## SINGLE POINT OF ACCESS

Care Management, ACT, and AOT Referral Process

# WHEN IS A REFERRAL APPROPRIATE? CARE MANAGEMENT

- Individual is diagnosed with a serious mental illness (Schizophrenia Disorder,
   Schizoaffective Disorder, Delusional Disorder, Psychotic Disorder, Major Depressive Disorder, Bipolar Disorder, Post Traumatic Stress Disorder)
- Is in need of added support in the community due to high risk of further system utilization
- Unable to maintain community-based linkages and important supports

# WHEN IS A REFERRAL APPROPRIATE? ASSERTIVE COMMUNITY TREATMENT PROGRAM (ACT)

- Community based treatment—Treatment goes to the individual
- Care Management criteria
- Demonstrated difficulty in accessing or engaging with traditional service delivery models
- At least 2 of the following:
  - 3 inpatient hospitalizations in the past 12 months
  - At least 2 readmissions to a psychiatric hospital within 30 days
  - Utilization of crisis services 3 times in any 30-day period in the past 6 months
  - Intractable severe major symptoms (i.e. psychotic, suicidal)
  - Co-occurring mental illness and substance use disorder for more than 6 months
  - Involvement or high risk of being involved in the criminal justice system in last 6 months
  - Homeless, at risk of homelessness, or living in substandard housing

# WHEN IS A REFERRAL APPROPRIATE? ASSISTED OUTPATIENT TREATMENT (AOT)

- Assisted Outpatient Treatment (AOT)
- Criteria:
  - 18 years old or older and diagnosed with a mental illness
  - Unlikely to survive in the community without supervision, based on a clinical determination
  - Has a history of non compliance with treatment for mental illness which has led to either 2 hospitalizations for mental illness in the preceding 3 years, or resulted in at least 1 act of violence toward self or others, or threats of serious physical harm to self or others, within the preceding 4 years
  - Unlikely to accept treatment recommended in treatment plan
  - In need of AOT to avoid a relapse or deterioration that would likely result in serious harm to self or others
  - Will likely benefit from AOT

### MAKING A REFERRAL

- Eriespoa.org
- Go to referral submissions on top banner
- Log in with existing sign in, or sign up
- Chose "create a referral"
- Upload the SPOA consent
- Chose care level (ACT or Care Management) & care status (general or AOT)
- Fill in all fields
  - Be thorough
  - More information is better than not enough
  - A risk score is generated on the information provided which helps in assigning to proper care in a timely manner
  - Instances of lethality: Is not a required field, but should be filed out even if the answer is "don't know"
- Finish and submit referral (submit button located in top right corner of screen under the drop down arrow)
- Make sure consent is attached!

### **SPOA CONSENT**

- SPOA consent must be filled out correctly, signed by the individual who services are being requested for, and uploaded to every submitted referral
- Can be located on eriespoa.org → referral submissions → general consent form

• \*\* Referral will NOT be accepted without a completed consent\*\*

#### Eric County Department of Mental Health Permission to Use and Disclose Confidential Information

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### **AOT CONSENT**

- When making a referral specifically for AOT, an AOT consent is required in addition to the general SPOA consent.
- Must be filled out correctly, signed by the individual the referral is being made for, and uploaded into the referral
- AOT consent is located at eriespoa.org→referral submissions→more→AOT consent form

\*\*Referral will NOT be accepted without a completed consent\*\*

### Eric County Department of Mental Health Assisted Outpatient Treatment Program AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION PURSLANT TO HUMAN

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I, or my authorized representative, request that health information regarding my care and meatment be released as set forth on this form: In occordated with New York State Lawrence the Province for the Health Instrumed Portability and Accordability Act of 1996 (EIPAA), Luckesland that

- 1. This authorization may include disclosure of information relating to ALCOHOL and DRLG ABLSE, MENTAL HEALTH TREATMENT, except psychochecupy noise, and CONFORMATION or ly if I alone my initials on the appropriate line in gain S(g). In the event the health information (deer hed below includes any of these types of information, and I mitful the line on the box in them S(g). It specifies the mathematical information to the pervector indicessed in term 8.
- 2. Fill an authorizing the release of IDM-related, alcohol or drug treatment, or mental health treatment information, are recipient is prohibited from re-escalesing anch information without my interest or many receives an use my PM-related information without numerical related to a Top social who may receive an use my PM-related information without numerical related information. ITM experience discrementation herease of the related on discharge of ITM-related information. I may contact the New York State Division of Human Rights at (212) 489-2492 on the New York City Contraction of furnant Augsts at (212) 506-7450. These agencies are respected by rights.
- 3. I have the right to revoke this authorization at any time by writing to the has theories provider listed below. I understand that I may revoke the authorization except to the extent that action has already been taken based on this authorization.
- I understryf that signone this surfronzation is vectorably. Buy treatment, preparent, desoftment or all real to play, or oligibility for borief is so I not be conditioned upon my authorization of this disclosure.
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### Important notes:

- Demographic information should be filled out completely
- Box 8: We do NOT want the entire medical record. The first option, medical record from 48 months prior to (enter date) should be chosen along with admission discharge summaries, etc. Client should initial alcohol/drug treatment, and mental health information
- Box 9: Add any other relevant hospitals where records should be requested from (i.e. individual had an inpatient stay at Strong Memorial)
- Box 11: Don't forget expiration date! 1
  year from date of signing is a good
  choice
- Client and witness signature needed

