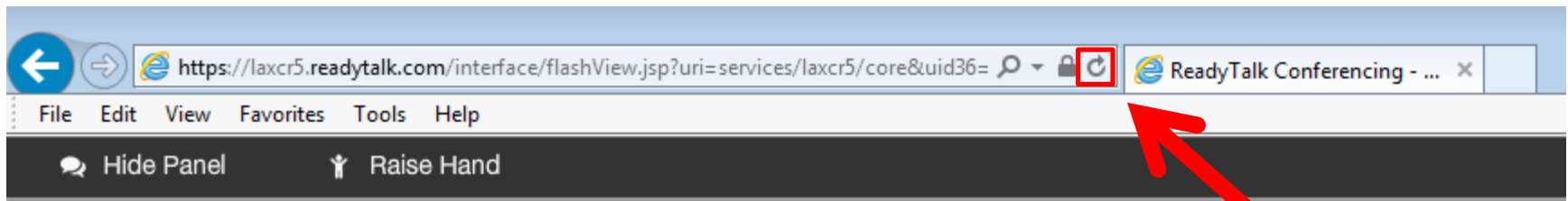


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- Audio from computer speakers breaking up?
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  - Click F5



F5 Key  
Top Row of Keyboard

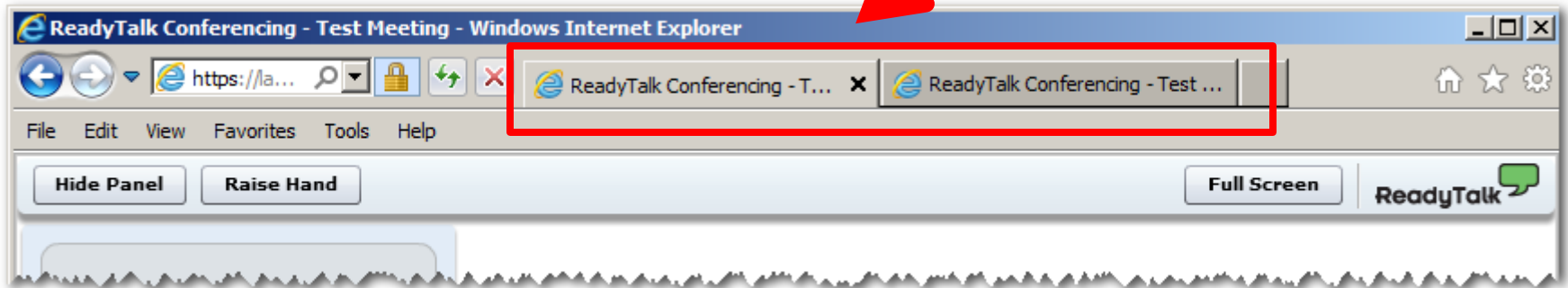


Location of Buttons

Refresh

# Troubleshooting Echo

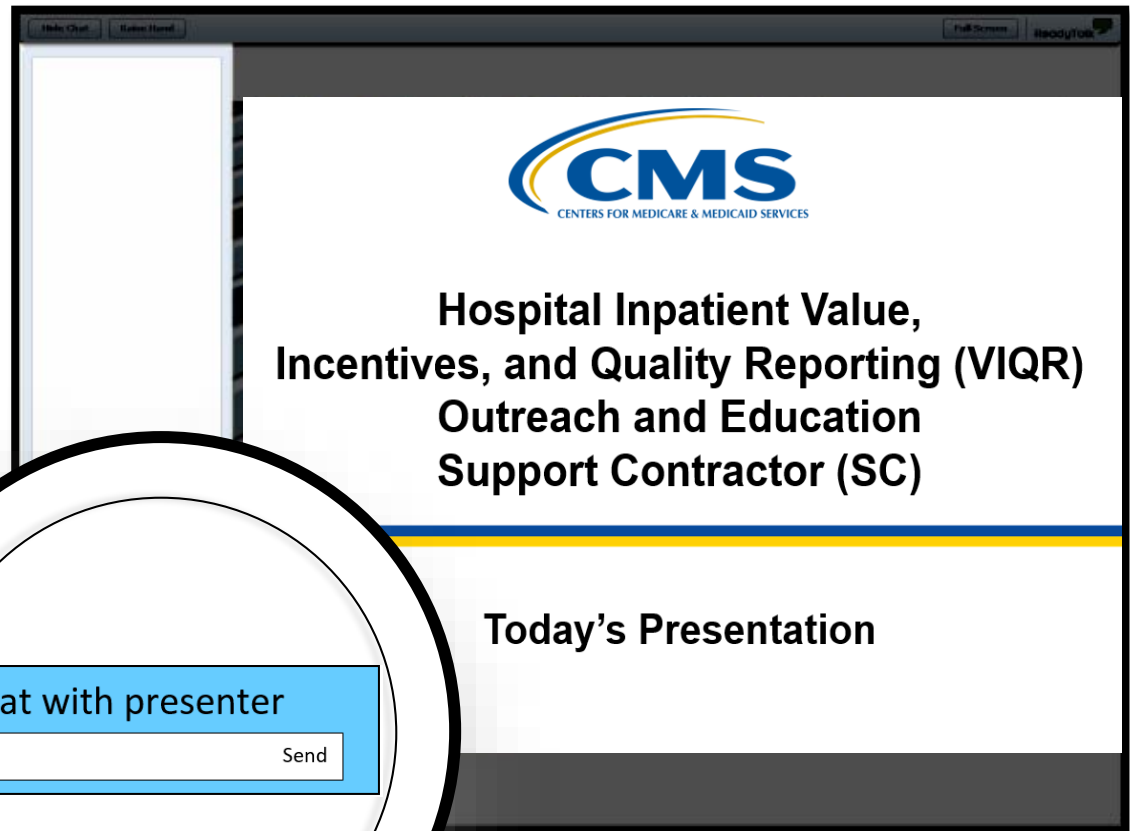
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Example of Two Browsers/Tabs Open in Same Event

