

# OSCaR 2014 & the Continuum of Care

Behavioral Health and Wellness Council  
February 26<sup>th</sup>, 2014  
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# OSCaR Proposal – Version 2014

- ▶ OSCaR – One System of Care and Resources will:
  - ensure a community-driven approach that encompasses broad input
  - serve as “no wrong door” entrance into a complete cost-effective continuum of care for patients and providers.
  - allow patients to be immediately assessed, medically cleared and referred to the appropriate level of care at multiple entrance points in the County.
  - Must contain an information sharing system at all levels of care.

# Scope of Service – Component 1

- ▶ No Wrong Door – Medical Clearance and Appropriate Referral per Assessment
  - Intake and assessment
  - Medical evaluation/medical clearance
  - Psychiatric assessments
  - Up to 23-hour observation
    - Interdisciplinary team of health care professionals
  - Appropriate facility transportation (i.e., those requiring acute medical care will be transported to local hospitals, those requiring mental health services will be transported appropriately)
  - Discharge planning

# Scope of Service – Component 2

- ▶ **Community Triage Center – Mental Health Services and/or Detoxification Unit**
  - Patient services for mental health, co-occurring, substance abuse and detoxification services
  - Assessments for long-term or outpatient treatment
  - Initial case management services
  - Referrals and service linkages
  - Safe and effective treatment options for early intervention
  - Discharge planning

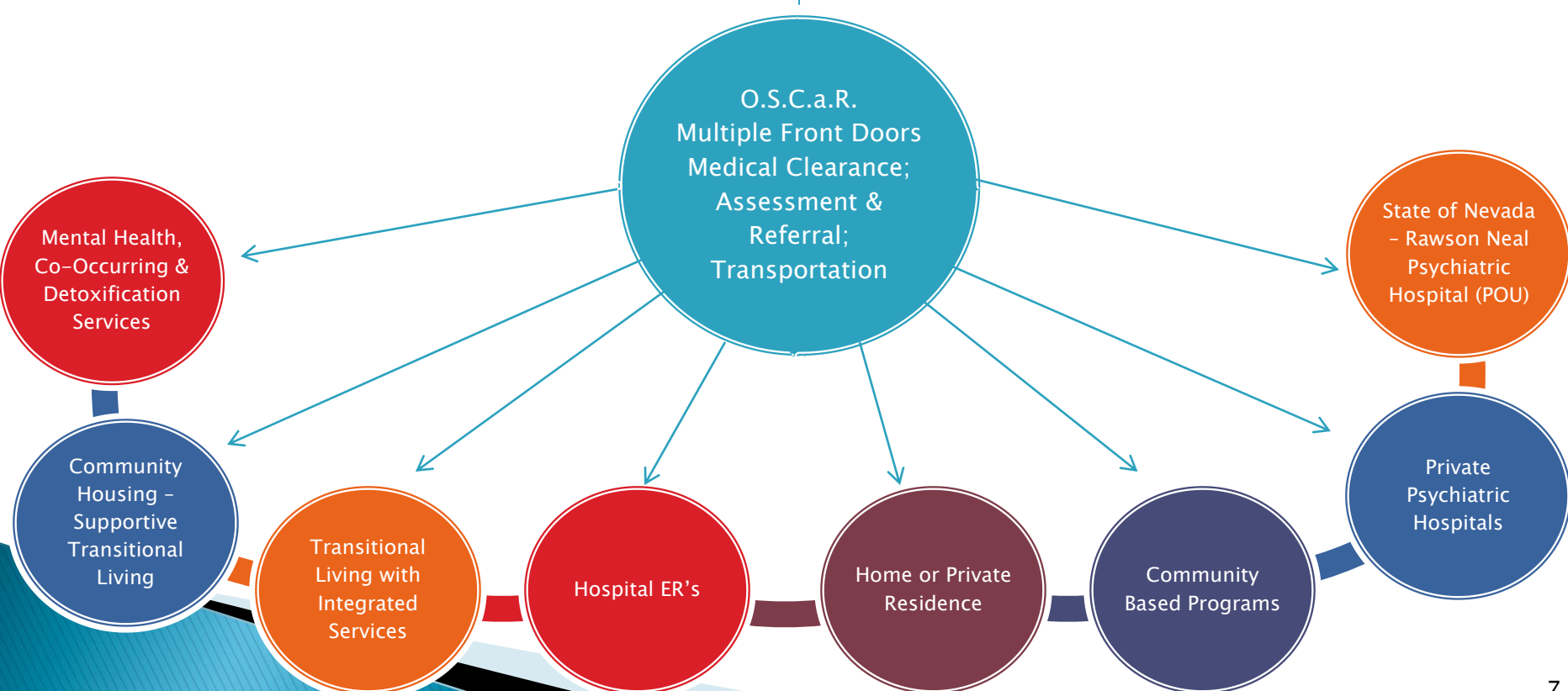
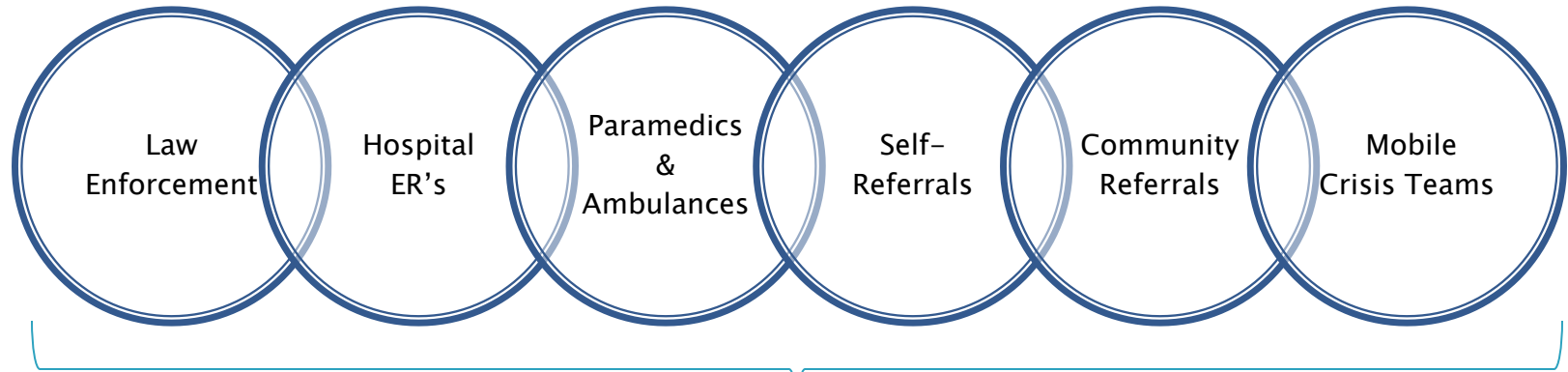
# Scope of Service – Component 3

