

Eagleville Hospital

Community Health Needs Assessment and Implementation Plan (FY 2020-2022)

Introduction

Eagleville Hospital is a 305 bed, not-for-profit, behavioral healthcare facility specializing in comprehensive inpatient treatment for persons with substance use disorders and mental disorders. The facility is a regional healthcare provider serving its home base of Montgomery County, neighboring Philadelphia, and the larger Southeastern Pennsylvania (SEPA) region. Each year Eagleville Hospital serves over 4,500 patients. Two-thirds of the patient population suffers from opiate use disorder. Approximately 95 percent of our patient population is uninsured, underinsured, and publicly funded through county assistance, Medical Assistance, and Medicare. As an organization, we are committed to providing treatment to individuals of limited means and to supporting the health and well-being of persons seeking long term recovery.

OUR MISSION

Eagleville Hospital is a specialty health care facility dedicated to supporting the recovery of those who suffer from substance abuse, mental illness, and co-occurring disorders, including patients who are traditionally underserved.

This is accomplished with welcoming access to a continuum of care provided by competent professionals, trained in evidence-based best practices. Services are provided in multiple settings, including an acute psychiatric co-occurring unit, a specialized acute unit for older adults, physician-directed medical detoxification services with 24 hour nursing coverage; and, short and moderate stay residential care programs, many equipped to treat patients with both addiction and mental illness, or co-occurring disorders.

OUR CHARITY CARE POLICY

Eagleville Hospital takes seriously its commitment to treat all patients in need of care, regardless of their ability to pay. Financial counselors assist patients in accessing Medicaid, Medicare and local county funding. If these efforts are not successful, charity care is extended to the patient to cover the full or partial expense of inpatient treatment and related charges. The Hospital's charity care application and related policy and procedures are posted on the facility's web site at www.Eagleville.org.

COMMUNITY HEALTH NEEDS ASSESSMENT - DATA COLLECTION

For the FY 2020-2022 Community Health Needs Assessment and Implementation Plan, Eagleville Hospital relied upon behavioral health data collected by the 2017 National Survey on Drug Use and Health, and the Strategic Plan recently released by the Substance Abuse and Mental Health Administration for the four year period FY 2019 to FY 2023. Additionally, to ensure that our assessment and plan remain sensitive to the needs of our local community, we revisited the planning documents earlier prepared by Montgomery County, Pennsylvania officials. These include a position paper by the County Commissioners for Human Services Block Grant Funding and the Montgomery County Mental Health Plan for FY 2013 -2017. The update to this five year plan is currently in development. Where we look forward to this update as a source document for future community health planning, we remain committed to working closely with community leaders, in the present, to enhance and expand opportunities for reducing the impact of addiction and improving the overall mental health of our community. Specific to the opioid epidemic, priority needs identified by the 2018 Montgomery County "Overdose Task Force" are included in this report; as is the recent work of the County's Co-occurring Disorder Collaborative to advance substance use disorder treatment.

SUMMARY OF FINDINGS - PRIORITY COMMUNITY NEEDS

2017 National Survey on Drug Use and Health

Unprecedented funding, technical assistance, and regulatory waivers are being lodged against the country's opioid epidemic – beginning with the 21st Century Cures Act – and federal assistance to states to advance the behavioral health of the nation. Based on results from the 2017 National Survey on Drug Use and Health, the Substance Abuse and Mental Health Services Administration (SAMHSA) reports that 28.6 million people aged 12 or older used an illicit drug in the past 30 days, corresponding to about one in ten Americans overall and one in four young adults aged 18-25. Illicit drug use is driven primarily by marijuana use and the misuse of prescription pain relievers.

An estimated 11.1 million Americans reported misuse of prescription opioids, nearly 900,000 reporting use of heroin. Approximately 2.1 million in one year were diagnosed with an opiate use disorder. More than 42,000 died from an opioid overdose in 2016, about 130 people each day. That number continues to grow with the proliferation of highly potent synthetic opioids such as fentanyl, and amidst rising rates of hospital emergency department visits and the birth of more infants with neonatal abstinence syndrome. The highest death rates were reported in Pennsylvania, West Virginia, Ohio, Kentucky, and the District of Columbia.

Additional findings from the same 2017 National Survey point to more troubling public health data on mental health. In 2017, nearly one in five adults in the United States - 44.7 million people - suffered from a mental illness in the past year. These individuals often have multiple emotional disorders, including co-occurring substance use disorders, and

are at substantial risk for homelessness, criminal justice involvement, and suicide. Further federal study noted the disappointing finding that these same individuals were not receiving comprehensive, integrated care to address multiple treatment needs and the social determinants of health impeding their recovery. Funding from the 21st Century Cures Act also sets forth mental health directives, including the establishment of a federal advisory council to ensure adoption of more evidence-based treatment practices for "cooccurring disorders".

As a result of the 2017 National Survey, the SAMHSA Strategic Plan for FY 2019-2023 set forth a roadmap to address five over-arching priority areas:

- Priority 1: Combating the Opioid Crisis through the expansion of prevention, treatment and recovery support services;
- Priority 2: Addressing serious mental illness (SMI) and serious emotional disturbances;
- Priority 3: Advancing Prevention, Treatment, and Recovery Support for Substance Use (including alcohol and other drug use);
- Priority 4: Improving Data Collection, Analysis, Dissemination, and Program Evaluation; and,
- Priority 5: Strengthening Health Practitioner Training and Education.

