Improving Access and Quality Through Creative Models of Ambulatory Care

Private Psychiatric Inpatient Providers Conference
Partnering Together: Recovery Across the Care Continuum

Presented by
Christopher McGowan, MPS, ATR
October 25, 2013

Program Agenda

- Models of Care

Issues that hinder flexible models of care

- Waiting List & Treatment Slots
- Patient Selection
- The Phone
- Culture

Other: Stats for your review.

Akron Programming: Main Campus &Off Campus

MAIN CAMPUS

ED Triage

Adm. Coord.

Inpatient

MAIN CAMPUS

Partial Hospital

"The IP/OP Dept"

Urgent Evaluation

Crisis Stabilization

Triage for IP or continued OP

IOP Day and Evening

OUTSIDE Collaborative Entities:

Eating Disorders Program

Chem. Dep.

Rural Hospital Collaboration PHP-IOP

Strong Link with CMHC and outside providers

Our Wellness Center

4 patient types-4 treatments

1. **Dialectical Behavioral Therapy** (DBT): Highly volatile patient: Self abuse, chronically suicidal, high-end user of IP care
2. **Cognitive Behavioral Therapy** (CBT): Depressive Disorders using relapse prevention
3. **MDDR**: Dual Disorders IOP
4. **Acceptance and Commitment Therapy** (ACT): Trauma patients

