New Oakland Health Behavioral Diversion Services: Alternatives to Inpatient Hospitalization for Improved Outcomes and Efficiency

Meeting an Unmet Need for Integration of Services

Public and private mental health providers and service organizations struggle every day to make the most of a rapidly changing (and often diminishing) resource pool for mental health care. As a result, it has never been more important to balance clinical needs, available resources and the imperative of insuring the best outcomes.

As a proud and long-standing behavioral health provider in southeast Michigan, we at New Oakland believe strongly in pioneering new approaches to individuals and families as they seek (and sometimes struggle) to overcome mental health conditions.

New Oakland is a leading provider of mental health and substance abuse services in southeast Michigan, offering a range of behavioral health services in five uniquely positioned, modern facilities. All New Oakland programming is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

The New Oakland approach is organized around a single idea: integration. The New Oakland model is built to offer alternatives to the “binary” decision between inpatient hospitalization or low-intervention, long-lead-time therapies. Our goal is to integrate clients with a broad continuum of care options, delivering the right care at the right time in the right way. The New Oakland model helps integrate the many and sometimes conflicting demands and priorities that are placed on the mental health delivery system every day.

In practice, our approach manifests itself in a New Oakland’s commitment to:

- 24 hour access to care to assure the right treatment choices at the right time
- Emergency room screening, rapid clinical response to crisis situations and access to a psychiatrist within the first three hours of a crisis (either in person or via telephone or video conference)
- A commitment to meeting the transportation needs of consumers enrolled in our partial hospitalization program (PHP) or intensive outpatient program (IOP)
- Thorough psychological testing as a basis for treatment planning
- Our effort to create and maintain a family based, warmer, more nurturing environment than clients experience with inpatient hospitalization

Most importantly, we believe by coordinating with schools, county CMH and other mental health agencies at the time of initial evaluation, we can work with hospitals to provide an appropriate role for inpatient hospitalization as one among many person-centered tools to support clients with serious behavioral health conditions.

By working with county CMHs to broaden options for patients, New Oakland is uniquely built to help people maintain their connections with the home, the family and the community. In the final analysis, it is this commitment to integration that is New Oakland’s defining idea — and the core of our approach to helping address the growing unmet need for a new kind of mental health service delivery.

Beyond the “binary” decision

As with other forms of medical care, an increasing number of behavioral health cases are presenting themselves to hospital emergency rooms in times of crisis or near-crisis, where attending physicians are faced with a difficult decision to choose between inpatient psychiatric admission or sending patients home, sometimes with a prescription and direction for outpatient evaluation and therapy that may take weeks to schedule.

Historically, mental health crisis care has often been viewed as a “binary” kind of decision: admit or don’t admit, “in or out.” In recent years, the increasing availability and effectiveness of prescription medications has meant inpatient hospital admissions are somewhat less prevalent, but to date within these rapidly evolving dynamics of mental health care delivery in have created both an urgent need and an opportunity for a new kind of mental health provider and new opportunities to respond with greater customization and agility to the needs of the youth who represent the future of our region.

As shown in the diagram below, New Oakland’s continuum of care includes:

1. Outpatient services: traditional one-on-one therapy
2. The FACE to FACE Partial Hospitalization Program: a State of Michigan-licensed intensive program that can be an effective alternative to inpatient hospitalization
3. Intensive crisis stabilization services (ICSS): for circumstances where New Oakland therapists may serve as on-site intermediaries to help connect patients with the appropriate care at times where rapid intervention is essential
4. Integrated case management: New Oakland understands the critical role of case management and maintain our own team of case management professionals

5. Tele-psych online counseling: using technology to provide rapid, thorough care effectively and at lower cost to the system

6. Child/adolescent residential services: providing a safe, stable group environment for children and teens who need it

7. Inpatient referrals: working closely with regional hospitals to assure patients who need psychiatric hospitalization receive it

8. In-home services: home visits to provide care continuity and monitor patient progress

9. Non-emergency transportation: bringing patients to and from therapeutic appointments, a critical need for patients who do not have easy access to transportation

10. Pre-admission reviews and consults: collaborating with clinical, CMH and other staff to offer alternatives and perspective

11. Medication clinic: integrating medication with the therapeutic continuum when clinically necessary

12. Criminal justice system collaboration: close relationships with courts and police help assure the right role for behavioral health evaluation in the judicial and criminal justice process

With a team of 16 of leading psychiatrists and physicians and more than 90 social workers and other clinical professionals, the New Oakland continuum of mental health services helps fill the gaps or “round out” the roster of options available when patients present with behavioral health challenges. Our focus is on person-centered, active, preventive and early intervention approaches and an emphasis is placed on working with the whole family while striving to maintain the integrity of each family member.

