

State Hospitals Discharge Initiatives for Older Adults

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Objectives:

- Objective 1: Define who is being admitted to state facilities
- Objective 2: Identify potential barriers to discharge planning
- Objective 3: Partner with community providers to address the needs of those older adults committed to the Department
- Objective 4: Identify deficits in the Community
- Objective 5: Create systems that support older adults returning to the community that meet their clinical needs, public safety and satisfy the court.
- Objective 6: Managing forensically involved individuals in the community.



1 in 5

**ADULTS ARE CURRENTLY
SUFFERING FROM A
MENTAL ILLNESS**

SPIESFITTOFIGHT.COM

Centralized Admissions into State Hospitals

Mission: to process all court orders that commit patients to MDH for evaluation or treatment services for substance use disorders (8 505/ 8 507), mental health issues, or intellectual disabilities.

The Centralized Admissions Office will serve as the single point of contact for submitting all court orders to MDH and making inquiries on such orders.

Contact Information

Centralized Admissions Office Main Number: 410-402-8422

E-mail: mdh.admissions@maryland.gov

Fax: 443-681-1035



Centralized Admissions Manages Referrals from:

Conditional
Release

Court Ordered
Evaluations

8 505/ 8 507

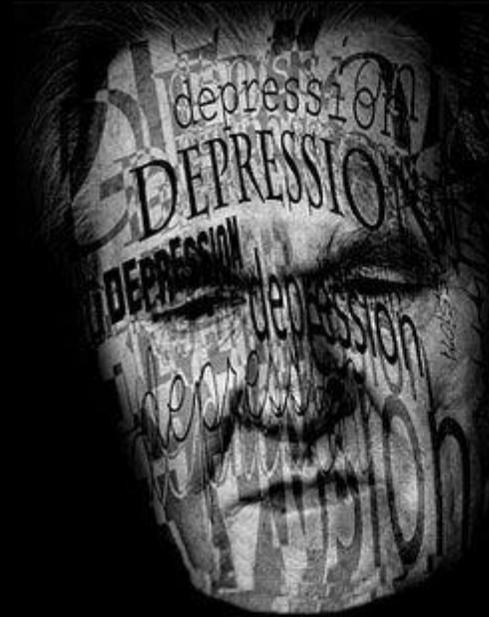
Jail
Certificates

Community
Referrals

Common Diagnoses

- Psychosis
- Schizophrenia
- Bipolar Disorder
- Major Depression
- Major Depression with Psychotic Features
- Schizoaffective Disorder
- Neurocognitive Disorder
- Intellectual Disabilities
- Substance Use Disorder
- Dementia

