

# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover

# **Hospital Diversion and Alternatives in Crisis Response**

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**Recovery to Practice**  
Resources for Behavioral Health Professionals



# Resources and Continuing Education

**“Download Materials Here” available now**

- Speaker bios

**Available at end of webinar**

- Certificate of Participation
- Link to NAADAC Continuing Education
- Participant feedback opportunity



# Recovery to Practice

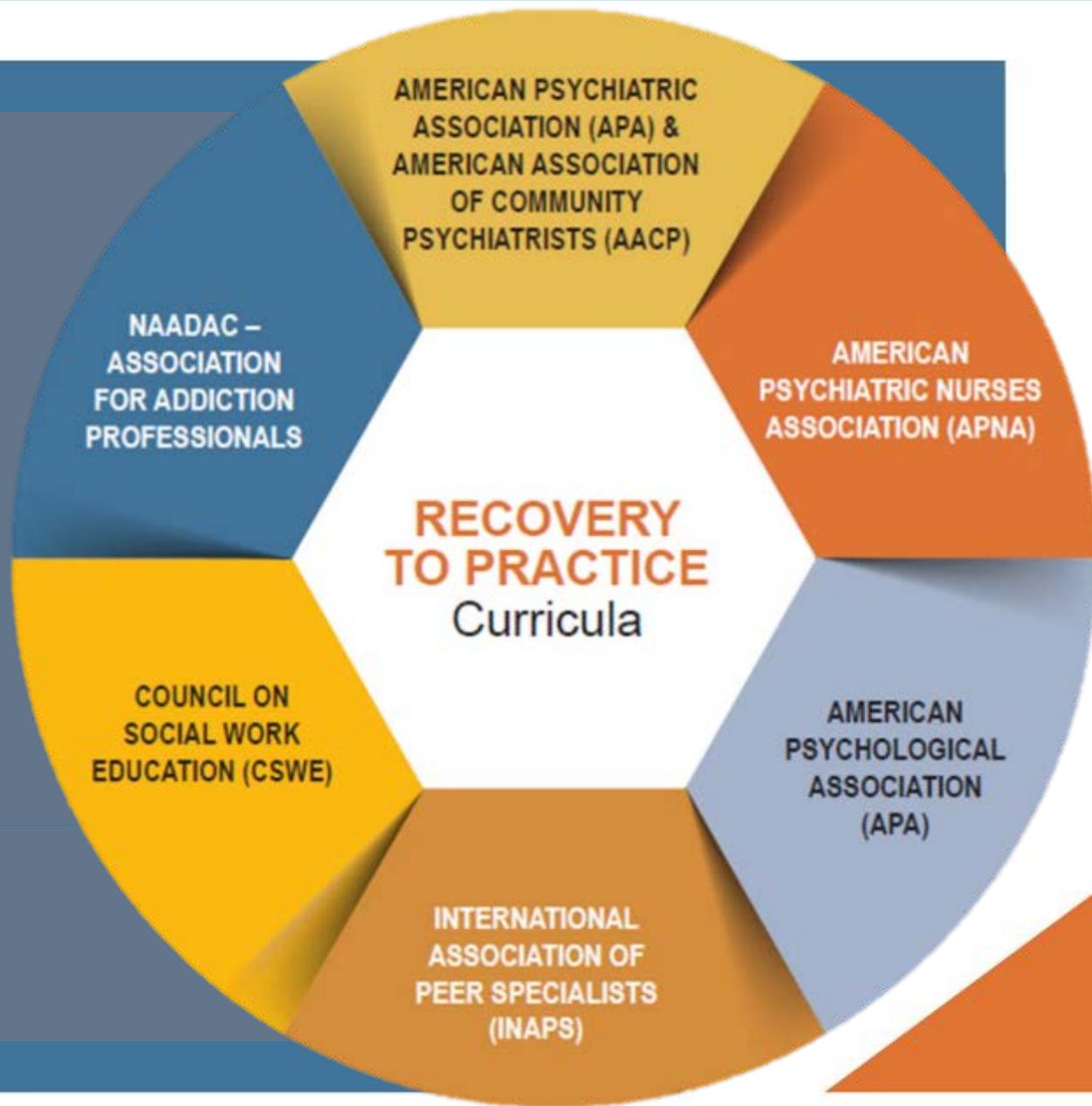
An illustration featuring several interlocking gears in various colors (pink, light blue, green, orange, blue, yellow) arranged in a horizontal line. Two dark grey hands are shown reaching up from the bottom, one holding a green gear and the other holding an orange gear, symbolizing collaboration and support.

