

Howard County's Behavioral Health Task Force: Super Users Work Group

Task Force Report: January 15, 2015 - draft

During its four meetings, the Super Users Work Group has discussed various definitions of "super users", why they might be "super users", how they enter the behavioral health system, and what services they are using. The Work Group is looking at points of entry to the behavioral health system by age groups: children, adults, and our geriatric population.

It is agreed that there may be a wide definition of "super user" and therefore a wide variety of care plans/service delivery models at the points of entry. The Work Group plans to do further research to learn more about how the various points of entry identify and serve "super users".

Points of Entry research draft:

How would you define a "super user" at your point of entry?

How many clients deemed as "super users" are

1. Seen/admitted?
2. Turned away/referred to another service provider?

Do you have a way to determine:

1. If a super user is doing so because he/she is in need and is managing his/her conditions
2. If a super user is not following his/her plan of care so keeps needing care that might be avoided if the user was managing more effectively
3. Has a catastrophic event triggered the extra use of services on what might be a temporary basis?

What protocols do you have in place for serving "super users"?

Can you determine the behavioral health costs for such clients? (give a time period)

Points of Entry:

Children

Schools (see Cynthia's presentation – HCPSS Mental Health Task Force Notes)

Hospital

Foster Care, Child Protective Services

Police or DJS or MCT

Insurance

Adults

ED and inpatient; (emergency petition or psych eval) Fire and Rescue (911 repeats)

Emergency Petitions, MCT, Law enforcement/DOJ/doc

Behavioral Health unit of Health Department

Community practitioners

Homeless (Grassroots) and (domiciled)

Couch surfers

Multiservice Center

DSS – Adult Protective Services

Insurance

Geriatric

We will be able to fill this in after our meeting on 1/14 in time for the 1/15 presentation

Potential recommendations for Howard County's action plan:

Create a repository of information about how "super users" are served at various points of entry.

Consider if a case management/assessment process that helps sort out why super users are super using and if there are alternatives to assist the super user get the resources. Multidisciplinary team from organization among those who most frequently serve super users to review and problem solve care issues.

Consider proposing a more effective after hours (5p-3am or after 11p for MCT) alternative for in person/walk care that is specific to behavioral health (like Patient Frist/Right Time for somatic care).

Next meeting: (update)

Wednesday, January 14, 2015 10:00 am

Administration Offices of Howard County General Hospital

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Call in option: [1-800-925-9789](tel:1-800-925-9789)

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