- ▶ Transitional Living with Integrated Services
  - Social model step-down services
  - Case management services
  - Individual counseling and support groups
  - Access to medical/nursing care
  - Referrals and service linkages
  - Vocational assessment and counseling
  - Discharge planning

# Scope of Service – Component 4

- ▶ Community Housing/Supportive Transitional Living
  - Ongoing case management
  - Referrals and service linkages
  - Vocational assessment and counseling
  - Soft skills and job readiness preparation
  - Job placement
  - Discharge planning

# O.S.C.a.R. (ONE SYSTEM OF CARE and RESOURCES)



# OSCaR Would Accomplish

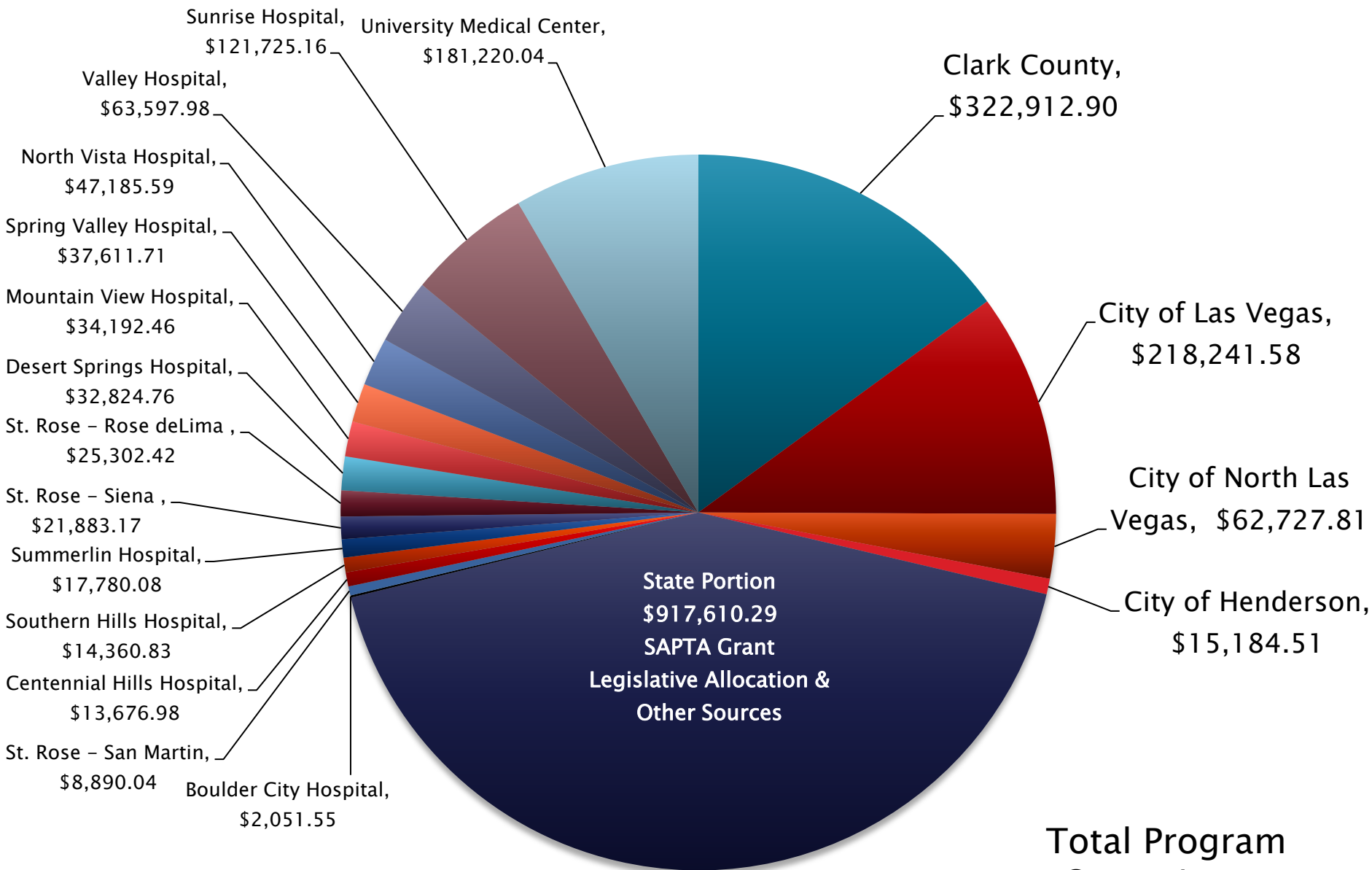
- ▶ Patients would receive the most appropriate level of care in the least restrictive setting, based on individual service needs.
- ▶ Create accessibility of centralized services, the ability of patients to move easily through the system of care, and the cost effectiveness of co-located and comprehensive of No Wrong Door – One Stop Shop mental health services.



## Example of an appropriate placement: Community Triage Center

- ▶ The CTC is for individuals in crisis which integrates the referrals from the Civil Protective Custody (CPC) program, Chronic Public Inebriate (CPI) program and the modified medical detoxification program for adults.
- ▶ These diversion efforts have saved the community substantial funds by treating substance abusers in a non-emergency setting instead of in hospital emergency departments throughout Southern Nevada.

Admission is 24 hours a day, 7 days a week



**Total Program  
Operation =  
\$2,158,979.86**

# Clients Served



## ▶ Total Number of Clients Served:

- FY 2012–13: **3,768**
- 1<sup>st</sup> Quarter (July/August/Sept) 2013–14 : **796**
- 2<sup>nd</sup> Quarter (Oct/Nov/Dec) 2013–14: **715**