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# Webinar Chat Questions

## Chat Tool

- Submit questions pertinent to the topic of today's event.
- As time permits, we will answer these questions at the end of the webinar.

## **QualityNet Questions and Answers (Q&A) Tool**

- The Q&A tool is the best way to send us questions unrelated to the current webinar topic.
- Direct link:  
<https://cms-ip.custhelp.com/app/homeipf/p/831>
- Look for published Q&As in the searchable tool.



# **A Community Approach to Follow-Up Care**

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**September 17, 2018**

# Speakers

## **Victor Armstrong, MSW**

Vice President, Behavioral Health  
Behavioral Health Charlotte

## **Allison Wolfe, LCSW**

Director, Social Work, Behavioral Health Charlotte

## **Moderators**

## **Evette Robinson, MPH**

Project Lead, Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program  
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)  
Outreach and Education Support Contractor (SC)

## **Jeffrey A. Buck, PhD**

Senior Advisor for Behavioral Health Program Lead, IPFQR Program  
Centers for Medicare & Medicaid Services (CMS)

# Purpose

This presentation will discuss Behavioral Health Charlotte's:

- Strategies for successful patient transitions from an inpatient psychiatric facility (IPF) into the community.
- Community partnerships to optimize patient follow-up care.
- Outcome metrics to track and improve transitions in care.



# Learning Objectives

By the end of this presentation, participants will be able to describe:

- Strategies for successful patient transitions from an IPF into the community.
- Community partnerships to optimize patient follow-up care.
- Key outcome metrics to track and improve transitions in care

# Acronyms

ACTT	Assertive Community Treatment Team
AIC	adult integrated clinic
APH	adult partial hospital
CMS	Centers for Medicare & Medicaid Services
CY	calendar year
ED	emergency department
FY	fiscal year
HMO	health maintenance organization
IDD	intellectual or developmental disabilities
IP	inpatient
IPF	inpatient psychiatric facility
IPFQR	Inpatient Psychiatric Facility Quality Reporting
MCO	managed care organization
PB	Peer Bridger
Q&A	question and answer
SAMHSA	Substance Abuse and Mental Health Services Administration
SC	support contractor
TMS	transcranial magnetic stimulation
VIQR	Value, Incentives, and Quality Reporting

A Community Approach to Follow-up Care

## **Behavioral Health Charlotte: A History**

# Behavioral Health Charlotte: Overview of Services

Behavioral Health Charlotte serves adults, children, and adolescents with a primary diagnosis of mental illness and/or substance use.

- 66 inpatient beds
- Psychiatric emergency department, staffed by board-certified psychiatrists 24/7
- Crisis stabilization for adults, adolescents, and children
- Outpatient therapy – child, adolescent, and adult
- School-based therapy – child and adolescent
- Outpatient medication management – acute and non-acute psychiatric assessment and medication management for children, adolescents, and adults
- Assertive Community Treatment Team (ACTT) – adult
- Partial hospitalization – adult and child/adolescent
- First episode psychosis program – teen and adult
- Brain stimulation – including transcranial magnetic stimulation (TMS)

# Behavioral Health Charlotte: Our History

Behavioral Health Charlotte is a facility of Atrium Health.

- Behavioral Health Charlotte used to be the county hospital, serving the uninsured and acting as a “safety net” for the community.
  - The demand for care increased due to staffing issues at state hospitals and the reduced availability of state-operated beds.
- In May 2014, Atrium Health opened a second behavioral health hospital.
  - The new facility was designed to be a “mood disorder” facility.
  - Behavioral Health Charlotte was designated as the “thought disorder” facility.
- Behavioral Health Charlotte became the facility of choice for patients with a primary diagnosis of psychosis.

