

It Takes a Village: The Essentials for Diverting High-risk Mental Health Clients from Placement

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Ohio Expenditures for Nursing Home Care & Home & Community Based Services (HCBS)

- **Nationally, 36% of Medicaid dollars are spent on HCBS; 64% for nursing homes**
- **In Ohio, 30.1% of Medicaid dollars are spent on HCBS; 69.9% for nursing homes***
- **Average stay in a nursing home costs \$4800 a month, but \$1100 for in-home personal care through PASSPORT program****

*Burwell, B., Sredl, K., & Eiken, S. (2008, September 26). Medicaid Long Term Care Expenditures FY 2007. Eagan, MN: Thomson Reuters.
**Ohio Health Policy Review, January 23, 2009; "Medicaid Changes Boost In-Home Care," Cincinnati Enquirer, Jan. 21, 2009



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**Director, Mental Health
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Mental Health Program

The Mental Health Program is:

- Funded under a contract with the County Mental Health Board
- Provides Mental Health Assessment
- Provides Mental Health Case Management
- Provides Mental Counseling
- Provides a Partial Hospitalization Program

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Mental Health Program

- Was founded in 1989
- Is the only agency in Cuyahoga County providing Mental Health services exclusively to the elderly (age 55 and up)
- Serves approximately 500 individuals per year
- Provides all services in the community

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Mental Health Program (con't)

- Works collaboratively with other agency programs
- Works collaboratively with other community providers
- Does not require doctors' orders to provide services
- Certified by the Council on Accreditation of Rehabilitation Facilities (CARF)

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Home Care Program

BRI is a Medicare/Medicaid-certified agency providing:

- Behavioral Health Nursing
- PT, OT and Speech Therapy
- Skilled Nursing
- Medical Social Work
- Home Health Aides



Home Care Program (con't)

BRI also has the following Payer sources to provide personal care and homemaking assistance:

- PASSPORT (State Medicaid Waiver Program)
- OPTIONS (County-Funded Program)
- Title III Grant Program
- Alzheimer's' Grant Program
- Veterans' Administration
- Concordia Care



Home Care Program (con't)

- Our Behavioral Health Program in Home Care complements the other Long Term Care Departments at BRI
- We have a continuum of care for our clients that functions as a one-stop network
- Continuum of care positively affects quality of care/enhanced communication

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Case Study #1

Referral Information

- Referred February 1994 to Mental Health; Home Care involvement began December 1997
- Sixty-two year old African American female
- Referred by Adult Protective Services due to pending eviction
- Family involvement – two daughters, multiple grandchildren
- Family involvement conflictual
- History of spousal sexual and physical abuse
- In financial crisis

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Case Study #1

- Multiple medical problems at admission
 - Hypertension
 - Arthritis
 - Asthma
 - Two blocked coronary arteries
 - Diabetes
- Strengths
 - Long work history
 - Good sense of humor
 - Good social skills
 - Intelligent
 - Learns from experiences

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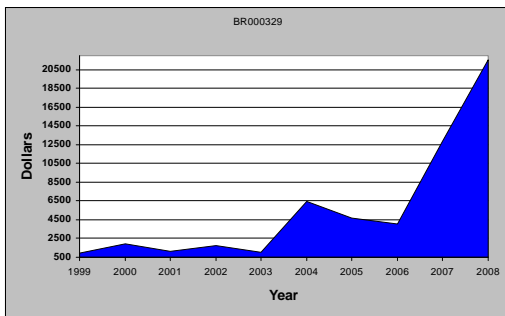
Case Study #1

Course of treatment

- Case Management
 - Relocation to subsidized housing
 - Connect to entitlements – Medicaid, HEAP, PIP, etc
 - Link to Medical and Psychiatric care
 - Link to Home Care services - 2003
 - PASSPORT personal care/homemaking begins July 2007
 - Monitor status and provide encouragement

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Cost Data – Case # 1



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Conclusions

- Program features strong trusting and clinical relationships between case manager, primary nurse and client
- Flexibility of agency
- Good case manager and nursing assessments, good assessment tools
- Holistic, team approach, including caregivers when available

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Conclusions

- Aide training on Mental Health disease and aspects of care for direct care personnel
- Collaboration between nurse and mental health case managers; departmental directors
- Rotation of clinical staff as needed to prevent burn-out.

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Conclusions

- Good medication management skills
- Direct supervision of case manager, nurse and aide per program requirements and more often as necessary to troubleshoot areas of concern
- Uniqueness of workers

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