## ▶ Average Length of Stay:

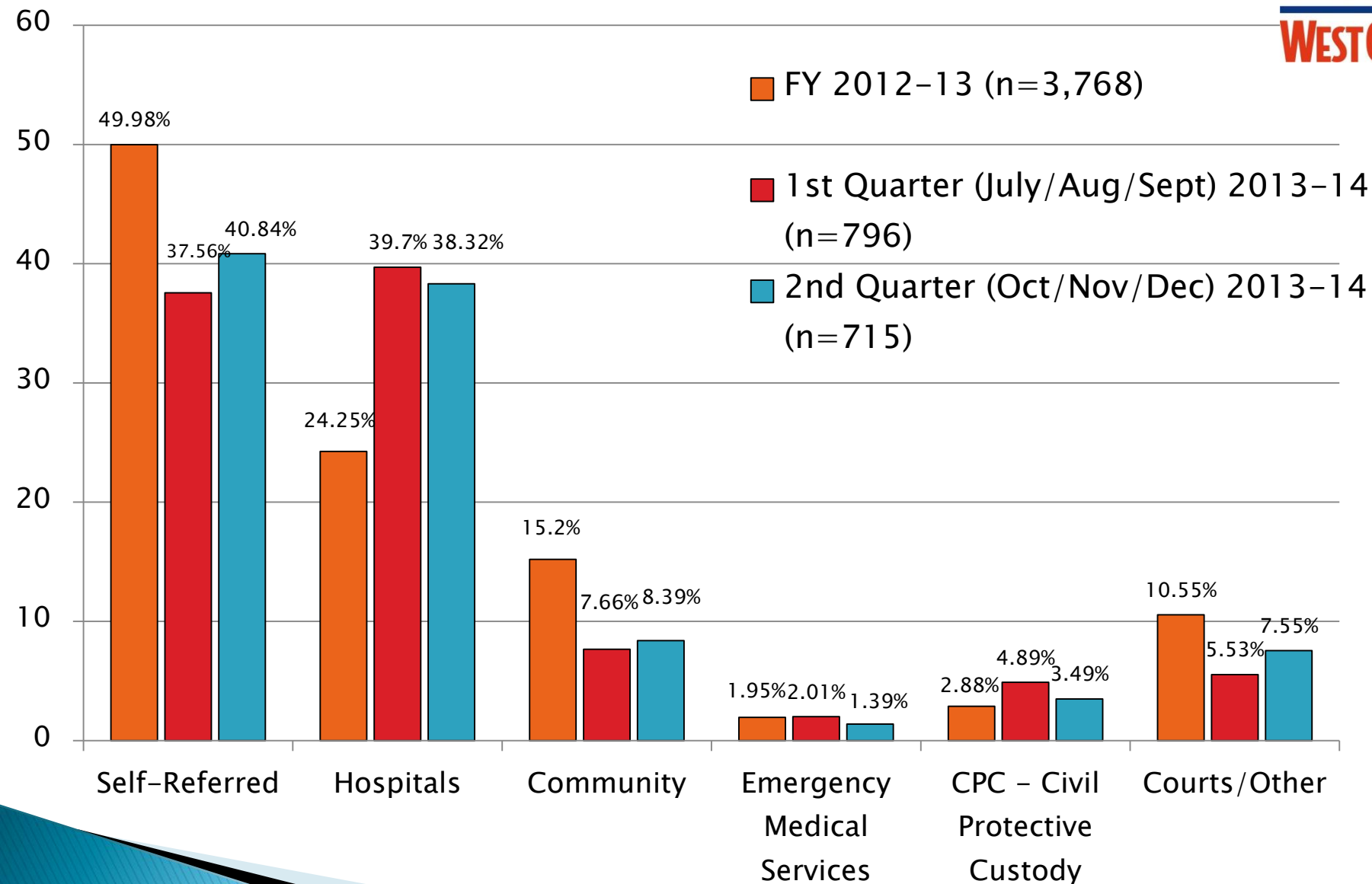
- FY 2012–13: **3.31 days**
- 1<sup>st</sup> Quarter (July/August/Sept) 2013–14 : **3.28 days**
- 2<sup>nd</sup> Quarter (Oct/Nov/Dec) 2013–14 : **2.92 days**

