

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE PROCEDURE

Date Issued **1/24**

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SECTION Client Services		SUBJECT Outreach & Discharge		
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I. APPLICATION:

- ☐ SCCCMHA Board
- ☒ SCCCMHA Providers & Subcontractors
- ☒ Direct-Operated Programs
- ☐ Community Agency Contractors
- ☐ Residential Programs
- ☐ Specialized Foster Care

II. PURPOSE STATEMENT:

St. Clair County Community Mental Health Authority (SCCCMHA) shall conduct follow-up/outreach on persons who have discontinued services to determine whether further services are needed, appropriate referrals are made, and that all exiting persons have a completed Discharge Summary in their file.

III. DEFINITIONS:

- A. Outreach: Is the documented attempt by the service provider to contact the individual (via phone contact, correspondence, home visit or a combination of all three) when the individual has not engaged with clinic services as authorized within the Individual Plan of Service (IPOS) or upon seeking Community Mental Health services (at intake). Outreach is a key service element across outpatient programs serving individuals with MI and tends to vary across outpatient programs.

IV. STANDARDS:

- A. The organization shall have an active outreach and education effort to ensure the network providers and the community is aware of the access system and how to use it.
- B. The organization shall have a regular and consistent outreach effort to commonly underserved populations who include children and families, older adults, homeless persons, members of ethnic, racial, linguistic and culturally-diverse groups, persons with dementia, and pregnant women.

V. PROCEDURES:

A. Outreach

Primary Case Holder and/or Peer Supports and/or Mental Health Assistants

1. Calls individual 24-48 hours in advance of appointment or will use automated appointment reminder services when available. Caller will utilize motivational interviewing techniques

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around engagement and attempt to problem solve issues regarding not being able to keep appointment(s).

2. Documents reminder phone call(s).
3. Outreaches to individual within 24 hours, by phone or home visit, when an appointment for treatment is not kept.
4. Documents on a progress note/contact note, attempts to re-engage person in treatment, including his/her response(s) and reschedules appointment.
5. Continues to attempt to make face-to-face or verbal contact until individual is reached. If individual tells you in a clear directive "I do not want you to stop by my house" or "I do not want you to call me" *or something similar*, then outreach is stopped.

Supervisor/Primary Case Holder

6. Discusses appropriateness of continued outreach attempts via case consultation. If appointment is rescheduled and person is a no show, discuss this via case consultation.

Assigned Primary Case Holder

7. Sends Notice of Hearing Rights or Notice of Review Rights, per Grievance Process administrative procedures #02-001-0040 and Appeal Process and Second Opinion administrative procedures #02-001-0045, when the individual does not attend scheduled appointments and when unable to engage individual via phone outreaches.
8. Completes Discharge Summary form, documenting outreach attempts to engage person, within OASIS system.

B. Discharge

Primary Case Holder

1. Determines if one or more of the following criteria has occurred: goals/objectives have been met, person is being referred elsewhere, moves out of county, not appropriate for services, discontinued treatment with or without notice, program ends, is admitted to the hospital or dies, a Discharge Summary must be completed within OASIS system.
2. Closes cases that are 'inactive' for more than 30 calendar days. Individuals opened to IDDT may remain opened up to 60 days. (This is to be processed with primary Case Holder's supervisor and recorded on a case consultation form.

C. Discharged from Other Facilities

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Primary Case Holder

1. Outreaches to individuals 24 hours for discharge from all facilities, including inpatient psychiatric hospitalizations, known medical hospitalizations, residential treatment, SUD detox or post-detox treatment.
2. Documents outreach attempts, contacts, follow up appointments made in the electronic health record via a progress note.

D. Thirty Days (30) post discharge

Administration

1. Run monthly, a report showing individuals who have discharged (closed) for three months.
2. Contacts discharged (closed) individual via telephone survey regarding their satisfaction with services.
3. Shares survey results with all staff (via the intranet) as well as, the SCCCMHA Board.

VI. REFERENCES:

- A. MDHHS Contract, CCHBC Expansion Grant

VII. EXHIBITS:

None Available

VIII. REVISION HISTORY:

Dates issued 04/03, 06/05, 08/07, 06/09, 10/11, 03/13, 04/13, 03/14, 05/15, 07/16, 09/17, 09/18, 03/19, 09/19, 11/20, 11/21, 12/23.