



Consumer Care

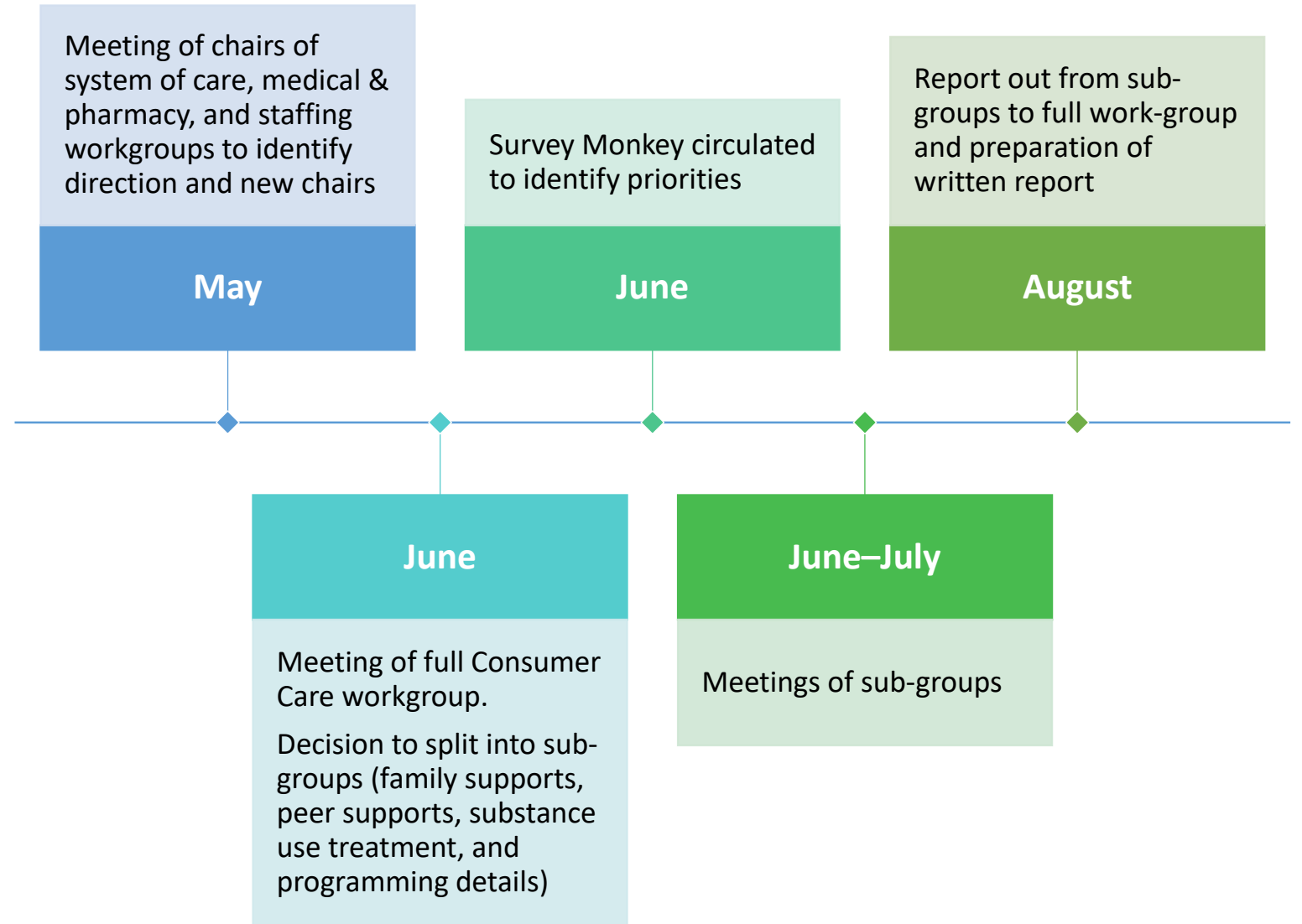
Co-Chairs: Katrina Kerns & Delaney
Smith