# Socio-Economic Factors

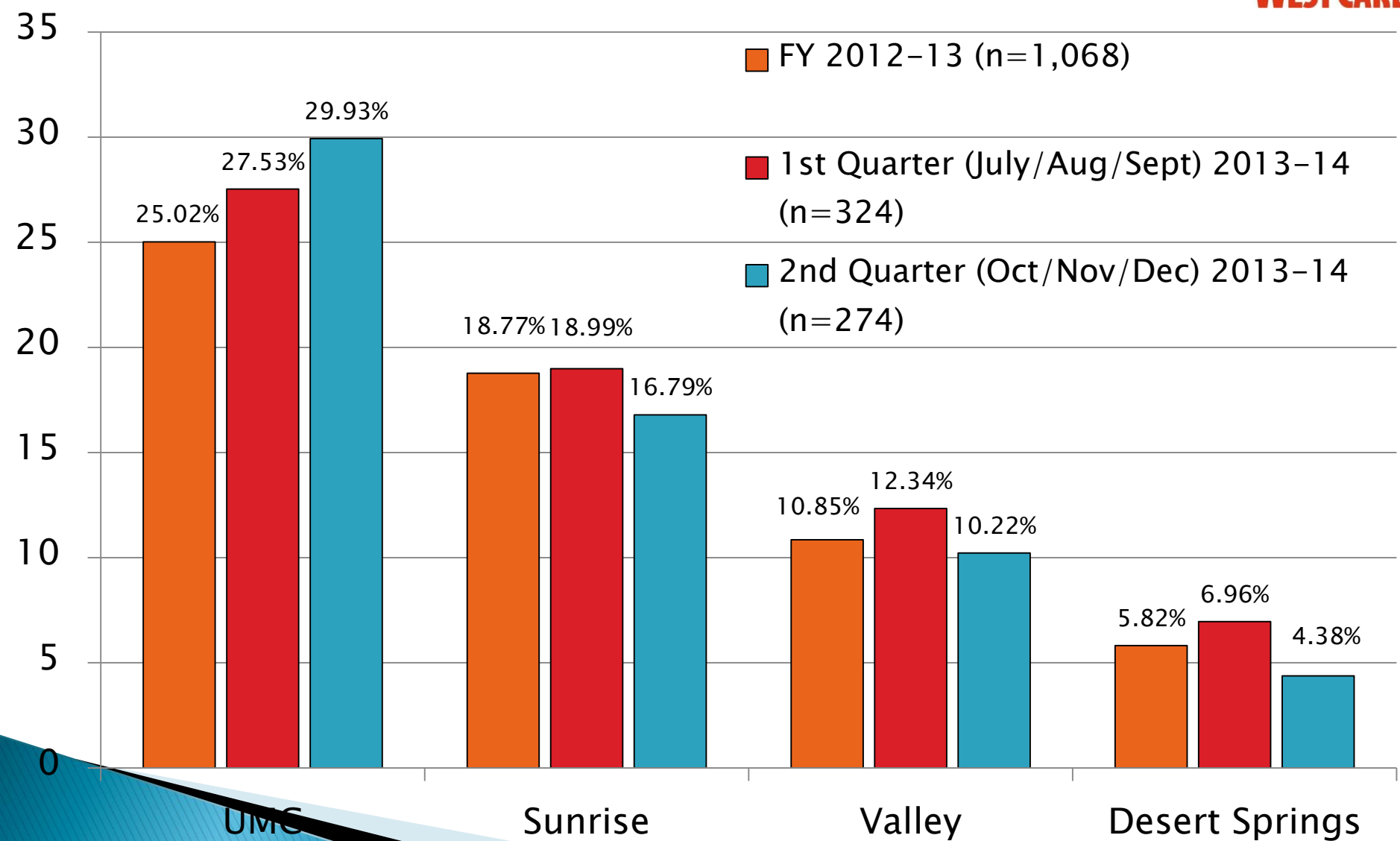


CATEGORY	FY 2012-13 (n= 3,768)	1 <sup>st</sup> Quarter - 2013-14 (n = 796)	2 <sup>nd</sup> Quarter - 2013-14 (n=715)
Homeless	27.04%	39.24%	37.48%
Unemployed	89.54%	92.66%	92.87%
Living Below Federal Poverty Level	89.30%	92.28%	92.87%