Depression in the Elderly



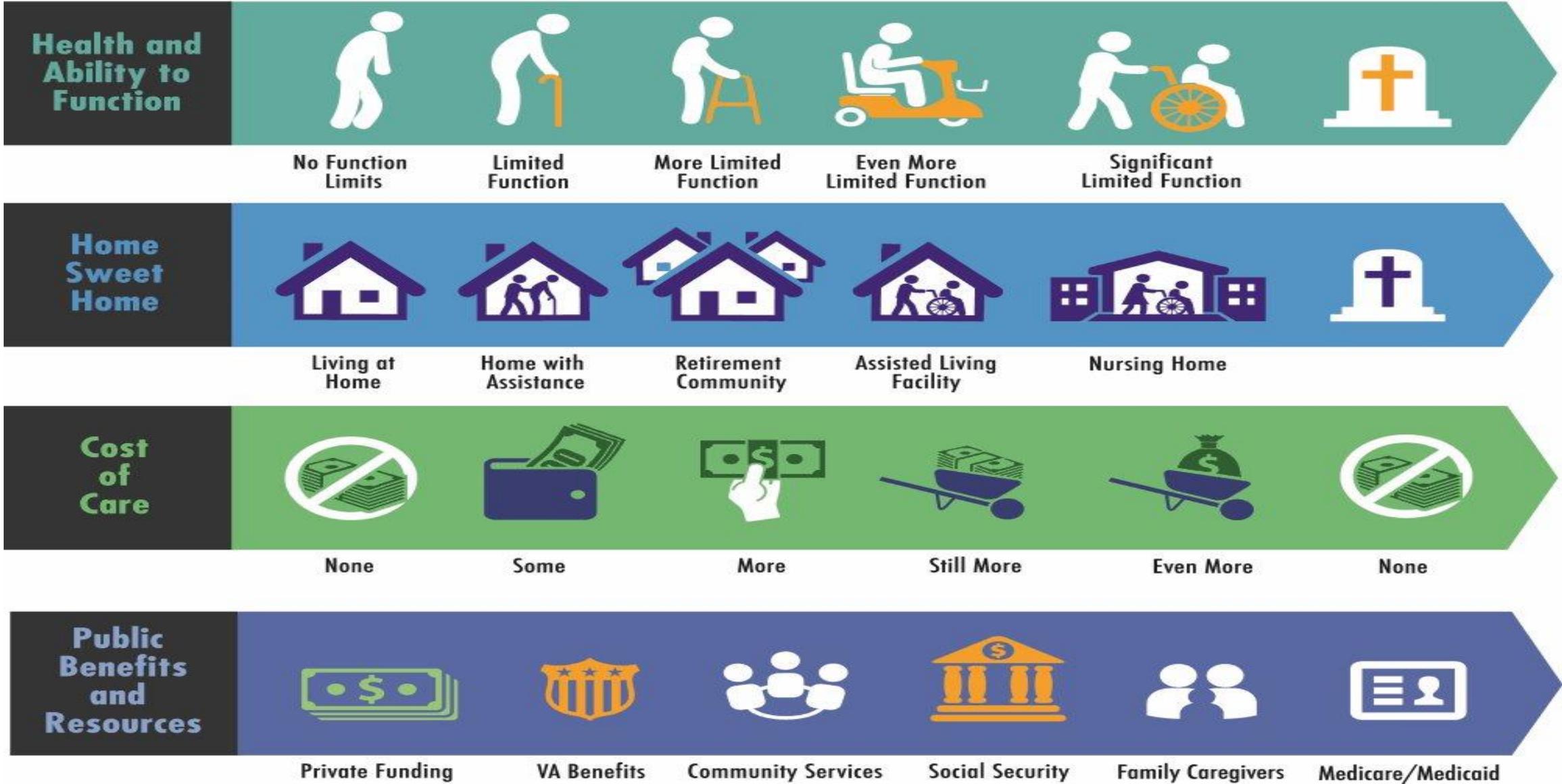
Major Signs,
Symptoms,
and Causes
of
Elderly
Depression


aha-now.com

HOSPITAL	CENSUS	PATIENTS 64 & OLDER	% OF HOSPITAL CAPACITY	AVERAGE AGE FOR THOSE 64 AND OLDER	LENGTH OF STAY	YEARS
CLIFTON T PERKINS HOSPITAL CENTER	289	16	18.0625 %	67.31	1,650.43	4.512
EASTERN SHORE HOSPITAL CENTER	80	11	6.666%	67.72	2,087.09	5.18
SPRING GROVE HOSPITAL CENTER	353	54	6.537%	69.2037	2207.96	6.049
SPRINGFIELD HOSPITAL CENTER	220	18	12.22%	69.94	3052.23	8.362
THOMAS B FINAN CENTER	66	9	7.333%	68.33	1343.333	3.68

POTENTIAL BARRIERS TO DISCHARGE PLANNING

- Legal Charges and HUD housing
- Individuals often have behavioral health issues and somatic issues.
- Housing
- Meaningful day time activity
- Support
- Funding for enhancements to current houses like ramps.
- Nursing homes with behavioral health components.
- Funding for assisted living.
- PROJECT HOME



Discharge Planning for Elder Adults with SMI

Residential Rehabilitation Programs

Priority Population
Diagnosis

Rehabilitative Goals

Can pair it with
supportive
employment

Will not accept individuals who
can not self administer their own
medication such as insulin.

40 hours of supervision per
week, can step down to
general level and supportive
housing .

