



Heartland Behavioral Healthcare

January 14, 2013

Happy new year to all!

I hope this correspondence finds you and your organization thriving and well. I am reaching out as a follow up to the November 2012 conference sponsored by the Ohio Department of Mental Health. Our system (ODMH) invited both private and public hospitals to the table to share ideas, challenges, and cutting edge practices. The afternoon session was dedicated to brainstorming and identifying opportunities for improving patient care; each group was separated by their assigned hospital region. Our region (Heartland) identified four projects and associated work groups to champion the assignment. Listed below is a summary of our afternoon activity.

The Heartland region identified four immediate projects for action. Each project has an assigned subgroup and a specified leader.

Project 1: Improving access through standardizing the medical clearance process

Issue: In our region admissions periodically are delayed or denied based on interpretation, definition, and understanding of medical clearance

- *As is state:* Inconsistent, costly, rigid, and excessive testing
- *Desired state:* A consistent, cost effective, and uniformed clearance process
- *Leaders:* Summa Health System & HBH
- *Champions:* Gail Houk (Alternative Paths), Nancy Collier (Med Central Health System), Jeff Allen (Crisis Intervention & Recovery Center), Jeff Doig (Ten Lakes Center), and Dr. Joseph Varley (Summa Health System)
- *Outcomes:*
 - Uniform guidelines
 - Potential algorithm
 - Consider consistent clinician-to-clinician communication to head-off issues
 - Potentially expansion project to include unit to unit transfers, hospital to hospital, as well accepting readmissions that recently left the facility

***First meeting projected: February 2013

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Project 2: Improving the discharge process and community reintegration by implementing the navigator system concept

Issue: In our region we periodically experience inadequate and inconsistent discharge planning, difficulty with linkage, limited resources for patients, and delays in admissions due to access

- *As is state:* This process is a new implementation with this system and currently there is limited understanding and questions regarding continued funding
- *Desired state:* Improved continuity of care and shared services across systems
- *Leader:* Gwen Malcuit (Community Mental Health Care)
- *Champions:* Melissa Cook (St. Elizabeth Health Center), Christina Benton (Appleseed Community Mental Health Center), and Linda Ellis (HBH)
- *Outcomes:*
 - Education and understanding of the navigator system concept
 - Integration of the Peer Support Group
 - Identified potential for sharing of resources/services with this person/concept

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Project 3: Improving the patient care experience (inpatient, discharge, and continuity of care matters) through implementation of an integrated treatment planning process

Issue: In our region we have periodically identified fragmented care based on poor exchange and sharing of relevant patient care information

- *As is state:* In our region we have periodically experienced a poor flow of patient information, no collaboration, and deficiencies and barriers to sharing information with our current EMR
- *Desired state:* A coordinated process for better continuity of care using the treatment planning process/format in each venue the patient receives care as well as processes and the use of an efficient EMR
- *Leader:* Nancy Collier (Med Central Health System)
- *Champions:* Kathy Brown (St. Elizabeth Health Center), Mary Bigowsky (St. Elizabeth Health Center), and Michael Waggoner (HBH)
- *Outcomes:*
 - An established process and format to share patient information during both the inpatient and outpatient interval

***First meeting projected: February 2013

Project 4: Integrating the Peer Support Specialist and NAMI local chapter at the unit level to enhance the patient and family patient care experience

Issue: In our region we have identified opportunities to improve communication and involvement with our patients and their families in the treatment planning process.

- *As is state:* A lack of patient and family input, limited access to treating clinicians by the family, a lack of partnering to ensure success at discharge
- *Desired state:* an established partnership with the patient, family, and treatment team to meet the expectation of the patient and ensure successful discharge and tenure in the community
- *Leader:* Jane James, NAMI, and John Stocker (HBH)
- *Champions:* Jane James (NAMI), Kay Silverwood (NAMI), Lisa Houk (HBH), Jeff Sims (HBH)
- *Outcomes:*
 - Established treatment guideline with supporting data that displays improved patient and family satisfaction with overall clinical treatment

***First meeting projected: January 2013

I believe the projects selected will have a significant positive impact on patient care in our region. Tracy Plouck, director of ODMH, correctly identified this as a finite opportunity to lead and make improvements in Ohio's care system. Over the next two weeks, the leaders for each project will receive a call from my office. We will assist you to coordinate your first meeting, and even host if that is helpful. I am excited about the potential outcomes to be realized through this partnership.

Sincerely,



Jeff Sims

Chief Executive Officer

JS/bjw