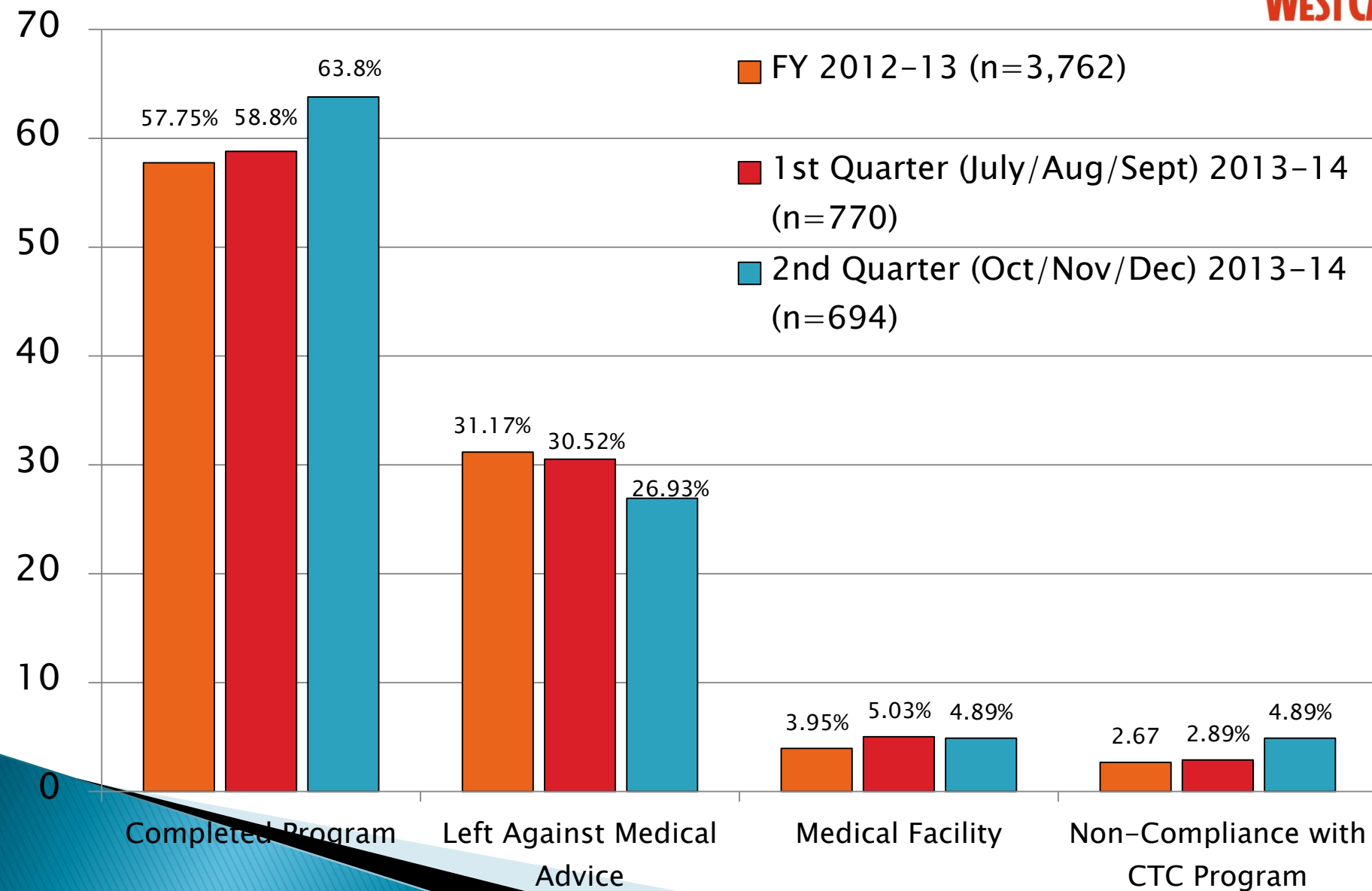
# Referral Source



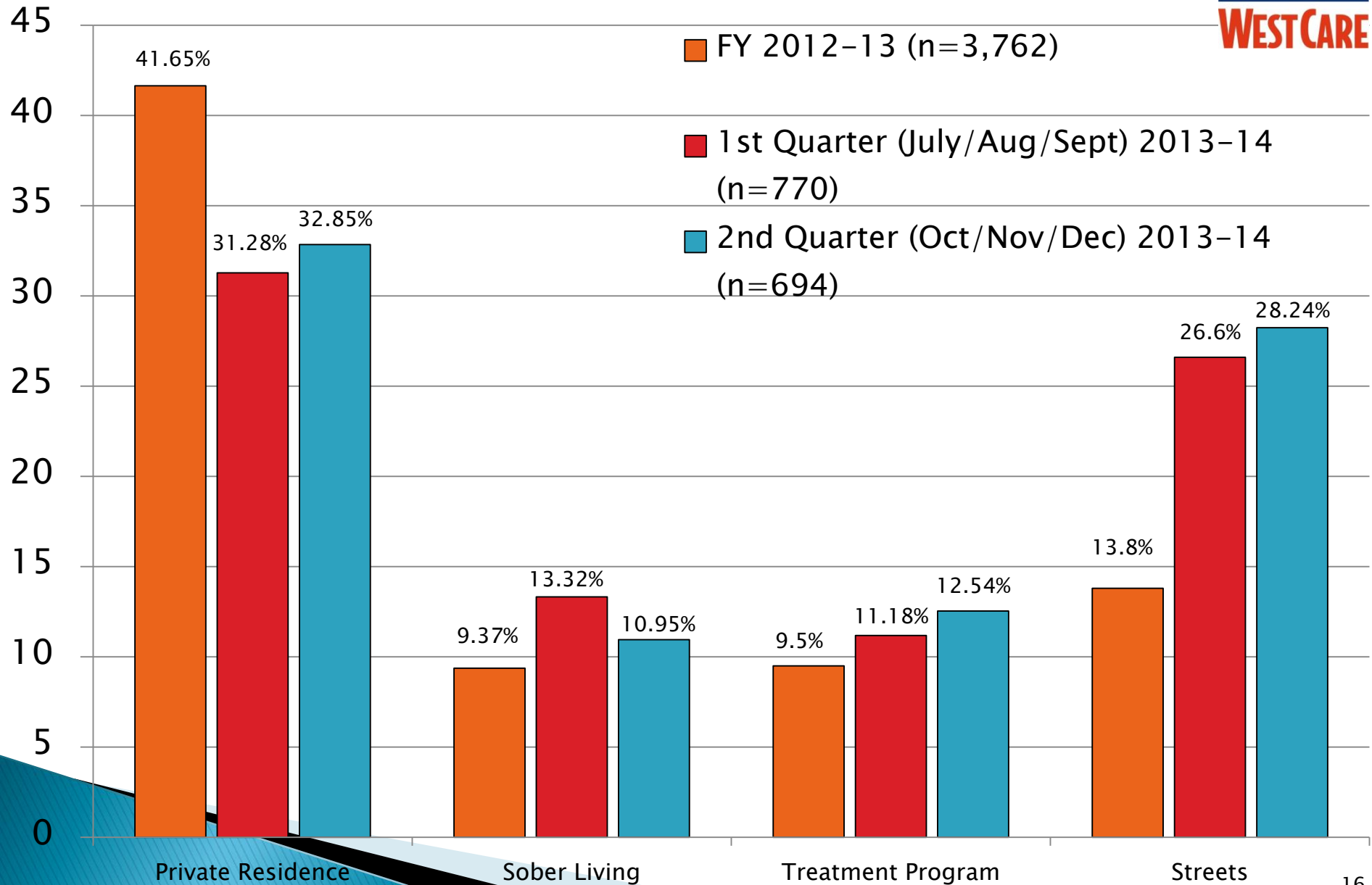
# Hospital Referrals



# Discharge Reason

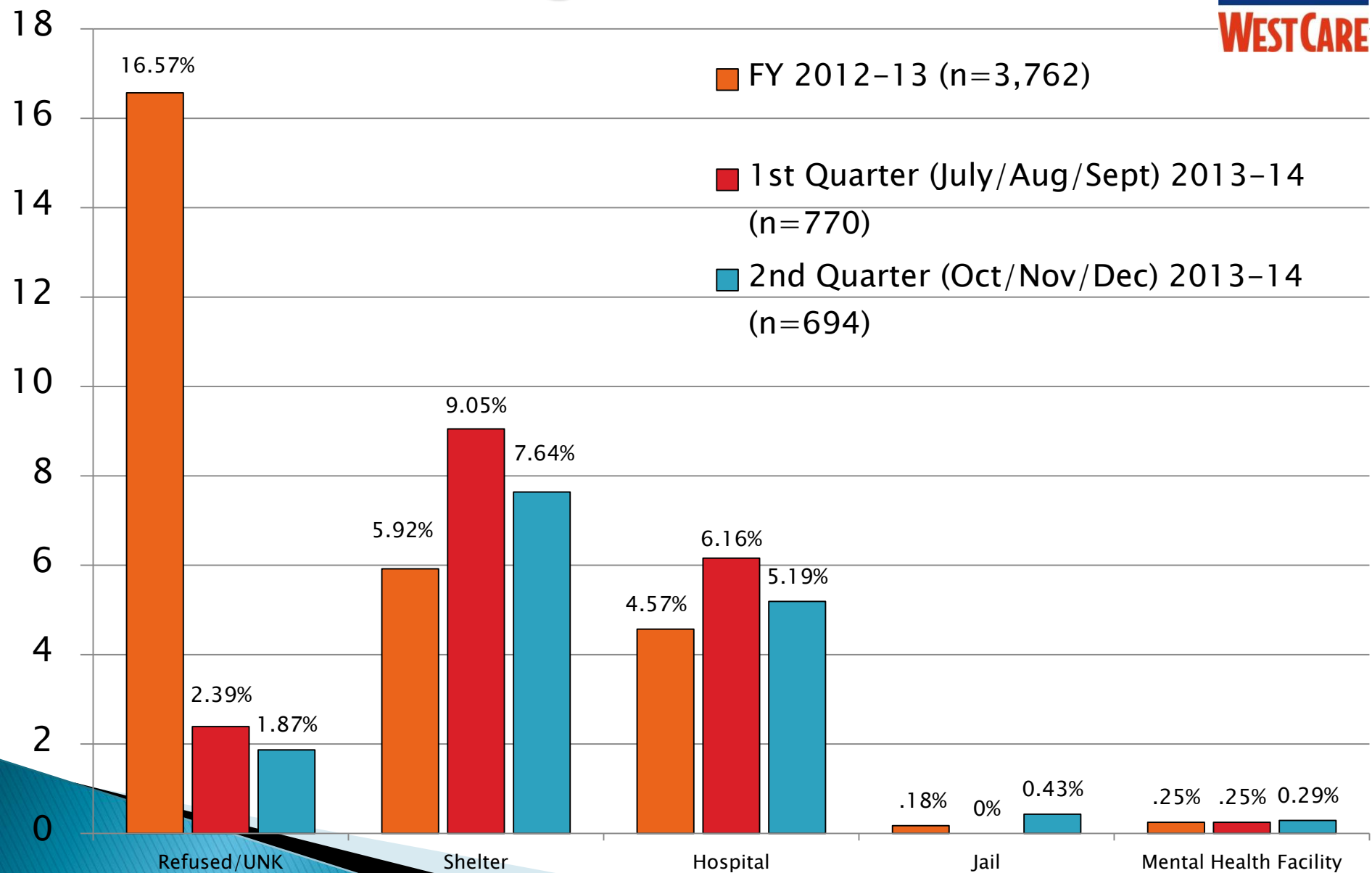


# Discharge Placements





# Discharge Placements



# Mental Health Services



- ▶ California:
  - SOS– Short–term Overnight Stay for mentally–ill following discharge from area hospitals and/or for stabilization/ respite care.
  - Options– intensive, short term & daily access outpatient treatment
  - CPRS– Crisis Psychiatric Response Services in hospitals assessing for Mental Health hold.

# Mental Health Services



## ▶ Florida:

- St. Petersburg–
  - Turning Point (Crisis Stabilization Unit)
  - Mustard Seed Inn (transitional living for Mentally-ill)