Charge

- Provide recommendations about services in the new crisis center

Process



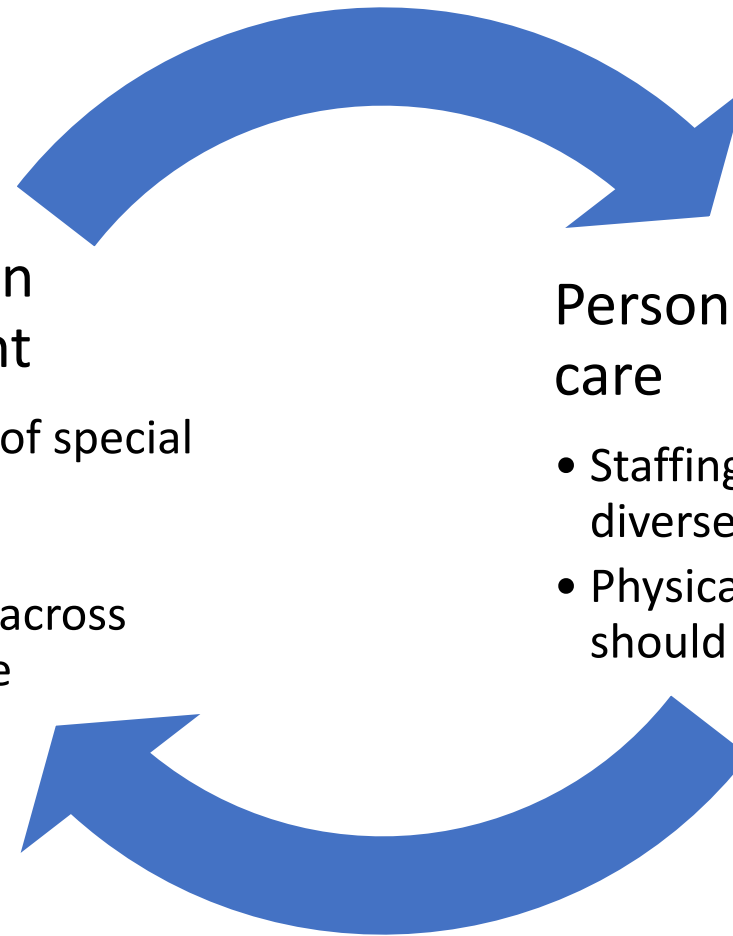
Family Support Sub-group

Emphasis on engagement

- Recognition of special populations
- Hand-off of information across levels of care

Person-centered care

- Staffing to reflect the diverse community
- Physical environment should be adaptable

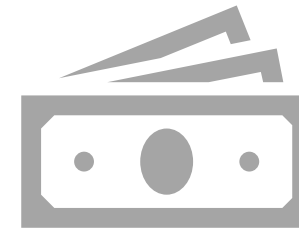


Peer Support Sub-group



Integration into all aspects of treatment

Peer is first to meet guest and acts as a guide
Peers should be part of each stage of treatment



Address barriers to peer work-force

Challenging certification process
Medicaid reimbursement issues
Competitive pay and benefit packages
Supervisor designation challenges
Legal history

Substance Use Treatment Sub-group



Scope of detoxification services

Ability to manage most presentations of intoxication or withdrawal with supportive medications and safe environment



Medication Substance Use Disorders

Provide small bridge amounts of medication
Ability to schedule same or next day appointments

Programming Details Sub-group



- Crisis Hotline (pre-crisis center)
 - Work closely with mobile and new crisis center, but not needed to be co-located or operated by same vendor
 - Need single hub for crisis response
 - Access to real time appointment scheduling

Programming Details Sub-group

- Mobile Response Team (pre-crisis center)
 - Strong collaboration with crisis hotline and new crisis center, but not needed to be co-located or operated by same vendor
 - Consider movement toward clinician driven teams
 - Social workers, peers, nurses
 - Ability to schedule timely follow up appointments

Programming Details Sub-group



Intake/Assessment/Triage

Brief lobby assessment to determine needed level of care

Screen for communicable diseases



Walk-in/Bridge Clinic

Emphasis on engagement with community mental health providers

On-site providers and telehealth available

Bridge guests who need follow-up after stays in 23-hour or 24+ hour units until can see their provider

Programming Details Sub- group

- 23-hour Observation Unit
 - Hybrid living room/recliner model
 - Space can be split for milieu needs
 - Separate interview rooms
 - Individual rooms for high need guests (psychosis, intoxication/withdrawal, and medical conditions)



Programming Details Sub- group

- 24+ hour unit(s):
 - Consider splitting 16 beds into 2 units
 - Crisis Stabilization
 - Franklin Count now only has 10 CSU beds
 - Unique level of care that emphasizes guest engagement and skill building
 - Inpatient beds



Programming Details Sub-group



Medical Support Services

24/7 on-site provider of urgent-care level of services



Pharmacy Services

Full pharmacy support for 23-hour and 24+ hour units

Ability to provide small take-home supply