# Behavioral Health Charlotte: Challenges Experienced

From 2014 to 2016, there was a 41% increase in the number of psychiatric patients presenting to acute care emergency departments (EDs) within the Atrium System.

- During the same timeframe, due to a reduction in the availability of inpatient beds at state facilities and a reduction in the number of local outpatient providers, Atrium acute care EDs experienced a 48% increase in the number of psychiatric patients who were waiting more than 120 hours for inpatient admission.
- During inpatient care, challenges persisted with discharge planning, contributing to as high as a 24% increase in length of stay at our behavioral health facilities. This further perpetuated backlog in the system, particularly with throughput in acute care EDs.

# Behavioral Health Charlotte: Inpatient Volumes and ED Visits 2017

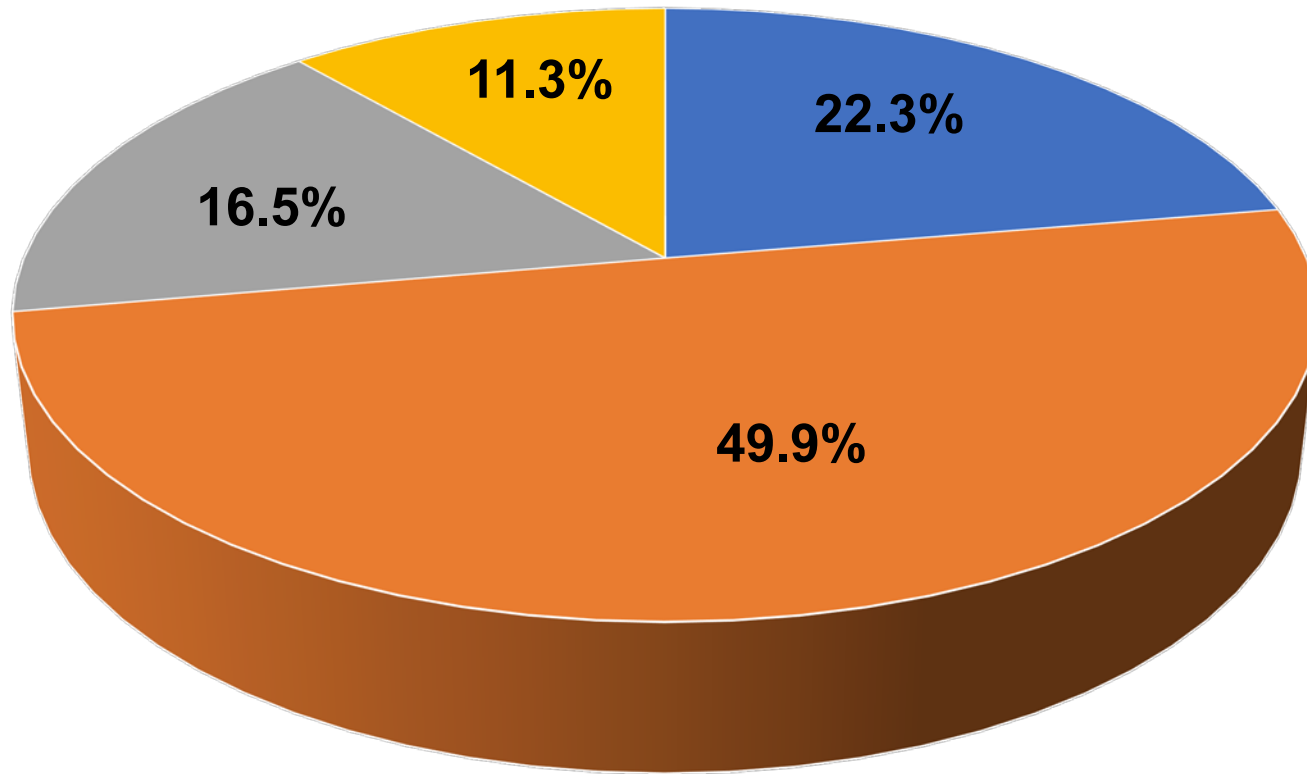
Inpatient Volumes 2017	
Adults	989 admissions 99.5% capacity (44 beds)
Child and adolescent	736 admissions 90% capacity (22 beds)