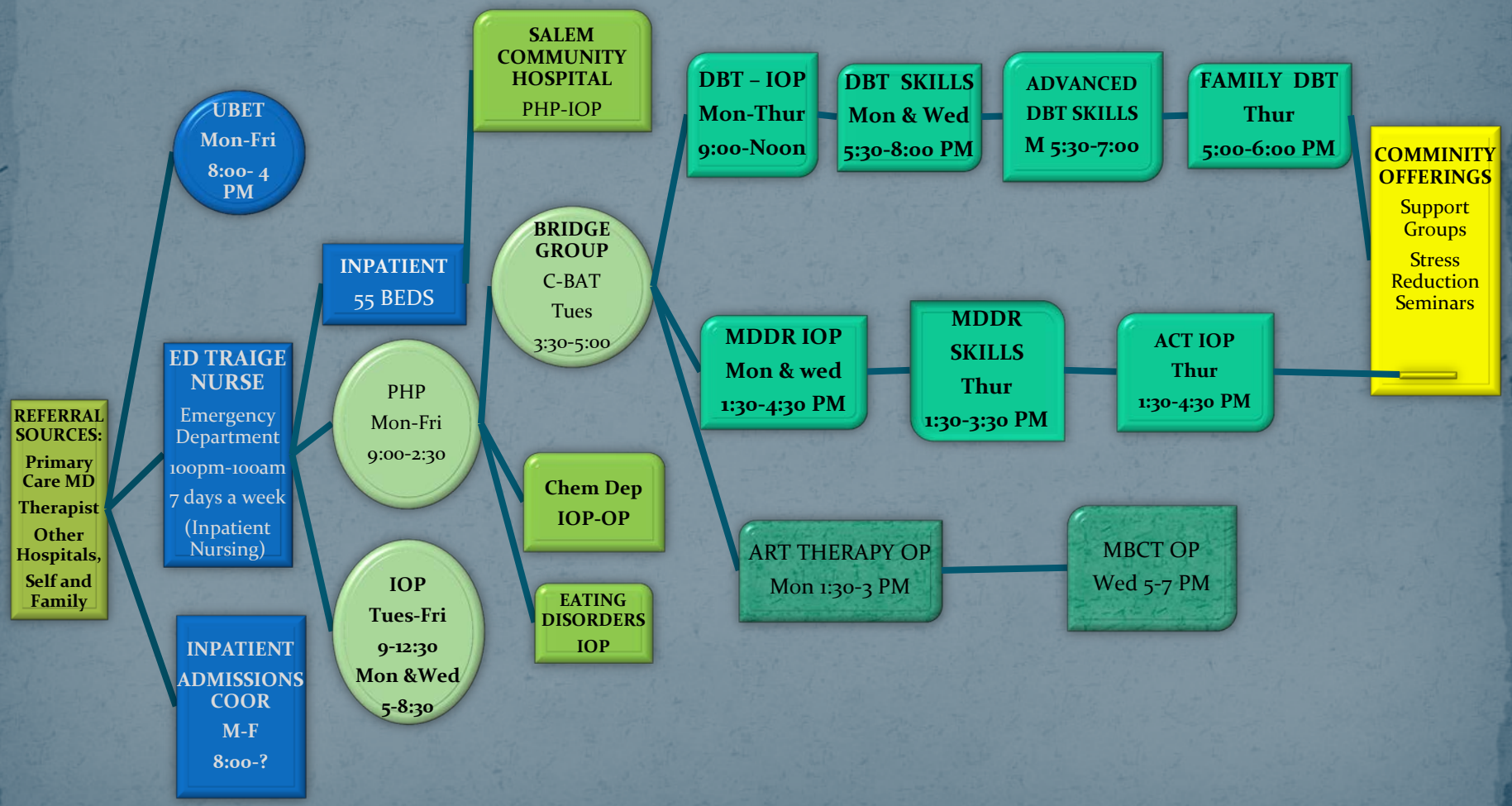
Free Community Offerings

Support Groups

Stress Reduction Seminars

Community Education

How it flows


REFERRAL SOURCES:
Primary Care MD
Therapist
Other Hospitals,
Self and Family
UBET
Mon-Fri
8:00- 4 PM
ED TRAIGE NURSE
Emergency Department
100pm-100am
7 days a week
(Inpatient Nursing)
INPATIENT ADMISSIONS COOR
M-F
8:00-?
INPATIENT
55 BEDS
PHP
Mon-Fri
9:00-2:30
IOP
Tues-Fri
9-12:30
Mon &Wed
5-8:30
SALEM COMMUNITY HOSPITAL
PHP-IOP
BRIDGE GROUP
C-BAT
Tues
3:30-5:00
Chem Dep
IOP-OP
EATING DISORDERS
IOP
DBT – IOP
Mon-Thur
9:00-Noon
DBT SKILLS
Mon & Wed
5:30-8:00 PM
ADVANCED DBT SKILLS
M 5:30-7:00
FAMILY DBT
Thur
5:00-6:00 PM
MDDR IOP
Mon & wed
1:30-4:30 PM
MDDR SKILLS
Thur
1:30-3:30 PM
ACT IOP
Thur
1:30-4:30 PM
ART THERAPY OP
Mon 1:30-3 PM
MBCT OP
Wed 5-7 PM
COMMINITY OFFERINGS
Support Groups
Stress Reduction Seminars

Main Campus PHP-IOP

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:30	TX Team	TX Team	TX Team	TX Team	TX Team
9:00	PHP	PHP / IOP	PHP / IOP	PHP / IOP	PHP / IOP
10:00-10:15 10:15- 11:15	TX Team PHP	TX Team PHP / IOP	TX Team PHP / IOP	TX Team PHP / IOP	TX Team PHP / IOP
11:15-12:00 LUNCH PHP	PHP	PHP / IOP	PHP / IOP	PHP / IOP	PHP / IOP
12:00 pm	PHP	PHP / IOP	PHP / IOP	PHP / IOP	PHP / IOP
1:00	PHP	PHP	PHP	PHP	PHP
2:00 2:30	PHP	PHP	PHP	PHP	PHP
3:00	OP GROUP / IND	OP GROUP / IND	OP GROUP / IND	OP GROUP / IND	
4:00 4:30	TX Team		TX Team		
5:00	IOP		IOP		
6:00	IOP		IOP		**UBET's** **8:30-4:30**
7:00	IOP		IOP		6.9FTE Minus director
8:00 pm	IOP		IOP		

Akron Staffing: Main Campus PHP-IOP

Staffing:	**FTE**
Director	1.0
Advanced Practice Nurse	**2.5**
Licensed Counselor	**2.1**
Utilization Review RN	.5
Secretary	1.8
Total	**7.9**