- Marathon (Middle Keys)–
  - Guidance Care Center– secured CSU legal hold receiving unit and crisis stabilization program for mentally-ill and substance abusers
  - Personal Growth Center (Psychosocial rehab/job training/ life skills)
  - Heron House– assisted living facility/Mental Health Care Integration

# Mental Health Services



- ▶ Georgia:
  - BLANKET ATLANTA comprehensive care to homeless adults, their families, and those in need of permanent supportive housing and treatment, including veterans and chronic public inebriates with substance abuse, alcohol, and co-occurring mental health disorders.
- ▶ Iowa:
  - FAVA– working with Veterans with PTSD and suicide risks/ mental illness

# Mental Health Services



## ▶ Nevada:

- Las Vegas–
  - CTC– short term crisis services for mentally–ill
  - Safe Haven– transitional living for chronically mentally–ill
  - Runaway Youth shelter– works with youth in transition who are often affected by substance abuse and mental health issues.
- Reno–
  - CTC– short term crisis services for the mentally–ill
  - Dove House– transitional living for the chronically mentally–ill

# Mental Health Services



- ▶ Pacific Islands:
  - Targeted outpatient services for persons with mental illness
  
- ▶ South Dakota:
  - In jail services for crisis stabilization and detoxification for those with co-occurring mental health and substance abuse issues, with and without formal charges. (March 1<sup>st</sup>)

# Questions?



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