Emergency Department Visits 2017
10,783

Emergency Department Observation Days 2017
9,528

# Behavioral Health Charlotte: Payer Mix, Calendar Year 2017

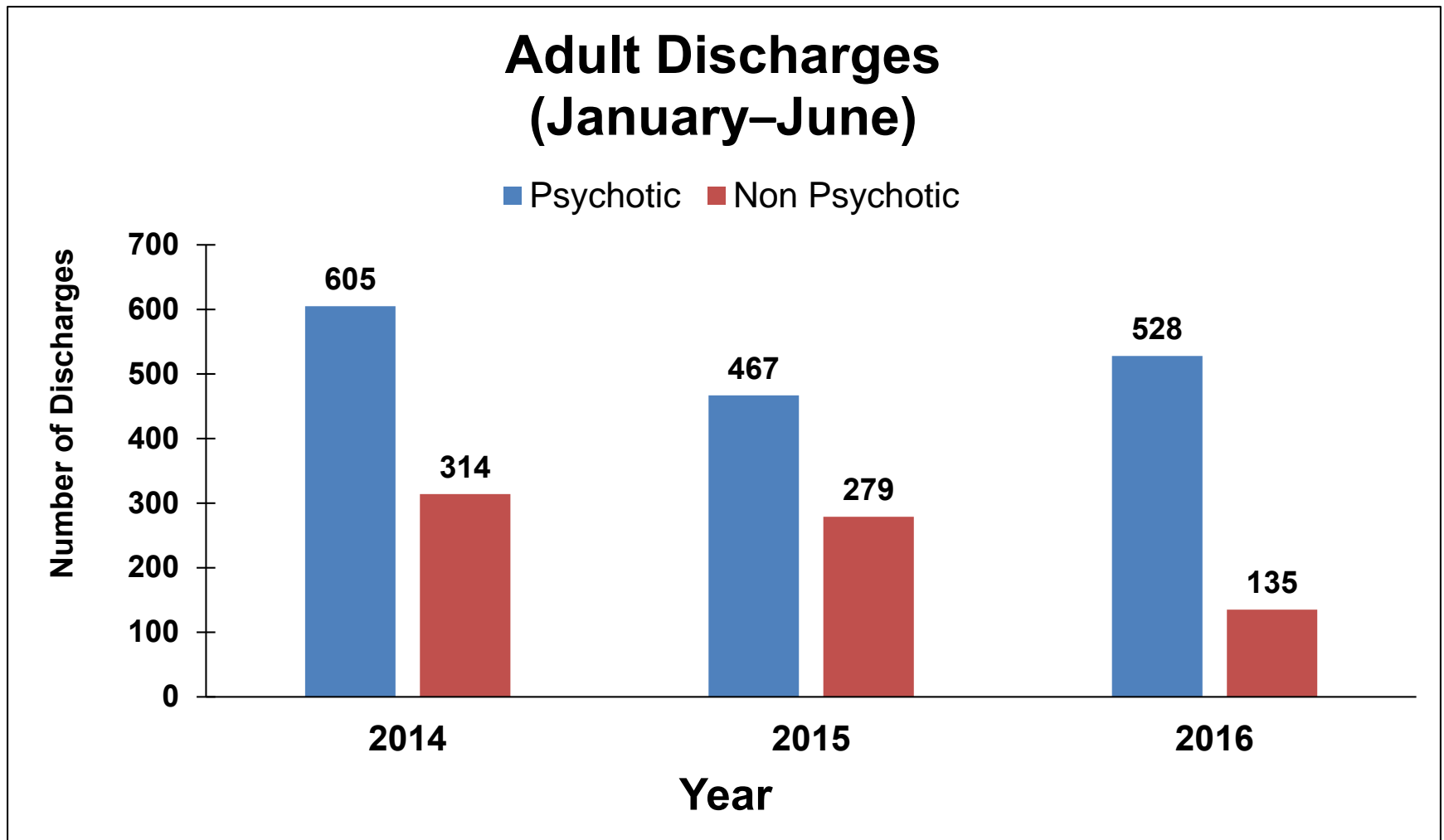
■ Medicare ■ Medicaid ■ Commercial ■ Other