Medical Director is under a private practice model. At program daily 8:30-noon +

Off Campus Health &Wellness Center

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:30	TX Team	TX Team	TX Team	TX Team	
9:00	**DBT IOP:**	**DBT IOP:**	**DBT IOP:**	**DBT IOP:**	MDDR/DBT/Art Assessments
10:00	DBT IOP Family DBT:	DBT IOP	DBT IOP	DBT IOP	Assessments
11:00	DBT IOP	DBT IOP	DBT IOP	DBT IOP	Assessments
12:00 pm	DBT IOP	DBT IOP	DBT IOP	DBT IOP	
1:00 1:30	Team MDDR IOP Art Therapy GT	Team DBT IOP – 1 day	**Team** MDDR IOP	ACT IOP Team ACT IOP **MDDR Skills**: 1:30-3:30	
2:00 2:30	MDDR IOP Art Therapy GT	DBT IOP – 1 day	MDDR IOP	ACT IOP MDDR Skills	
3:00 3:30	MDDR IOP Art Therapy GT	DBT IOP – 1 day	MDDR IOP	ACT IOP MDDR Skills	
4:00 4:30	MDDR IOP	DBT IOP – 1 day	MDDR IOP	ACT IOP	
5:30	**DBT Skills** Advanced DBT Skills:		**DBT Skills** MBCT 5:00 – 7:00	Family DBT Education	
6:00	DBT Skills Group Advanced DBT		DBT Skills MBCT		
7:00	DBT Skills Group Advanced DBT		DBT Skills MBCT		5.5 FTE's
8:00 pm	DBT Skills Group		DBT Skills		

Akron Staffing: H&W-West

Staffing:	**FTE**
Program Coordinator/ APN	1.0
Advanced Practice Nurse	0.5
Licensed Counselor	2.5
Secretary/ Utilization Review	1.5
Total	**5.5**

Medical Coordinator under a private practice model. At program Monday, Tuesday, and Thursday 8:00 am-5:30 pm

Across the Continuum

Immediate Treatment Clinic:

Modeled after University of Wisconsin

1. Brief focused TX 6 sessions for Post DC Psych IPs and OPs

Post DC Medical IPs w/ Behavioral Health Needs

2. Urgent Evaluations (direct calls from community)

If more long term follow-up is needed they go to **Collaborative Care Clinic**

•Staffing: 1 psychiatrist, 2-4 therapists (master's level and psychologists), and 1 administrative support staff

•Therapists scheduled for one to two 1-hour intakes and three 45" follow-up appointments.

•Psychiatrists are scheduled for two intakes and four to five 15" follow-up appointments.

•All staff attend ½ hour "wrap up" session at end of clinic.

Clinics are half day.

Partial Hospital

"The IP/OP Dept"