Through education, training, and resources the Recovery to Practice (RTP) program supports the expansion and integration of recovery-oriented behavioral health care delivered in multiple service settings.



SAMHSA's  
10 Principles  
and  
4 Dimensions  
of Recovery in  
Behavioral  
Health

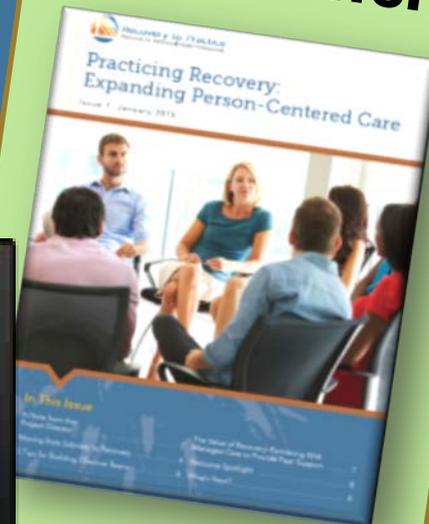
RTP  
discipline-  
based  
curricula



**FREE**  
webinars on  
recovery-oriented  
practices

# RTP Training and Technical Assistance

**Quarterly  
newsletter!**



Sign up for RTP  
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<http://www.samhsa.gov/recovery-to-practice>





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# RRC: Its Vision and How It Works



# RI's RRC's: Where are they?



- ▶ Our Flag ship RRC is located in Peoria, Arizona
- ▶ Wilmington and Ellendale, Delaware
- ▶ Durham and Henderson, North Carolina
- ▶ Riverside and Palm Springs, California
- ▶ Fife and Lakewood, Washington
- ▶ New Zealand, free-standing Living Room (through consultation with another organization)

# A Different Kind of Crisis Service



## Recovery is front and center

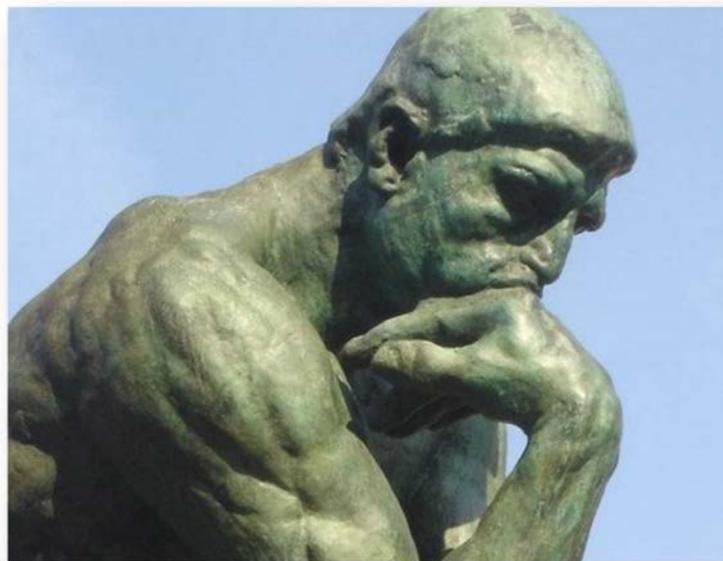
- ▶ Has a high level of peer support providers
- ▶ Makes use of a step-down program to reduce hospitalization
- ▶ Helps people get “just in time” medication
- ▶ Recognizes that social connectedness is a part of wellness and recovery

# Interdisciplinary Team



- ▶ A person in crisis needs effective care **AND** a team that sees a person who is in need of support
- ▶ Everyone on the team is important! Each has important voice: recovery, medicine, nursing, technical assistance, peer support
- ▶ Medication can help. It is most effective with a dose of kindness and hope

# POLL: Barriers to Accessing Medications



# The Lobby



- ▶ Walk Ins welcome
- ▶ Peer support provided
- ▶ 24/7 availability for assessment and assistance
- ▶ Help with refills- prescriptions if an individual has run out

# The Retreat



- ▶ Length of stay (LOS) up to 24 hours
- ▶ Secure area for evaluation and to help people stabilize
- ▶ There are individual rooms and communal areas
- ▶ Tea, coffee, and snacks are always available
- ▶ Peer support plays important role