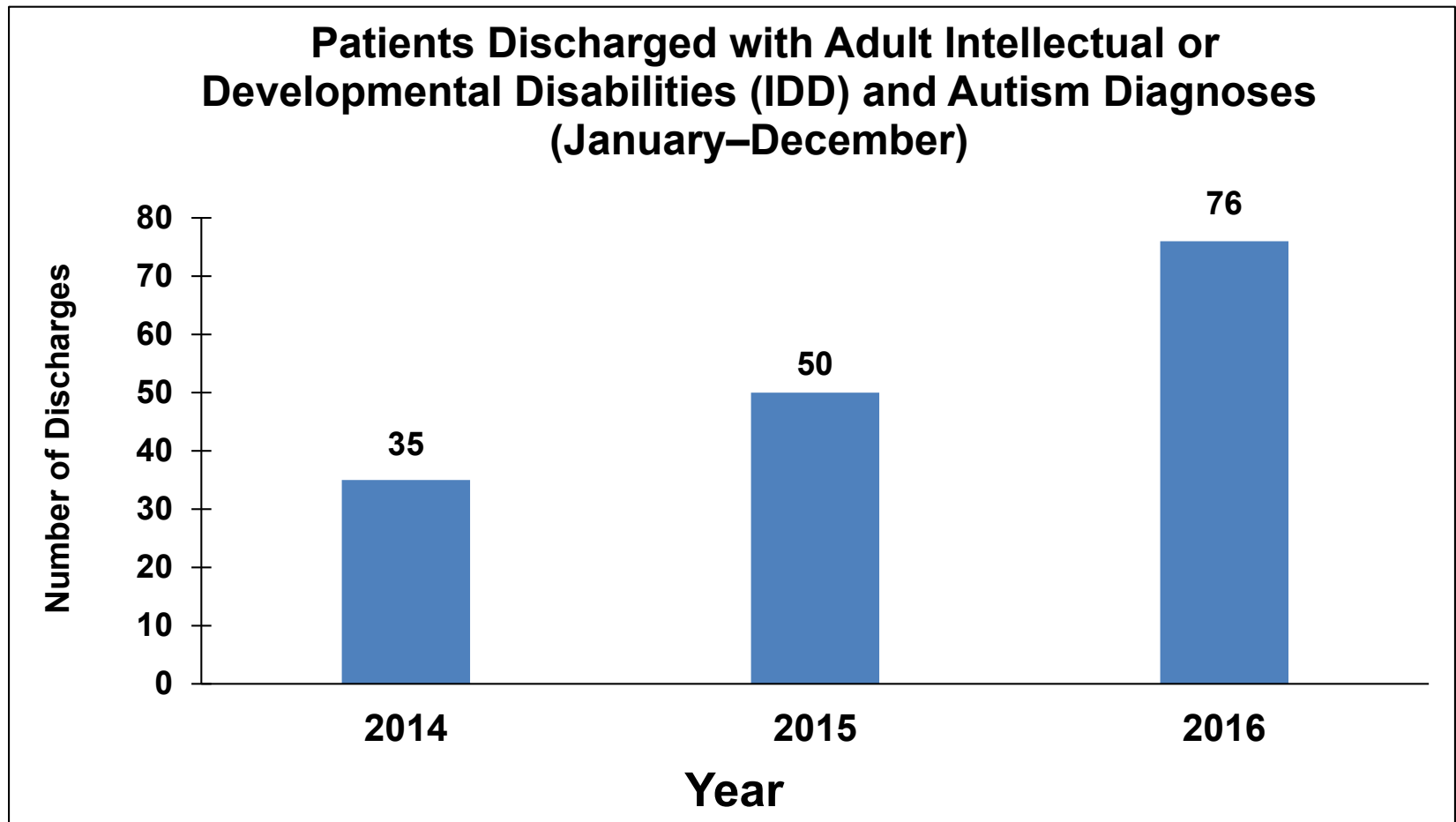


# Behavioral Health Charlotte:

## Adult Inpatient Psychotic vs Non-Psychotic Diagnoses



# Behavioral Health Charlotte: Adult IDD and Autism Diagnoses (Primary or Secondary)



# Behavioral Health Charlotte: Needs Assessment

Options	Population Demand	Acute Care ED Impact	Community Service Gap	Population Health Impact	Ranking
Increase care management support					1
Increase inpatient bed capacity					2
Increase outpatient services					2
Tend to specialized population groups (e.g., IDD and highly acute)					4

Harvey Ball Key: Greater level of shading indicates a higher level of attractiveness/opportunity.

