



**Rural Hospital Stabilization Grant
Mental Health Collaboration Project**

Location of Miller County in Georgia



Home of Swamp Gravy



Colquitt (also known as the Mural City of Georgia)



MILLER COUNTY HEALTH DATA (INFORMATION TAKEN FROM 2016 CHNA)

- ❖ **Population: approximately 6000**
- ❖ **We have high numbers of obesity, diabetes, hypertension, behavioral health related issues such as drug and alcohol addictions**
- ❖ **Leading causes of death in Miller County:**
 - 1. Cancer**
 - 2. Heart Disease**
 - 3. Chronic Lower Resp. Disease**
 - 4. Accidents**
 - 5. Strokes**

MILLER COUNTY HOSPITAL

ORGANIZATIONAL MAKE-UP

- 25 Bed Critical Access Hospital with a 107 Bed LTC Facility attached
- 60 bed Vent/Dialysis Unit in this LTC facility
- CON approved to add 50 more beds
- Also have another 60 bed LTC facility in Calhoun County
- 2 RHC's, 1 Specialty Clinic
- Partnership with DaVita Dialysis
- 5 Physicians employed by the hospital
- 2 FNP's, 1 PA-C in our clinics
- 2 Podiatrists
- 2 Nephrologists, 1 Pulmonologist with consulting privileges

SERVICE LINES

- Emergency Room – 7 Beds, staffed with mid-levels 24/7
- Lab, Radiology & Respiratory Services available 24/7
- Surgery – bronchoscopies, colonoscopies, endoscopies, laparoscopic procedures
- Wound Care Program
- Rehab Services – OT, PT, ST
- Very robust swing bed program which accepts chronic ventilator patients, as well as vent patients on dialysis
- Retail pharmacy with a 340b pharmaceutical program
- Deep South ACO formed 2016 to strengthen our case management of Medicare, Medicaid, & patients without insurance

Hub and Spoke Model



MILLER COUNTY HOSPITAL

There were 3 intertwining projects addressed:

1. Care Coordination Model

2. Emergency Room Redesign

3. Mental Health Collaboration

Purpose of the Mental Health Collaboration Project #3

- Two-fold project: lead to assistance with outpatients and Super-Users in ER
- First project was to get Aspire on the MCH campus - allow increased access for patients
- Second project was to “repurpose” the closed Calhoun County Hospital as year long voluntary residential drug and alcohol addiction rehab facility
- Theory was if: BHD patients could be screened, treated in outpatient settings, then they would stay out of the ER and hospital

Baseline Data for the Mental Health Collaboration

- Baseline data: in 2015 there were less than 30 patients that were 1013s in the ER
- In 2016 BHD number could be seen increasing not only in ER, but outpatient medical clinics and admissions to the hospital
- No screenings being provided to these patients as outpatients
- Aspire had 117 outpatients receiving BHD services in Miller County
- In 2016, MCH had 15 hospital admissions with alcohol or drug abuse as primary diagnosis
- Arlington, Ga. had an empty hospital since 2013- lost economy

Strategy for the Mental Health Collaboration Project

- Develop a committee with members from MCH and Aspire (Albany Area Community Service Board)
- Meet bi-weekly
- Develop a screening tool for doctor's offices
- Purchase a building for Aspire in close proximity to doctor's office
- Educate key participants i.e. doctors, their staff, and the mid-levels in the ER
- Renovate areas of the CCH-OR, ER, lobby, entrance, courtyard
- Hire experienced contractor with extensive renovation skills
- Budgeted \$381,754.00 of RHSG for this project

Community Stakeholders of Mental Health Collaboration Project

- Miller County Hospital
- Aspire
- Albany Area Community Service Board
- Touchstone (Residential program in reopened CCH)
- EMS and Sheriff's Department

Mental Health Collaboration Project #3



PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____ DATE: _____

Over the last 2 weeks, how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3

add columns + +

(Healthcare professional: For interpretation of TOTAL, TOTAL:
please refer to accompanying scoring card).