# The Living Room



- ▶ Warm and welcoming environment
- ▶ Uses “healing spaces”
- ▶ LOS can be up to 5 days; average is 2.4
- ▶ Living Room staffed by Peer Support Workers

# Peer Run Respite



- ▶ Totally supported by peer workers who remain involved with the individual until discharge
- ▶ Individuals are able to leave to go to a job, appointments, etc. and return
- ▶ There are ten beds; can be utilized for 30 days
- ▶ Peer mentoring continues through groups and one-on-one meetings

# Recovery Response Center (RRC)



- ▶ Team members who are in identified peer support roles work alongside team members who may or may not have lived experience of recovery
- ▶ Varied staff roles offer promotional opportunities for peer workers or non-peer workers
- ▶ Nurses, physicians, and other staff may also have personal experience of living with a mental health condition.

# Recovery Response Center (RRC): Team Contributions



- ▶ Every team member has a contribution to make to ensure the wellbeing of individuals being served
- ▶ *All* team members provide warmth, kindness, and belief in individual's ability to recover
- ▶ At shift change everyone's input is valued, everyone has important information to share
- ▶ Every team member is responsible for the creation and maintenance of healing spaces and "no force first"

# Recovery Response Center (RRC) Offers Alternatives



- ▶ Offers an alternative to emergency department use for psychiatric crisis events
- ▶ Acts as an assessment center for petitions
- ▶ Offers a supportive environment that may assist individuals to avoid an inpatient event
- ▶ Uses the best practice philosophy: **No Force First**

# Nurturing Community Relationships



## External stakeholders are important!

- ▶ Law enforcement can bring us anyone, any time
- ▶ Helps divert people from being taken to jail
- ▶ Relationships with hospitals, clinical teams, mobile crisis teams to help people exit the Emergency Department
- ▶ Encourage visits from parents and loved ones

# RRC and its Value



## Diversion

- ▶ Diverts about 200 individuals each month
- ▶ People are brought to the RRC by police (70%)
- ▶ And from mobile crisis teams, family or by self-referral (30%)
- ▶ RRC sees 5000 unique individuals each year

# High Value!



## Average Length of Stay (LOS)

**Retreat:** 22 hours  
(23.59 hour observation)

**Emergency Department:**  
Variable, but average is  
more than 12 hours.  
Dependent on bed  
availability

**Living Room:** 2.4 days  
(up to 5 days)

**Hospital:** 7-14 days

# Value-added Service



## Cost Analysis

- ▶ RRC costs about 1/3 of an ED visit
- ▶ Return visits within the same month, only 5%
- ▶ Peer follow-up decreases ED visits within the first 30 days



# Diverting Court Petitions



## Court Petitions

- ▶ 65%-70% of petitions are dropped, thus not sent to hospital
- ▶ Dropping of petitions has been appropriate as determined by Medical Director



# Outcomes



## Significant reduction in hospital and ED visits

- ▶ RRC Ellendale: 50% reduction in ED use
- ▶ RRC Ellendale: hospitalization reduced from 48% to 10%
- ▶ The use of peer supporters in Fife, Washington helped reduce hospitalizations by 79% (From 202 individuals per year to 40 individuals per year)



# Why Peer Support Workers?



- ▶ Provide empathy and empowerment to support and inspire recovery.
- ▶ Use their journey as a tool to help others
- ▶ Working offers an opportunity to help others begin their recovery
- ▶ Hiring peer supporters inspires **HOPE!**