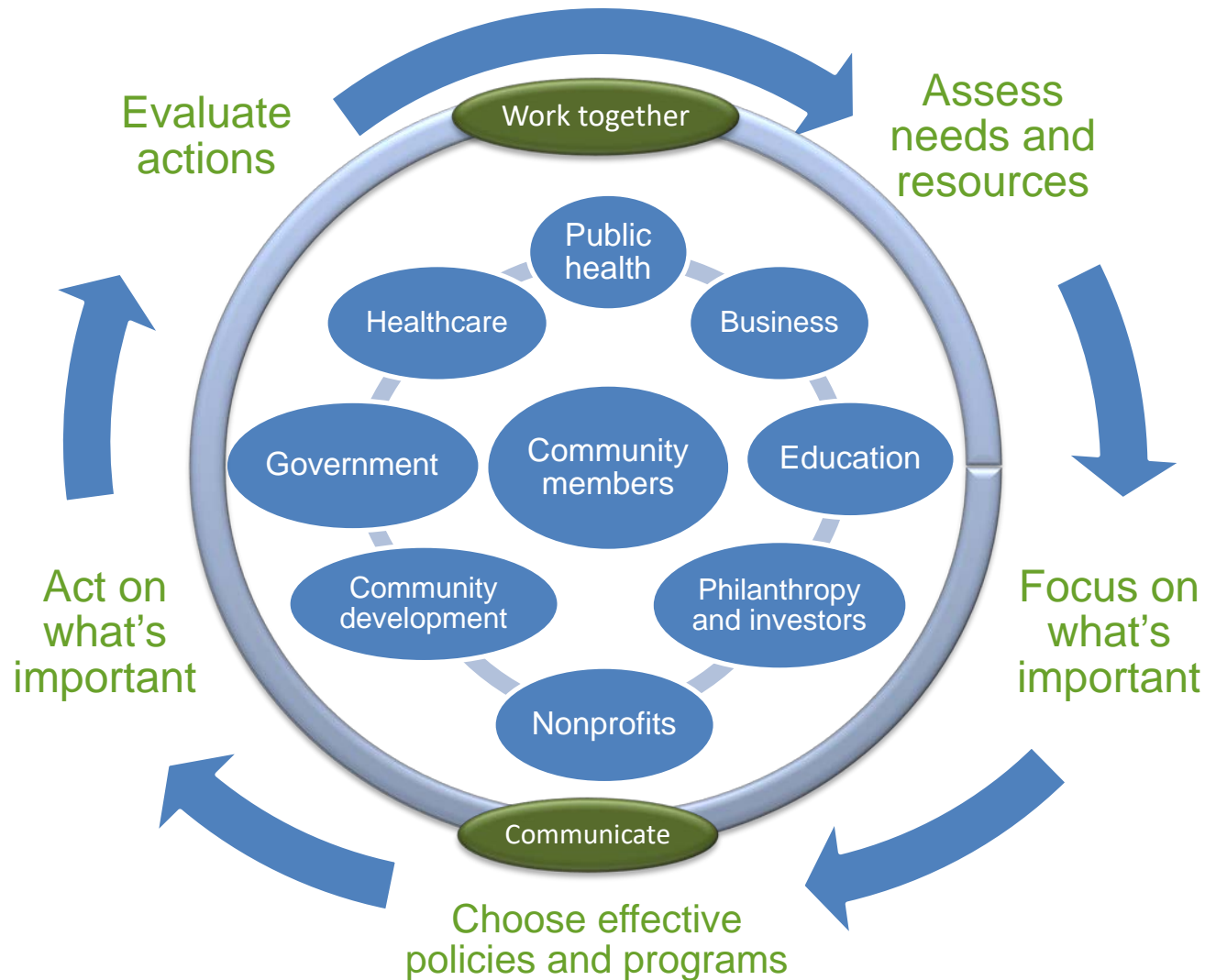
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**Behavioral Health Charlotte:  
Strategies for Successful Patient Transitions  
from an IPF into the Community**

# Care Management Strategies During the Psychiatric Hospital Stay

- Biopsychosocial assessment
  - Identifying all current and past providers, care coordinators, and natural supports
- Multidisciplinary team
  - Inclusion of pharmacist, utilization management, peer support specialists, social worker, nurse, and psychiatrist
- Timely discharge planning
  - Identify community stakeholders at admission

# Care Management Strategies During the Psychiatric Hospital Stay



# Care Management Strategies During the Psychiatric Hospital Stay



# Behavioral Health Charlotte: Transitional Care Process Components

- Open access/walk-in centers
- Cardinal Innovations Healthcare Access Line
- First episode psychosis program
- Community Care Partners of Greater Mecklenburg
- Crisis intervention team
- Enhanced crisis response – SPARC Services & Programs
- Youth crisis center
- Mobile crises response
- Mobile engagement
- Peer Bridger Program
- Social setting detoxification center



# Behavioral Health Charlotte: Utilization of Peers



# Peer Support

## What is Peer Support?

- Evidenced-based mental health services come from qualified providers who have personal experience with recovery from mental illness and substance-use disorders.
- Certified Peer Support Specialists assist individuals with recovery.
- A Certified Peer Specialist is a fully-integrated team member who provides highly individualized services in the community and promotes individual self-determination and decision making. (North Carolina Department of Medicaid Agency)
- Recovery-focused, person-centered services are provided for adults (individuals over the age of 18) who are living with mental illness and/or substance-use disorders.
- Certified Peer Support Specialists role model behaviors that can provide hope and inspiration for individuals beginning the journey to recovery.
- Certified Peer Specialists are individuals who have been diagnosed with mental illness and/or substance-use disorders. They have persevered in their own recovery efforts, completed 40 hours of intensive Peer Support training, and finished an additional 20 hours of recovery-focused training.

Source: <https://www.cardinalinnovations.org/>

# Peer Specialists

## Peer Specialists help:

- Identify individual strengths to assist people in recovery toward their goals.
- Individuals in recovery develop coping skills to better manage their mental health and/or substance abuse issues.
- Build confidence and self-advocacy skills.
- Individuals navigate community services and resources, including housing, social services, education, and employee assistance.