### IMPORTANCE OF A COMPLETE REFERRAL

- Complete referral:
  - Accurate and detailed hospital information
  - Lethality section filled out fully
  - Up to date demographics and contact information
  - Referral source contact information
  - Diagnosis with verification (if available)
  - Collateral contacts
  - Consents completely filled out and accurate

- Incomplete referral
  - No hospital information, or incomplete information
  - Nothing filled out in lethality section
  - Incorrect contact information, or no contact information
  - Incomplete referral source contact information (what is your relationship to the referred? Phone number? Email?)
  - No diagnosis, or not a SPOA accepted diagnosis
  - No collateral contacts
  - Consents missing or filled out incorrectly

### IMPORTANCE OF A COMPLETE REFERRAL

- The more information in the referral → The higher the risk score
- Allows SPOA to know where to request records from (for AOT referrals)
- Give the ACT team/Care Management agency an accurate description of the client they will be serving
- The more information we have, the quicker we can assign, therefore bringing needed services to the client in a timely manner

# I SUBMITTED A REFERRAL, NOW WHAT?

### GENERAL CARE MANAGEMENT

- Referral is reviewed by a member of a team
  - Is all information filled out?
  - Consent attached?
  - Can diagnosis be verified in Psyckes, or was diagnosis verification uploaded?
  - Does the client have Medicaid?
- Once reviewed and determined it is appropriate, referral will be assigned to a Care Management providing agency
  - The assigned agency will then be in touch with you or the referred individual to schedule intake and move forward

# NON-MEDICAID GENERAL CARE MANAGEMENT

- We have non-Medicaid slots available, so regardless of insurance anyone eligible can be assigned a care manager
- However, slots are limited, and your referral may end up on a waitlist

## ASSERTIVE COMMUNITY TREATMENT (ACT)

- ACT spots are very limited and highly requested
- We are always on a waitlist
- If we can not assign to ACT right away, we will reach out to the referral source with other alternatives
  - Other community team options
  - General care management
  - Clinic information
- Waitlist is assigned when there are openings, based on risk score and need. We will reach back out when there is a possibility to assign
- When the referral is assigned, it will be up to the individual ACT team to accept or deny after completing a screening. Assignment does not equal enrollment.

## ASSISTED OUTPATIENT TREATMENT (AOT)

- A member of our team will request hospital records based on information in the referral. It is important to be accurate and thorough so we know where to get them from!
  - It can take some time (up to a month or more) to get records
- Once records are received, we will investigate if the referral meets AOT criteria.
- If the individual meets criteria for AOT:
  - We will determine a treatment plan with your assistance. AOT individuals can be care management + clinic, or ACT (depending on history and need)
  - We will work to schedule an AOT evaluation which requires a physician willing to complete the evaluation, sign off on paperwork, and attend a court hearing.
- If the individual does not meet criteria for AOT:
  - We will reach out to see if assignment to general care management is needed

## FAQ

- Why was my referral rejected or marked incomplete?
  - We will usually provide a reason to the referral source. Likely it was because there wasn't a consent, the consent wasn't filled out appropriately, there isn't an SMI, or because the individual is already linked with services
  - When a referral is "marked incomplete" it goes into a separate category in the SPOA admin view. We won't see it until information needed is provided (a consent is attached)
- Will I hear anything after I submit a referral?
  - That depends. We will reach out if we need more information. Often we will just assign without reaching out personally, but you should get an email updating to the assignment.
- How long will my referral be on a waitlist?
  - There is no set time for someone to be on the waitlist for non-Medicaid or Act services. It depends on need and availability of services. Reach out if there are changes in the person's status or you have questions

## FAQ

- Can I request a specific agency to be assigned for CM or ACT?
  - You can, and we will try to accommodate, but we assign based on availability of slots
- What if I am having issues with the SPOA site?
  - Hit "contact support" on the top of the referral under "more", or reach out to someone in the SPOA office via email or phone
- Why can't someone with a personality disorder, or anxiety, or depression get services?
  - Unfortunately services though SPOA have to be limited to those with an SMI (Schizophrenia, Schizoaffective disorder, Bi-polar disorder, MDD, PTSD). However, we want to help however we can and ask that you reach out if this is the case so we can explore other options and referrals available in the community

### **SPOA AGENCIES**

### **ACT**

- Best Self Behavioral Health (including AOT)
- · Spectrum Human Services (Including AOT)
- Buffalo Psychiatric Center (Including AOT)

### **Care Management**

- BFNC (including AOT)
- Best Self Behavioral Health (Including AOT)
- Buffalo Psychiatric Center (Including AOT)
- Spectrum Human Services (Including AOT)
- Evergreen
- CINQ-NY
- Harmonia
- Hillside
- Horizon
- Monroe Plan
- TSI
- Venture Forth
- Community Services for Every1

### **SPOA CONTACTS**

- care@eriespoa.org
- SPOA Coordinator:
  - Nicole Jordan
  - Nicole.Jordan@erie.gov
  - **•** 716-858-7059
- Assistant SPOA Coordinator:
  - Andrea Tobias
  - Andrea.tobias2@erie.gov
  - **•** 716-858-7357
- Assistant SPOA Coordinator:
  - Ellen Mills
  - Ellen.mills@erie.gov
  - **•** 716-858-2893

- SPOA Housing
- https://www3.erie.gov/mentalhealth/ erie-county-training-collaborative
- Go to past trainings and locate SPOA housing training from 7/26/2022
- Christine.Slocum@erie.gov
- Joshua.curry-bascome@erie.gov