Local Community Assessment of Behavioral Health Needs

Where the Commonwealth of Pennsylvania and four other states lead the nation in drug overdose deaths, Eagleville Hospital's home base of Montgomery County ranks seventh in the nation for prescription overdoses and heroin deaths. In 2016-17, County officials and Human Service Administrators called to action a multi-disciplinary "Overdose Task Force" to study its impact and determine the most effective means to educate the public; provide outreach; improve access to treatment; dispense naloxone to reverse overdose; and engage hospitals, behavioral health providers, and law enforcement in intervention strategies to combat the epidemic. Among many community needs, two priorities were identified that fell within the scope and responsibilities of 24-hour detoxification and residential care providers, including Eagleville Hospital. These involved initiatives to:

- 1) Establish referral protocols to improve immediate access to treatment for the overdose survivor presenting in hospital emergency rooms (Priority 6); and,
- 2) Utilize professionally trained engagement specialists or certified recovery peer support individuals to assist clients and family members in crisis (Priority 7).

Additionally, as a follow-up to the County's 2013-17 Mental Health Plan, a priority need pertaining to advancing co-occurring treatment in residential treatment settings was identified and remains today a major focus. That priority statement is:

3) Establish standards for evidence-based treatment programs for the client with co-occurring substance use and mental health disorders. (Priority 8)

In 2018-19, the County partnered with Magellan Behavioral Health, as the public-pay insurer, to address this priority by examining the depth of programs and clinical practices of existing network providers. This engagement, known as the Co-Occurring Disorder (COD) Collaborative, involved the payer, representatives from the Office of Behavioral Health and Drug and Alcohol, as well as twelve area substance use treatment providers declared "co-occurring capable", including Eagleville Hospital. The outcome of this study calls for continued professional education on integrated co-occurring treatment and a specific request of Eagleville Hospital to share guidance on clinical assessments and effective interventions, with the potential to contribute to the development of best practice standards. These efforts are on-going and will continue as part of Eagleville Hospital's FY 2020-2022 Implementation Plan.

IMPLEMENTATION STRATEGIES (FY 2020-2022)

1. Combat the opioid crisis through the expansion of treatment and recovery support services.

Rationale: Consumer-friendly access to care coupled with peer support and reduced financial barriers will improve access to treatment. Increased evening and weekend hours for Intake and Assessment will further motivate individuals and family members to seek treatment. For substance use disorder (SUD) patients presenting to area emergency departments, continued engagement through a warm-hand off process area will result in more immediate referral for formal treatment. (Priorities 1, 6 & 7).

Objectives:

- a. Continue to ensure that the neediest are served and supported by offering access to financial counseling for medical assistance applications.
- b. Define the requirements for a new Intake and Assessment function approved for Montgomery County residents seeking evening and weekend access to evaluation and treatment.
- c. Continue to designate an engagement specialist or a supervised peer support specialist to conduct assessments of patients presenting in crisis at area emergency departments.
- d. Consider methods to engage more patients in recovery-oriented, peer support activities upon admission and through different points along the continuum of care through association with PRO-ACT, or through direct hire of newly credentialed Certified Recovery Specialists (CRS).

2. Address Serious Mental Illness in concert with Substance Use Disorder treatment as a best practice.

Rationale: More substance use disorder patients are presenting with serious emotional disorders requiring advancements in the intensity and scope of care. Treatment outcome is improved when the assessment and treatment of Mental Illness/Emotional Disorders and Opiate Use Disorder or other Substance Use Disorders occur simultaneously and by professionals trained in co-occurring principles. Educational resources and technical assistance will be beneficial to the system of care. (Priorities 2, 4 & 8).

Objectives

- e. Explore use of SAMHSA's new Clinical Support System for Serious Mental Illness as a source for internal education and clinical supervision.
- f. Continue to conduct the state-mandated, thirty-hour educational program on Co-occurring Core Competency for Eagleville Hospital staff and the external professional community.
- g. Advance the use of evidence-based practices by assisting the County's COD Collaborative in program evaluation, standard development, and through technical assistance provided by Magellan Behavioral Health.

Strengthening Health Practitioner Training and Education

Rationale: The shortage of professionals and para-professionals entering the field of behavioral health, coupled with low retention, threaten the quality of care and the expansion of resources required to meet increasing needs. Collaboration among health care providers, graduate school programs, and professional certification bodies is needed to attract and retain a more skilled workforce. (Priorities 3 & 5)

Objectives:

- h. Continue to host free or low cost professional conferences and seminars in collaboration with the Pennsylvania Certification Board (PCB), the Montgomery County Behavioral Health Administration, and the Department of Drug and Alcohol Programs.
- i. Consider offering the DATA (Drug Addiction Treatment Act) waiver coursework the training required to qualify practitioners to obtain a waiver to prescribe buprenorphine for the treatment of OUD.
- j. Provide internships for graduate students seeking degrees in social work and counseling from area colleges.
- k. Become an approved practice site for psychologists, in partnership with Widener University and other academic grantees, under the award of a federal Opioid Workforce Expansion Grant (OWEP) designed to enhance community-based experiential training.

I. Engage in discussions with PCB to potentially broaden the use of peers through recruitment of Certified Recovery Specialists who will be credentialed for the first time in the Commonwealth in 2019.

ADOPTION AND APPROVAL OF CHNA/IMPLEMENTATION PLAN

The Board of Directors of Eagleville Hospital acknowledges the priorities identified in the Community Health Needs Assessment and approves the Implementation Strategies as they are in keeping with our mission and charitable purpose.

Victor Lidz, Ph.D.

Chair, Eagleville Hospital

Approved:

 Eagleville Hospital Board of Directors September 25, 2019