H&W-W

5 patient types

5 treatments

Collaborative Care Clinic

Staffed by

Psychiatrist, PCP, APN, SW

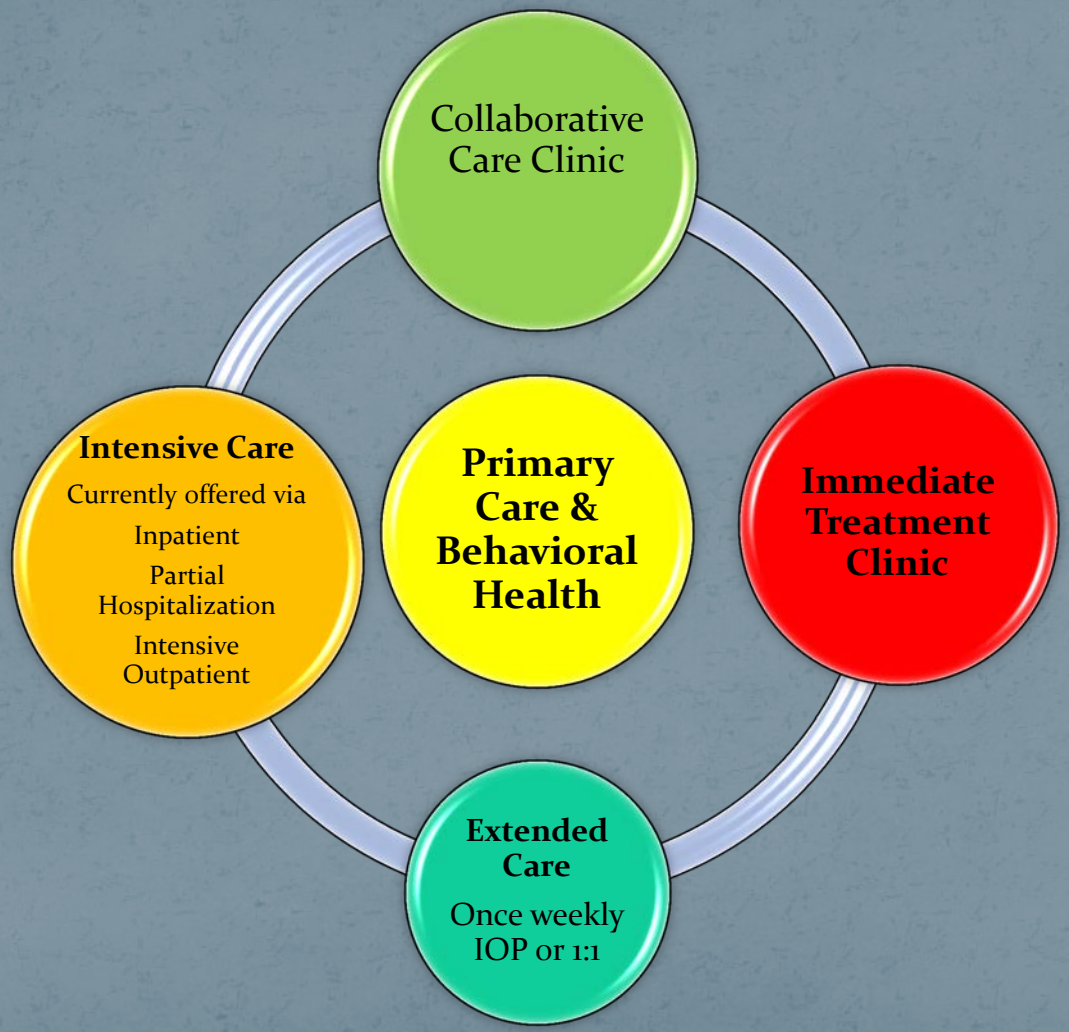
1. Coordinate integration of care across treatment centers by working directly in the PCP setting and on the medical floors.

2. Coordinate with general medical care treatment settings to manage behavioral health issues.

3. Case Management for more chronic patients and frequent users of care patients (longer term TX)

4. Individual Therapy

OP Therapist expectation 28 sessions a week full time


Collaborative Care Clinic
Intensive Care
Currently offered via
Inpatient
Partial Hospitalization
Intensive Outpatient
Primary Care & Behavioral Health
Immediate Treatment Clinic
Extended Care
Once weekly IOP or 1:1