Source: <https://www.cardinalinnovations.org/>

# Benefits of Peer Support for Patients

- Increased hope
- Increased participation in services, including partnership with clinical staff
- Engagement in active self-directed recovery
- Increased responsibility for own wellness
- Reduction of recidivism

Source: Wilma Townsend, “Employing Consumers in the Work Place” 2/2008

# Behavioral Health Charlotte: Peer Bridger Process

## Step 1:

### Identify patients eligible for the Peer Bridger (PB) program

- Does the patient meet the following criteria?
  - Does not currently have and will not discharge with an enhanced service
  - Will reside in Mecklenburg County at discharge
  - Has Medicaid OR is uninsured (self-pay)
- If patient is agreeable to a PB referral for discharge, they will need to select a participating agency.

# Behavioral Health Charlotte: Peer Bridger Process

## Step 2:

### Connect patients with a provider who offers peer support

- The peer will meet with the patient on the inpatient unit that same day or next day.
- Clinician will provide the peer with the following:
  - Inpatient provider's initial psychiatric assessment
  - Inpatient psychosocial assessment
- As soon as a discharge date is established, the peer will coordinate arrangements to transport the patient home.

# Behavioral Health Charlotte: Peer Bridger Process

## Step 3:

### Communicate with patients and peer for follow-up care coordination

- When the peer arrives at the unit to transport the patient home, the peer and the patient receive discharge documents that include the follow-up appointment date and medication list.
- The peer communicates with our inpatient social work team if the hospital follow-up appointment was met. The receiving provider agency dispatches the mobile engagement team if follow-up appointment was not met.

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## **Behavioral Health Charlotte: Other Components of Transitional Care**



# Mobile Crisis Teams

- Mobile Crisis management services are available full time for crisis prevention when patients are experiencing a crisis related to mental health, substance abuse, or developmental disabilities.
- Mobile Crisis teams can meet the individual in a safe location, including their home, school, or workplace.

# Behavioral Health Charlotte: Atrium Health Behavioral Health Help Line

- Through Behavioral Health Charlotte, community members have access to the Atrium Health Behavioral Health Help Line.
- This crisis intervention help line is staffed by masters-level mental health professionals and registered nurses, and is available 24 hours a day, seven days a week.
- The team answering the phone can also make referrals to behavioral health specialists and offer information on community behavioral health resources.

# Behavioral Health Charlotte: Cardinal Innovations 24-Hour Crisis Line

## Callers can expect the following:

- Live person to answer questions related to a crisis situation, an assessment need, or a referral for behavioral health services 24-hours-a-day, 365-days-a-year
- Phone triage to understand the caller's immediate needs
- Ability to dispatch a Mobile Crisis team for face-to-face counseling and services
- Ability to recommend local walk-in/advanced access centers, crisis recovery centers, or comprehensive community clinics
- Assistance in scheduling an appointment with a provider (These appointments can be scheduled within seven days, depending on the urgency of the situation.)

# Behavioral Health Charlotte: “Eagle” First Episode Psychosis Program

Eagle is an evidence-based program that provides wrap-around services to young adults (ages 15 to 30) and their families who live in Mecklenburg County and have dealt with psychosis in the past three years. This program was started in 2017 with a grant funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The program’s wrap-around services include:

- Individual and family therapy
- Psychiatric services and medication management
- Case management services
- Peer support services
- Employment and educational support services

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## **Behavioral Health Charlotte: Key Outcome Metrics**