New Oakland Intensive Crisis Stabilization

As part of our commitment to patient services, New Oakland Family Centers offers Intensive Crisis Stabilization Services (ICSS). Our crisis stabilization services are structured treatment and support activities provided by a multidisciplinary team under the continual supervision of a psychiatrist.

Intensive crisis stabilization is designed to provide a short-term alternative to inpatient psychiatric services. Indeed, our ICSS program has achieved rate of diversion from inpatient hospitalization of 60-70% compared with pre-program hospitalization rates. Services may be used to avert a psychiatric admission or to shorten the length of an inpatient stay when clinically indicated.

Intensive Crisis Stabilization Services are for individuals who have been assessed to meet criteria for psychiatric hospital admissions but whom, with intense interventions, can be stabilized and served in their usual community environments. These services may also be provided to individuals leaving inpatient psychiatric services if such services will result in a shortened inpatient stay. Individuals must have a diagnosis of mental illness or mental illness with a co-occurring substance use disorder or developmental disability.

Intensive Crisis Stabilization Services will be provided where necessary to alleviate the crisis situation, and to permit the individual to remain in, or return more quickly to, their usual community environment. Importantly, services can be provided in the home, at school, at work, at medical or mental health treatment centers or any other setting that is clinically appropriate.

Intensive Crisis Stabilization Services may be provided initially to alleviate an immediate or serious psychiatric crisis. However, following resolution of the immediate situation (and within no more than 48 hours), an Intensive Crisis Stabilization Services treatment plan must be developed. The Intensive Crisis Stabilization Services treatment plan will be developed through a person-centered planning process in consultation with the psychiatrist. Other professionals may also be involved if required by the needs of the beneficiary. The individual plan of service will contain:

- Clearly stated goals and measurable objectives, stated in terms of specific observable changes in behavior, skills, attitudes, or circumstances, structured to resolve the crisis.
- Identification of the services and activities designed to resolve the crisis and attain his goals and objectives.
- Plans for follow-up services after the crisis has been resolved.

For children’s intensive/crisis stabilization services, the treatment plan must address the child’s needs in context with the family needs. Educational services must also be considered and the treatment plan must be developed in consultation with the child’s school district staff.

New Oakland’s FACE to FACE Alternative

New Oakland has made it a priority to communicate and work closely with county CMH professionals, schools and other agencies to implement our FACE to FACE care model. From crisis intervention to rapid evaluation and assessment to development of care plan, FACE to FACE is the care model that separates New Oakland from other behavioral health providers in southeast Michigan.

FACE to FACE is also a State of Michigan-licensed partial hospitalization program (PHP) that provides either (a) a clinically rigorous alternative to psychiatric inpatient admission or (b) a cost-effective “step down” intermediate level of care following a period of hospitalization. FACE to FACE utilizes a multi-disciplinary approach to assess, intervene and empower both the individual and the family to work towards resolution of the presenting problem.

A candidate for FACE to FACE begins a rigorous seven-step process whose goal is to understand the root causes of the presenting behavioral health diagnosis. Clients work in exhaustive one-on-one therapy sessions, in groups and as part of their family unit to develop new coping skills and strengthen a basis for a path to wellness.

FACE to FACE PHP services are provided in New Oakland settings that feel more like schools than hospitals. This warmer and more nurturing environment provides patients (adults, children and teens in age-specific groups) an intensive six-hour-per-day program with and average length of stay of between three and seven days. The program provides structured, yet individualized treatment that helps children, adolescents, adults and parents effectively deal with crisis, each individual diagnosis and intra-family conflict. The patient, along with the rest of the family acquires many new skills: social, interpersonal, communication, negotiation and conflict resolution.

Importantly, FACE to FACE PHP clients return home or to a safe residential setting every evening, allowing time to build and strengthen the all-important reintegration with family and community.

Historically, mental health crisis care has often been viewed as a “binary” kind of decision: admit or don’t admit, “in or out.” At New Oakland, our goal is to provide high-quality middle ground alternatives across a continuum of care.