Issues that hinder flexible models of care

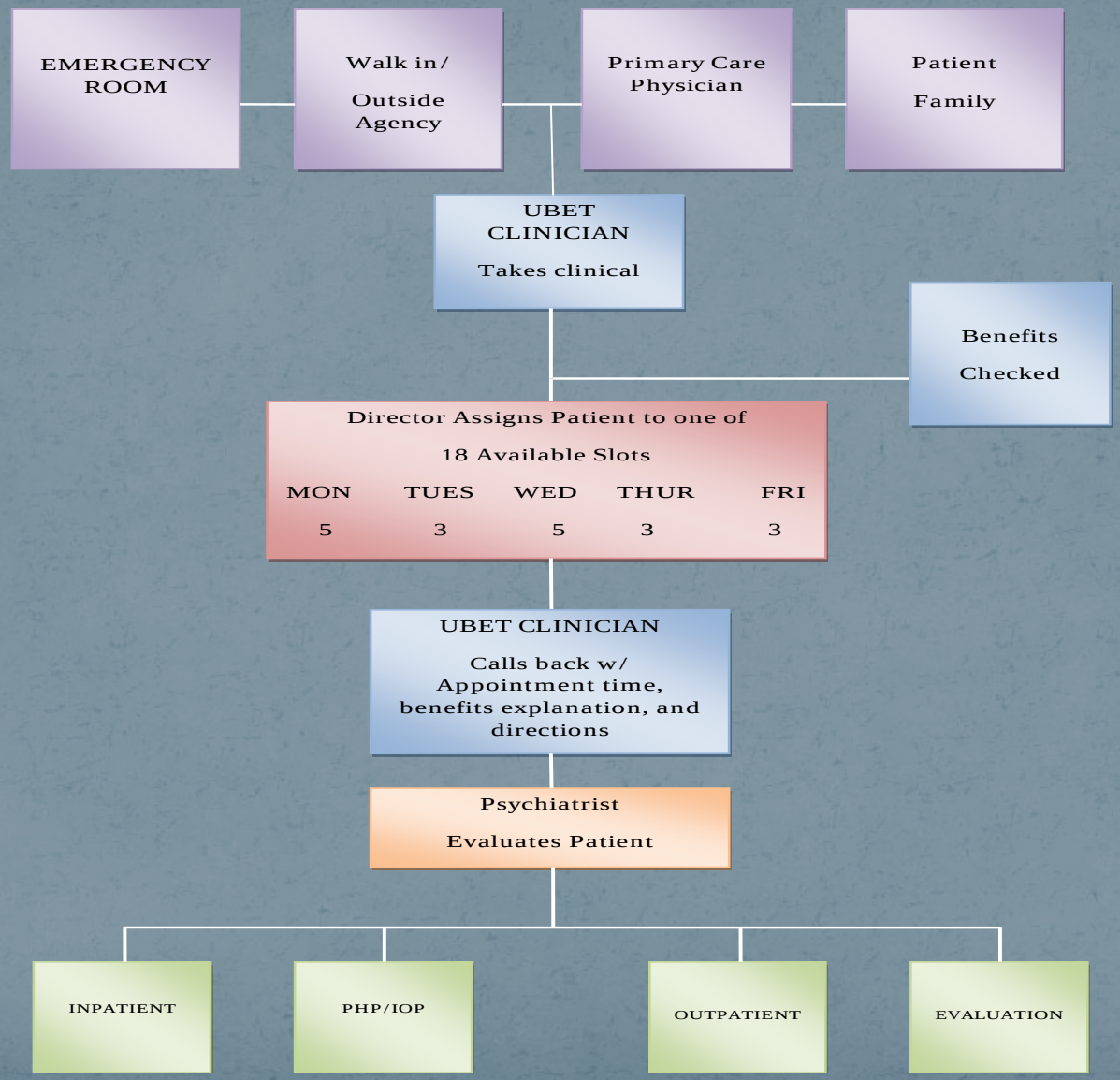
- ✓ Waiting List & Treatment Slots
- ✓ Patient Selection
- ✓ The Phone
- ✓ Culture

BE ACCESSIBLE:
Admissions Coordinator/ED Triage Team

- Collaborates with medical staff, nursing staff and other clinical disciplines to develop and coordinate admissions to Psychiatry programs and promotes and markets the Psychiatry Program.

- Acts as the one stop shop for agencies, physicians to access inpatient admissions.

UBET !Urgent Behavioral Evaluation Team



UBET Process

UBETs come to us in several ways.

- As a walk in to the Partial Hospitalization Program (PHP) or Intensive Out-patient program (IOP).
- As a referral from the Emergency Department
- By phone as a self or family referral, from a therapist or a physician's office.
- From inpatient medical and psychiatric floors.

UBET Process

Once clinical and insurance information is obtained UBETs may be dispositioned in the following manner:

If they are determined unsafe they are directed to the nearest ED, or directly admitted to the inpatient unit under a psychiatrist. (Medical Director)

If they are determined safe and clinically appropriate they are offered treatment in either:

- Partial Hospitalization Program or Intensive Outpatient Program. If they start one of our programs, the psychiatrist will see them for an evaluation within one day.
- If patients are resistant to PHP, IOP or if there are other issues such as work, childcare, financial patients are then scheduled for an evaluation with one of our psychiatrists within one week.