# RI International's Peer Experience

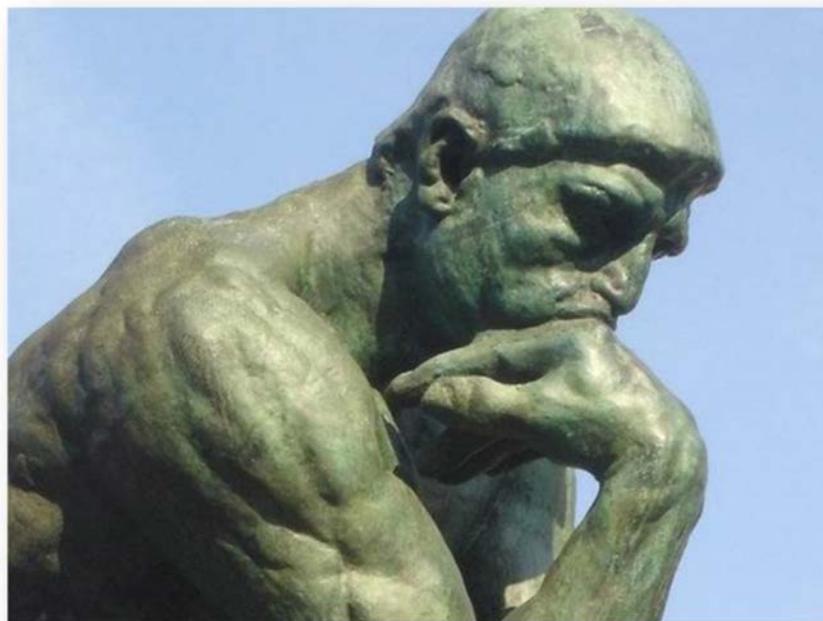
- ▶ RI International has provided Peer Training for 15+ years
- ▶ Approximately 650 RI staff members are peers (about 2/3rds of the total team)
- ▶ RI International has trained 7000+ peers in the USA and abroad since the year 2000
- ▶ Our training thoroughly covers SAMHSA's identified competencies for peer support training

# Expertise in Peer Training



- ▶ 80 class hours covering conflict resolution, trauma informed care, communication, substance use and much more
- ▶ RI's training provides certification in multiple states and countries, and is currently the Veteran Administration's preferred training option
- ▶ RI's Recovery Response Center (RRC) has included peer staff members for more than 12 years

# POLL: Experiences with Peer Supporters



# Peers Supporters are Involved:



- ▶ From the moment of admission
- ▶ During medical clearance (for comfort and support)
- ▶ Throughout each individual's stay until discharge
- ▶ At discharge a peer supporter will assist the individual for 30 days in the community

# Community Support and Follow-up



- ▶ At discharge, a peer supporter and the individual make a follow-up plan
- ▶ Make appointments and attend primary care, psychiatric, or other appointments
- ▶ Apply for housing, food stamps, other current needs of the individual
- ▶ Go to the person's home (if needed/desired by the individual)
- ▶ Follow-up occurs for approximately 30 days

# Many Roles for Peer Specialists



Peers work at all levels of the organization from entry to executive level!

- ▶ Running groups
- ▶ Checking acuity levels
- ▶ Taking vital signs
- ▶ Document in the health record
- ▶ Management and administration

# What This All Means



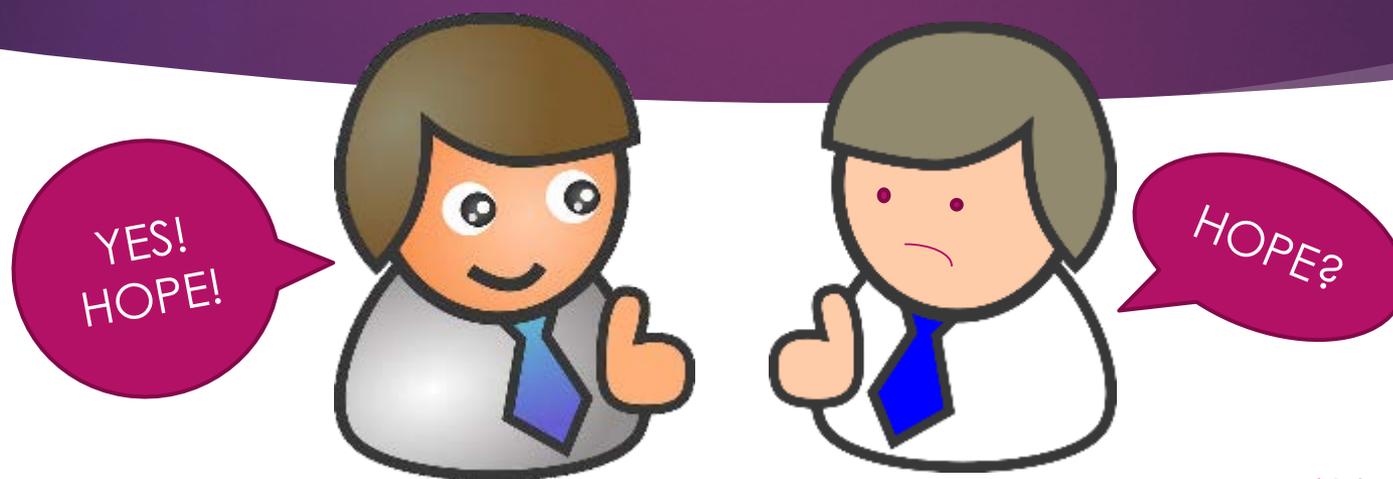
When we employ peer workers we support the development of:

- ▶ Employment skills
- ▶ Hope for our employees and the people they serve
- ▶ Strengthened community involvement and the opportunity to “give back”
- ▶ Increased sense of belonging and meaning and purpose

***AND THEY BECOME A.....***

# REFLECTION OF RECOVERY \*

FOR THE PEOPLE THEY SERVE  
LIVING, BREATHING HOPE!