10. If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	Not difficult at all	_____
	Somewhat difficult	_____
	Very difficult	_____
	Extremely difficult	_____

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Press Clippings in Local Newspaper “Health Hacks”



**1 in 5 Adults have
A MENTAL HEALTH
CONDITION**

**That is OVER 40 Million
AMERICANS**

**More than the populations
of NEW YORK & FLORIDA
COMBINED**

To Assist With Mental Health Services:

**Contact Abby Glass
Care Coordinator
Miller County Hospital**

229-758-4283



Education Provided by Aspire:

- MCH Medical Staff
- MCH Nursing Staff
- MCH Outpatient Clinics
- MCH ER Staff
- Civic Groups and Churches
- Participated in health fairs
- Attended group meetings at Senior Centers and PTO's

Updates to the Aspire Program

- Miller County Clinics screened approx. 2000 patients in 2017 and early 2018 with the PHQ9 tool
- There were approx. 115 patients referred to Aspire programs from screenings (only an annual screen)
- Aspire has a 77% retention rate for clients in FY 2017, 78% in 2018
- Aspire had 117 clients in 2016 in Miller County, now 324 county wide

Touchstone Program- Reopening of Calhoun County Hospital



Touchstone Program



Touchstone Program



Updates to the Touchstone Program

- Currently program is full with a census of 28 beds
- There is a waiting list of 12 female patients & 17 male patients
- 5 graduates of the program
- 9 individuals working in the community (of in-house patients)
- 5 are in school for GED
- 54 FTE, 10 PTE at the Touchstone facility
- \$770,000 in revenue
- Average salary of non-licensed staff \$30,000, Licensed- \$60,000

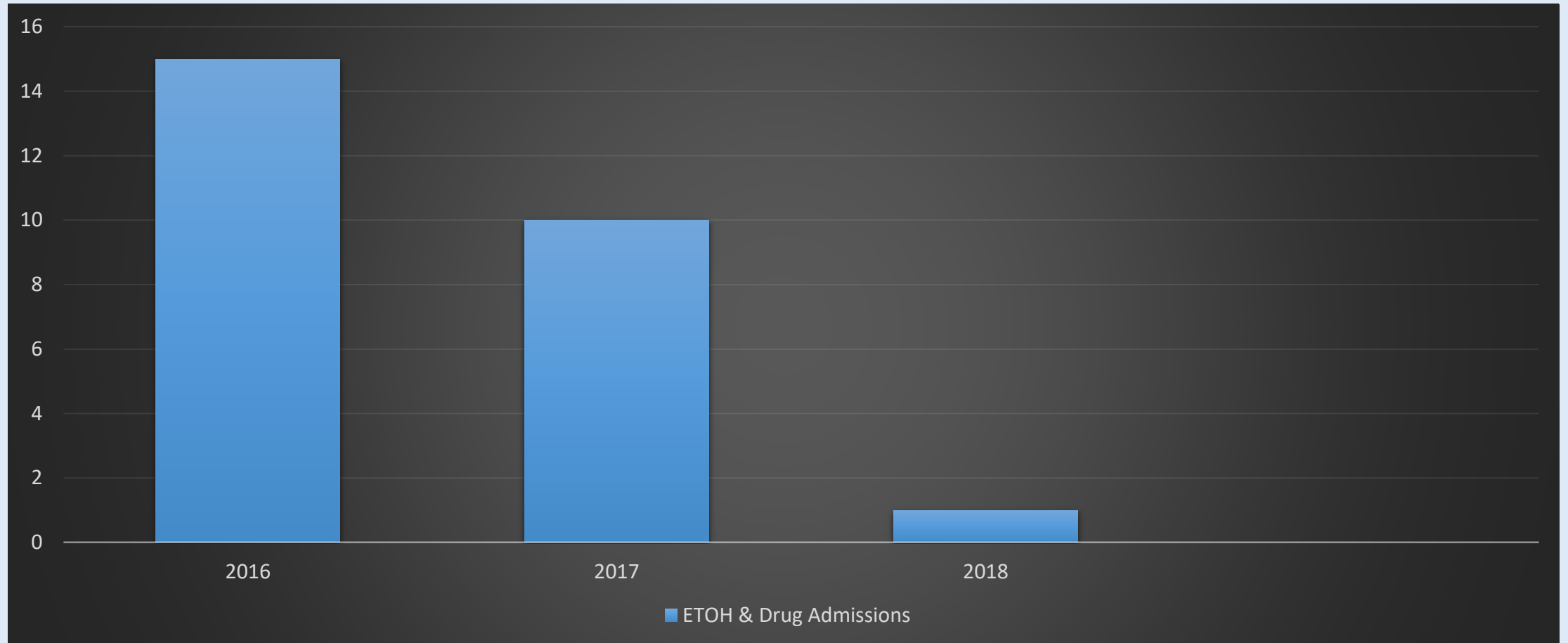
Decrease Frequent Flyers to the ER (Patients with 7 or greater visits)