UBET Process

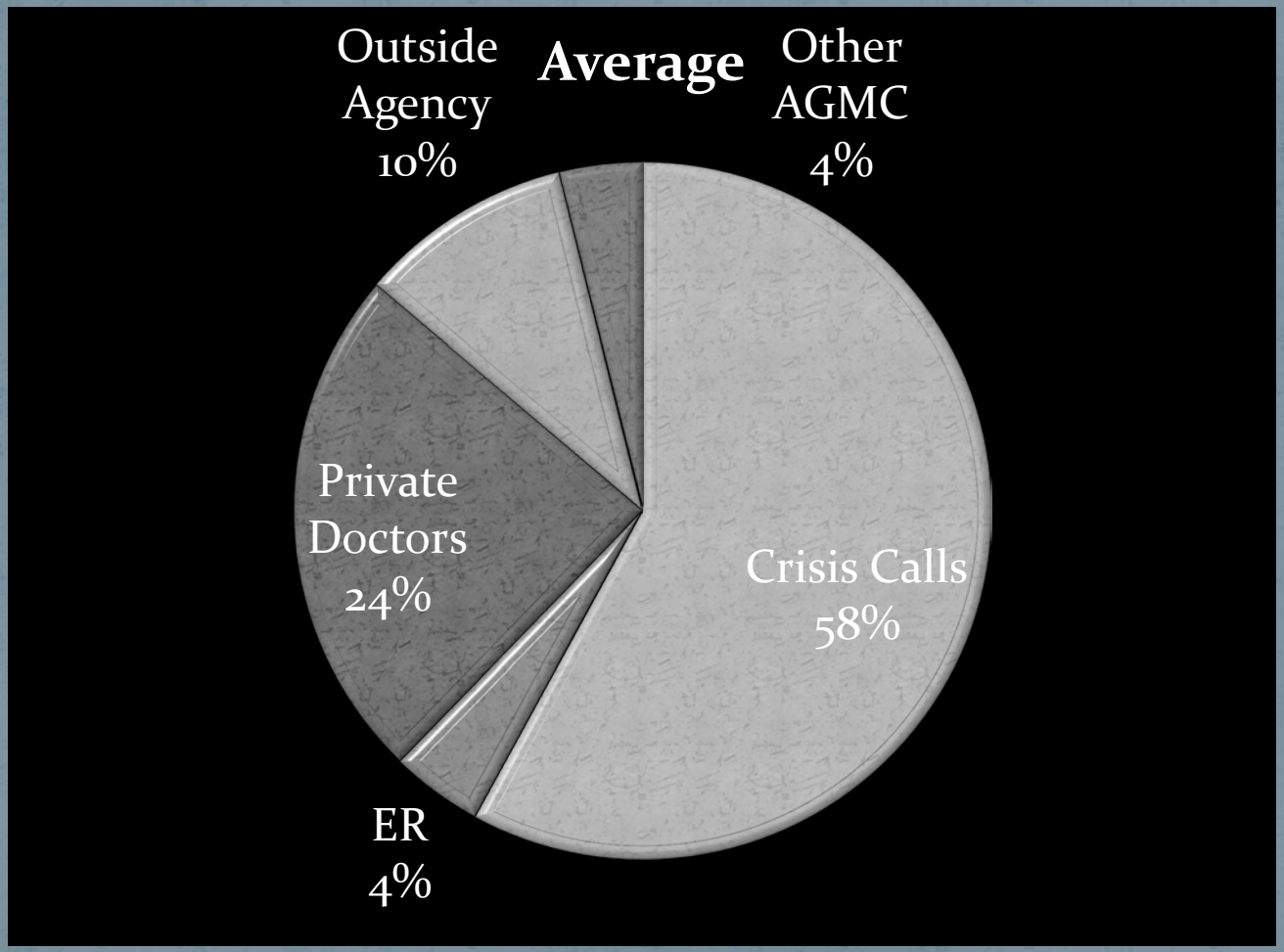
During a walk-in or a scheduled evaluation, a copy of the patient's insurance card and photo ID is made and patients are given paperwork to complete, including a Becks Depression Inventory Scale (BDI-II) and demographic information. If the BDI indicates a patient is suicidal, a page is immediately sent to the physician and the Partial Hospitalization Program staff. The patient is immediately evaluated for safety, and closely monitored so they do not leave the unit.