\*Lisa St. George

# What We're Learning



## Peer support has great value in crisis response services

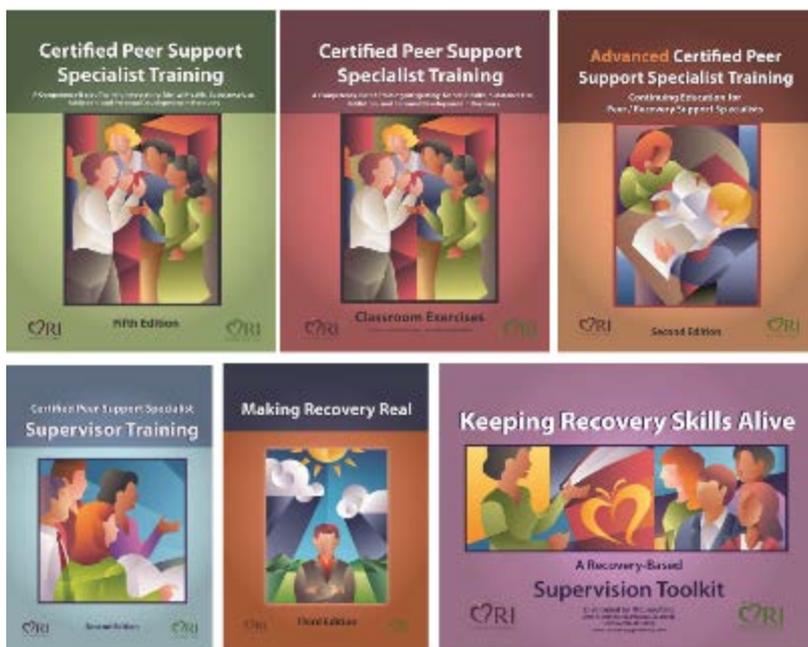
- ▶ Point of contact
- ▶ Supports self-management
- ▶ Encourages healthcare and primary care follow-up
- ▶ Reduces ED and hospital use
- ▶ Serve as advocates
- ▶ Teach others to advocate for themselves
- ▶ Promote recovery and wellness activities back home and in their community

# Workforce Development



- ▶ All team members complete a recovery-focused new hire orientation
- ▶ Peer Support Team members have 80 hours of **Peer Employment Training** supplied by RI Consulting
- ▶ Training aligns with SAMHSA Core Competencies for Peer Workers and is recognized for certification in many states and several countries

# Workforce Development Tools



- ▶ For supervisors: **Supervising a Peer Workforce**
- ▶ **Keeping the Recovery Skills Alive** Toolkit is a valuable supervision tool
- ▶ Continuing education: **Advanced Certified Peer Specialist Training, Facilitating Learning, Healthy Living through Self-Management**

# Hiring, Supervision, Professional Development of all Team Members



- ▶ Teach team members how to respond to people who are highly distressed
- ▶ People who have used the RRC share their story with the team
- ▶ One hour of supervision for every 40 hours of work
- ▶ Focus on the unique value and expertise of each team member

# Get Started Right Now!



- ▶ Hire enough peer workers so their presence is felt by the rest of the team
- ▶ Leadership demonstrates and values both peer support and recovery philosophy
- ▶ Change the environment to reduce barriers to connectedness, such as enclosures or sitting behind desks

# Language That Matters!



- ▶ Use hopeful language that promotes strength and communicates hope.
  - ▶ “When you are feeling better.” “When you return to work.” “Once home, what are your plans?”
- ▶ Ask: “What do you need?” and “How can we help?” and then be ready to listen, listen, and listen



Questions?

# Contact us



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**March:** Learn More: Readiness and measurement for recovery-oriented services

**April/May:** RTP Spring Webinar Series





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