# Behavioral Health Charlotte: Key Outcome Metrics

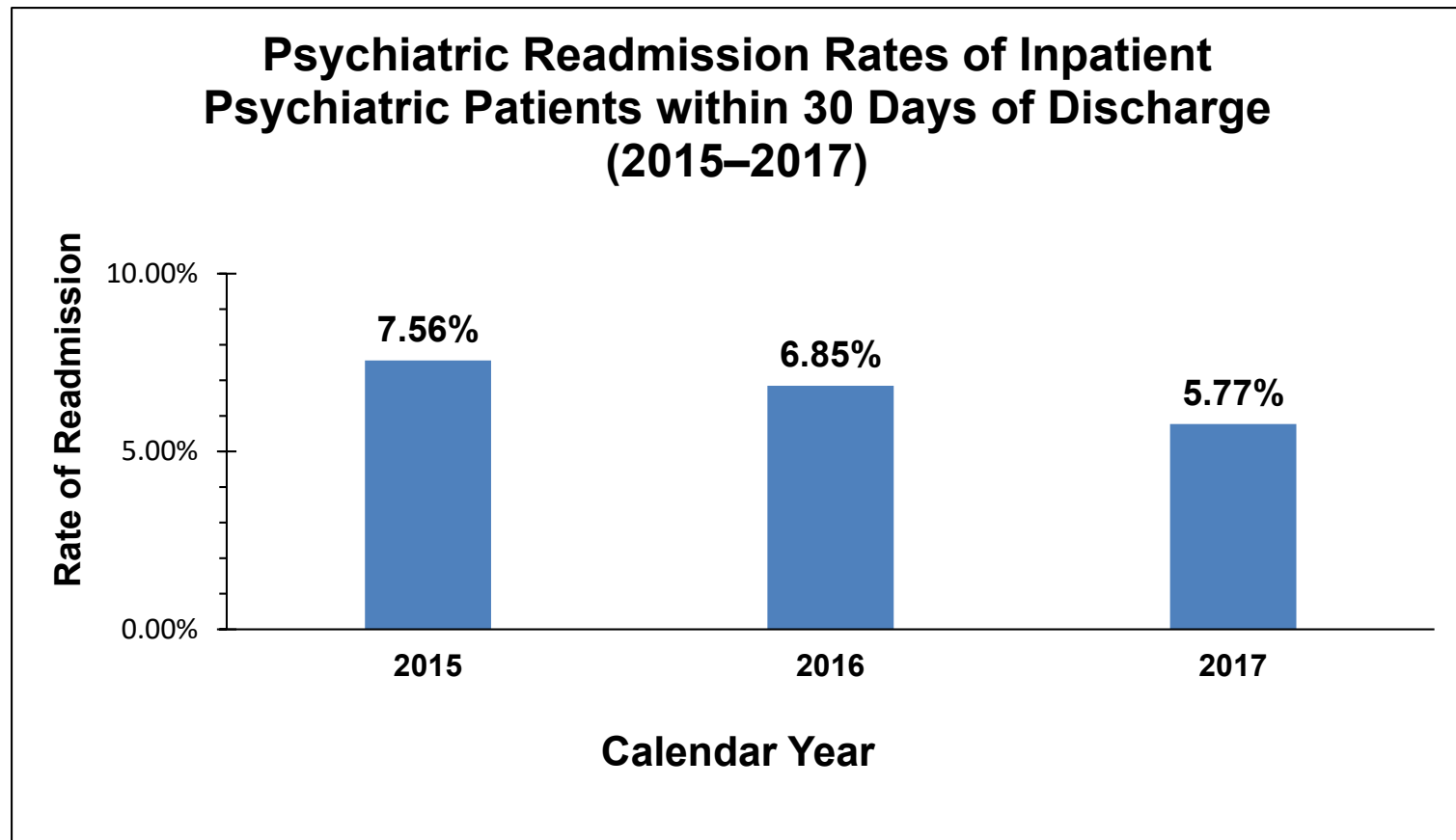
Outpatient Volumes 2017	
Program	Volume
Adult partial hospitalization	3,124
Outpatient medication services	15,648
Adult integrated continuum	15,927
ACTT	3,978
Adult outpatient therapy	11,231

# Behavioral Health Charlotte: Key Outcome Metrics

## Community Appointments Scheduled and Attended within Five Business Days Post-Discharge

	CY 2016	CY 2017	Q1 2018
Appointment scheduled to see a community provider within five business days post-discharge	90%	85%	93%
Patient attended scheduled appointment	54%	55%	65%

# Behavioral Health Charlotte: Key Outcome Metrics





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## **Roundtable with Dr. Jeffrey Buck**

# Roundtable with Dr. Jeffrey Buck



# What Can You Do?

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Identify Gaps



Identify Community Partners



Develop a Collective Plan



Measure Outcomes



Spread News of Positive Results

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## **Helpful Resources**

# Helpful Resources: Manual and Optional Paper Tools

The current IPFQR Program Manual and various optional paper tools can be found on:

- [QualityNet](#)  
Inpatient Psychiatric Facilities → Resources  
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772864255>
- [Quality Reporting Center](#)  
Inpatient → IPFQR Program → Resources and Tools  
<https://www.qualityreportingcenter.com/inpatient/ipf/tools/>

# Helpful Resources: Links

## IPFQR Program General Resources

Q&A Tool	Email Support	Website	Phone Support
<a href="https://cms-IP.custhelp.com">https://cms-IP.custhelp.com</a>	<a href="mailto:IPFQualityReporting@hcqis.org">IPFQualityReporting@hcqis.org</a>	<a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>	(866) 800-8765
Monthly Web Conferences	ListServes	Hospital Contact Change Form	Secure Fax
<a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>	<a href="http://www.QualityNet.org">www.QualityNet.org</a>	<a href="#">Hospital Contact Change Form</a>	(877) 789-4443

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**Thank You for Attending**

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