Total Hours Spent and Calls

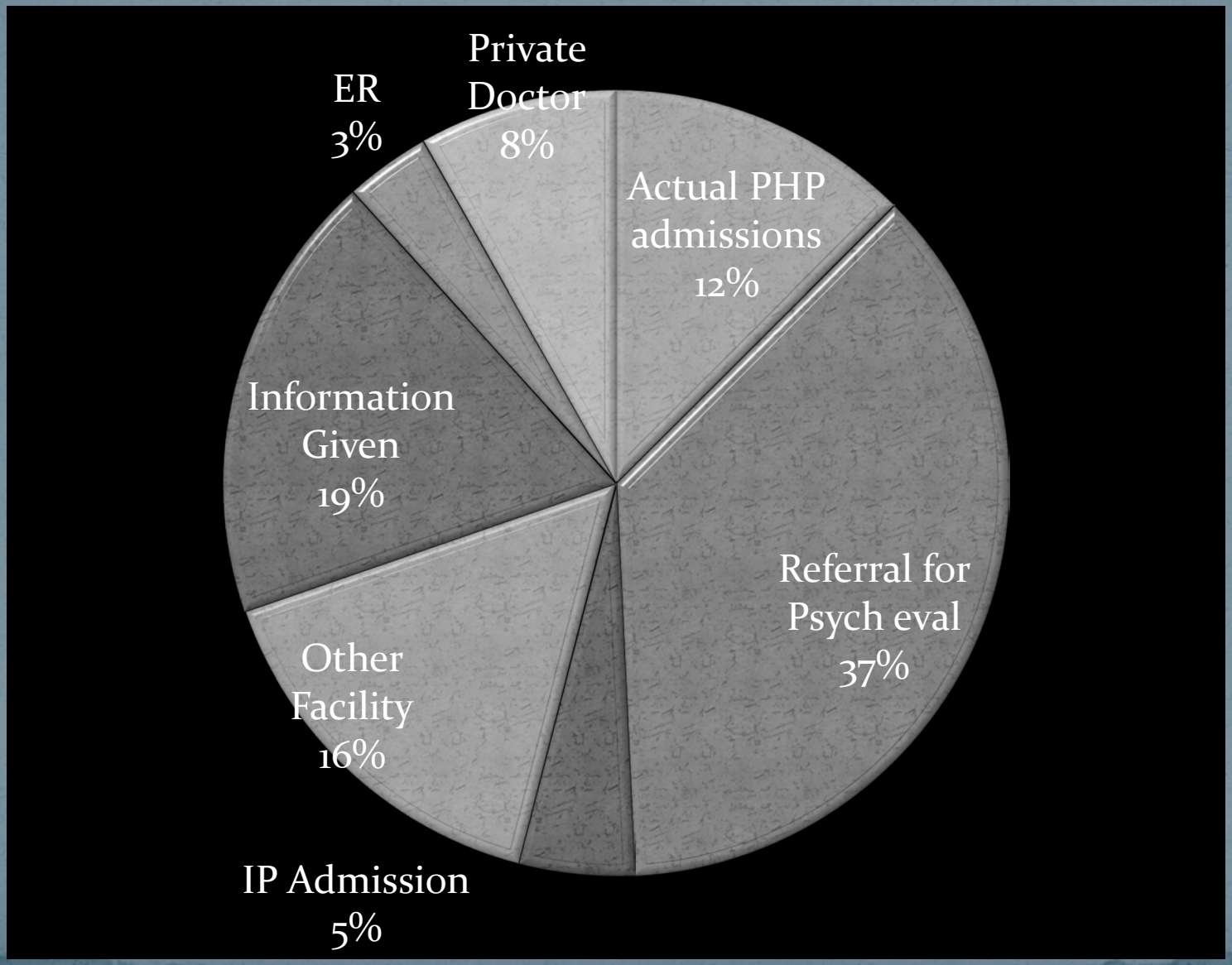
Averages ....

- 70 calls per month
- 5.4 hours per staff member per month. (27.5)
- UBET has evolved into THE port of entry for self & community referrals

UBET Referral Source



UBET Disposition



From: MD
Sent: Wednesday, January 23, 2013 2:40 PM
To: Chris McGowan
Subject: AGMC IOP/PHP

Chris

Just wanted to give AGMC IOP/PHP kudos . . . One of my outpatients had to be referred to _____programming because of her insurance. She called _____ IOP 1/15 with 3 hour assessment done 1/22. She has orientation 1/25 and anticipated start date 1/28. We could have had her better by now! RIDICULOUS. Thank you and your staff for what is done here! Have a good day :)

MD

This is an Alternative to IP care?