	Baseline 2016	4 th Quarter 2016	1 st Quarter 2017	2 nd Quarter 2017	3 rd Quarter 2017	4 th Quarter 2017	1 st Quarter 2018	2 nd Quarter 2018
Pts	15	15	11	6	9	5	7	6
Visits	146	50	32	11	18	7	8	9
	\$143,892.30	\$65,230.15	\$30,772.90	\$17,683.90	\$25,169.30	\$13,076.90	\$6,516.00	\$15,715.70

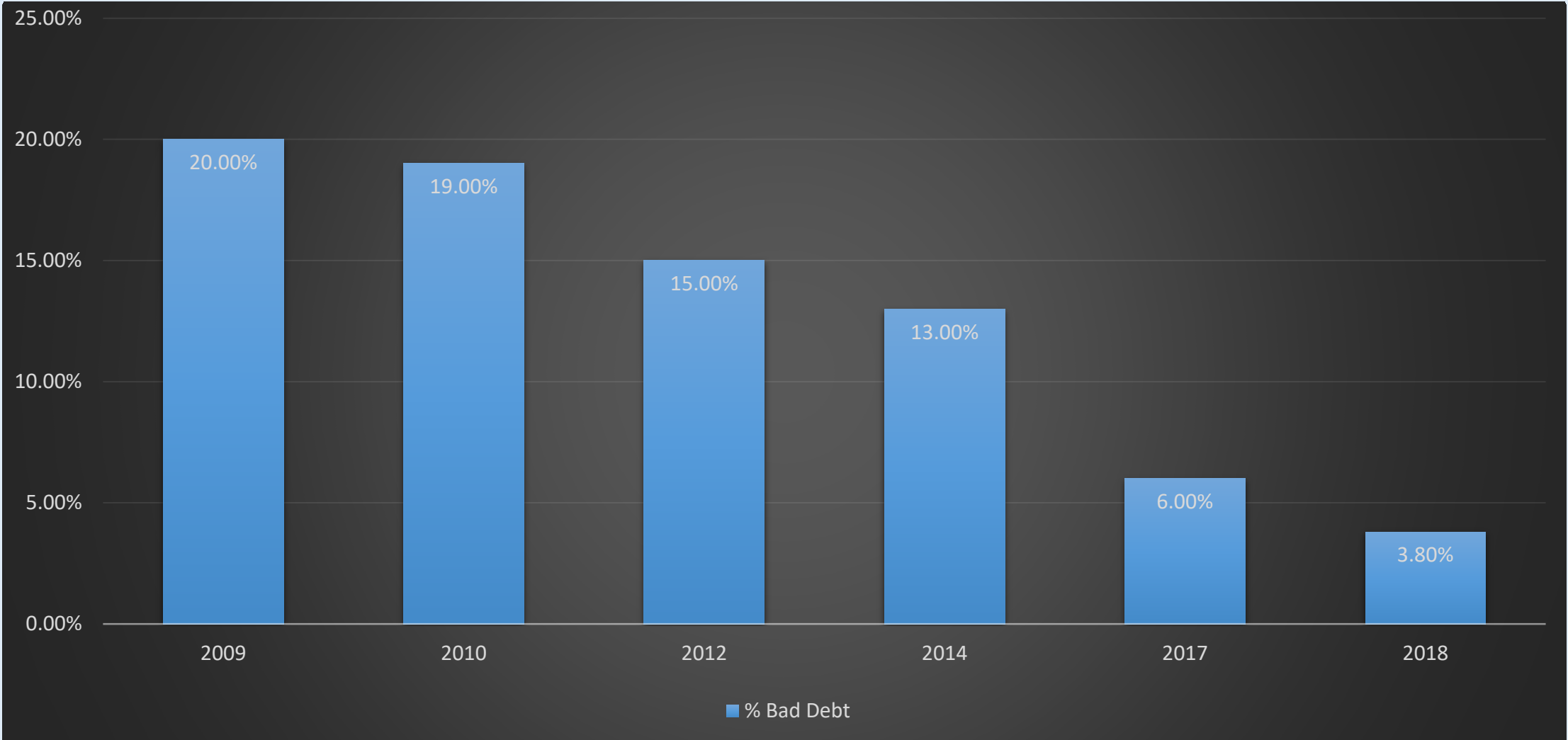
ER Redesign Goals Project #2

	Baseline 2015	4 th qtr 2016	1 st qtr 2017	2 nd qtr 2017	3 rd qtr 2017	4 th qtr 2017	1 st qtr 2018	2 nd qtr 2018
LWBS	48	10	17	26	16	8	15	8
AMA's	32	7	9	11	13	10	10	10
Average Triage Time	25 min	42 min	24 min	26 min	26 min	26 min	12min	15 min
Average of Total Treatment Time	1hr 49min	1hr 52 min	1hr 58 min	2hr 12min	2hr 9min	2hr 24min	2hr 2min	2hr 8min
1013 hold times	9hrs	9.76hrs	8.66hrs	10.97hrs	7.79hrs	16.93hrs	7.74hrs	5.2 hrs
Increase revenue, through increased market share	15.12%	16.15%	15.01%	11.20%	12.34%	12.72%	12.10%	No Data

Alcohol and Drug Addiction Inpatient Admissions



Miller County Hospital Historical Review of Bad Debt



MILLER COUNTY HOSPITAL

MENTAL HEALTH COLLABORATION PROJECT #3

MAJOR RESOURCES AND ACTIVITIES

(This is a two-fold project)

#1 – First is to establish a local presence of the Mental Health group, ASPIRE on the MCH campus.

- ✓ Renovation of a house on MCH campus
- ✓ Training of staff

#2 – Second part of this project is the establishment of a Residential Recovery Inpatient Program (Touchstone) in the closed Calhoun County Hospital which will need:

- ✓ Facility modification
- ✓ Therapeutic items

TARGETED OUTPUT AND OUTCOMES:

- ✓ Decrease the number of patients that present to MCH's ER in a Mental Health Crisis
- ✓ Increase screening of patients for underlying behavioral health issues when seen in physician's offices
- ✓ Decrease in failed mental health appointments
- ✓ Less local community resources being utilized i.e. ambulances, sheriff offices for transport of mental health patients

PERFORMANCE MEASURES:

- ✓ Inappropriate utilization of the ER
 - ✓ All cause Hospital-wide Readmissions
 - ✓ Average daily boarding hours for 1013 hold in ER
- (Potentially preventable hospital stays)

Lessons Learned

- Your community can work with your area CSB, even though you do not speak the same language
- BHD is a chronic disease and should be treated as one.
- We need to erase the stigma of seeking treatment. More people will volunteer for help if this can be done.
- Physicians, mid-levels and hospital staff do appreciate the work of the BHD partners
- A closed hospital can be given new life
- Always get a termite inspection

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