Sun	**Mon**	**Tues**	**Wed**	**Thurs**	**Fri**	**Sat**
13	**14**	**15** **Pt.Called**	**16**	**17**	**18**	**19**
20	21	22 Assessment Comp.	23	24	25 Pt. Orientation	26
27	28 Patient began program	29	30	31		

AKRON, OHIO

- Population 217,074

- Akron is the fifth largest city in the State.

(1-4: Columbus, Cleveland, Cincinnati, Dayton, and Toledo)

3 County Region

- Main competitor within 2 miles now has 69 bed capacity in main facility and 30 beds in another.

- 26 miles from Cleveland

Akron General Statistics 2011

- Admissions 26,249
- Employees 5,116
- Medical Staff.....1,084
- Outpatient Visits.....609,415
- Surgical Procedures.....27,743
- ED Visits.....104,088
- LifeStyles Visits.....601,234

Akron General Statistics

- 511 beds (55 psychiatric beds)
- 18 Active Staff members
- Two OP Psych units(third to open 11/2103)
- Hospital Serves more than 1.2 million individuals throughout counties surrounding Akron
- $1.3 billion Total Revenue
- $10 million Net Income, 0.8 percent profit margin
- Major teaching hospital with **11** high-quality medical residency programs.
- Nationally recognized for Health and Wellness with 3 Centers built and more scheduled.

Inpatient Stats

Two Units, 55 beds

Total Admissions:	1,898	(135 STO)
ADC:	32.45	(59% occupancy)
ALOS:	8.42	
Total PD	**9,704**	managed 5,650 non 4,045

Payor Mix:	
Commercial	**21.63%**
Medicaid	**30.69%**
Medicare	**36.70%**
Other	**10.98%**

Behavioral Health Services Scope

	Akron General BHS
Psychiatric Hospitals	1 hospital, 2 units, 55 bed total
Day Program/PHP	2 PHP/IOP's (1 new 11/13) 1 IOP, 1 IOP CD, Partnership: 1 IOP ED, 1 Rural PHP/IOP
# of Outpatient Clinics	1 residency clinic
Total # of outpatient visits **19,751** Private MD Gr. **10,550**	(1 PHP/IOP, 1 IOP) **7,751** CD **12,000**
# of Psychiatrists (FTE)	18 Active Staff which include 7 FTE's
# of Therapists (FTE) Salaried vs. Contractual	4.6 Main, 4.0 West, 3.5 Green, 8.0 CD (all salaried)
Specialties	Adult
Contact Center	Yes
Types of appts. offered	Regular appt., Open Access, Instant Access, Urgent Evaluations (UBETS)

Behavioral Health Services Scope

	Akron General BHS
Group Therapy	DBT, MBCT, ACT, Depression, Anxiety, Dual, CD
Clinical appt. types/Practice model (Adult)	Private Practice Model APN's (Adult)
ED Coverage	Triage RN, 1pm-1am Residence ½ year
Holiday/After-office coverage	Psych-on-call
Other	TMS, Sleep Disorders

Behavioral Health Services Scope

	Akron General BHS
Intake	UBET by phone or in person Point of entry
Insurance Verification	UBET/Prior to point of entry
Organizational Structure	VP Nursing Director OP Services Program Coordinators (2)
Community Mental Health partnership	Yes Dept. Chair Med Dir. 1/13
Other Partners	Eating Disorders IOP, Rural Salem Hospital PHP/IOP Local CMHC
State and National Affiliations	AABH, OABHA

Assuring Access to Care Helps Everyone!

- PHP is truly the *alternative* to inpatient care that has evolved into a multi-faceted treatment modality.

- ✓ 65% of our patients are directly admitted to PHP or IOP
- ✓ Akron General Captured an added 4% of the Psych tx Market in since 2010.

- **Admissions Coordinator, Triage RN yield big dividends.**
  2011: **890** referrals, of these **784** were admitted, and 101 sto /op
  hospital billed 11,099,932 in charges

  2011: **1,021** referrals, of these, **923** were admitted, and 97 sto /op
  hospital billed 13,543,488 in charges

- Quality care is maintained while census continues to increase on all levels of care.

THANK YOU

Christopher McGowan, MPS, ATR
Director
Center for Behavioral Medicine and Wellness
Akron General Medical Center
chris.mcgowan@akrongeneral.org
330.344.1595