Assisted Living

Waivers

Need more providers willing to
accept waivers, willing to work
with behavioral health
population and forensic
population.

Can pair it with adult day
medical or psychosocial
rehabilitation

Some homes have 24 / 7
supervision and can assist with
individual getting to their
medical appointments

Assertive Community Treatment with Housing

Can utilize this for
individuals who are in
their own homes or
living with family.

Provide support to
individuals via
phone as needed.

Nursing Homes

Must meet medical
necessity criteria.

Difficult to place
individuals with behavioral
health issues.

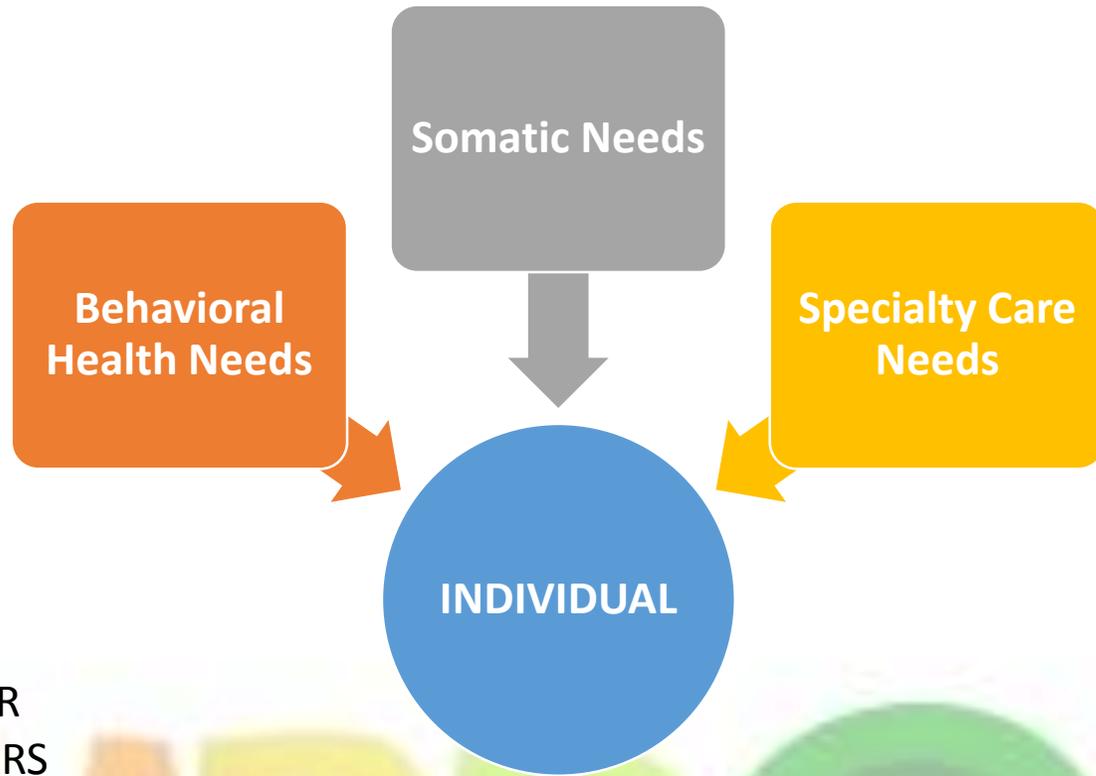
Nursing homes are
expressing concerns about
the psychotropic medications
being prescribed to treat the
symptoms to of the mental
illness.

Dementia Care Programs

Lack of available funding
for locked dementia units
for individuals with
behavioral health issues.

Individuals with
dementia need
memory care and
being treated on
inpatient psychiatric
units can be difficult
for them.





1st CONTACT WITH LEGAL SYSTEM

Hospital	2017	2018
CLIFTON T PERKINS HOSPITAL	4	1
EASTERN SHORE HOSPITAL CENTER	1	2
SPRING GROVE HOSPITAL CENTER	5	2
SPRING FIELD HOSPITAL CENTER	1	5
THOMAS B FINAN CENTER	2	2

FORENSIC POPULATION

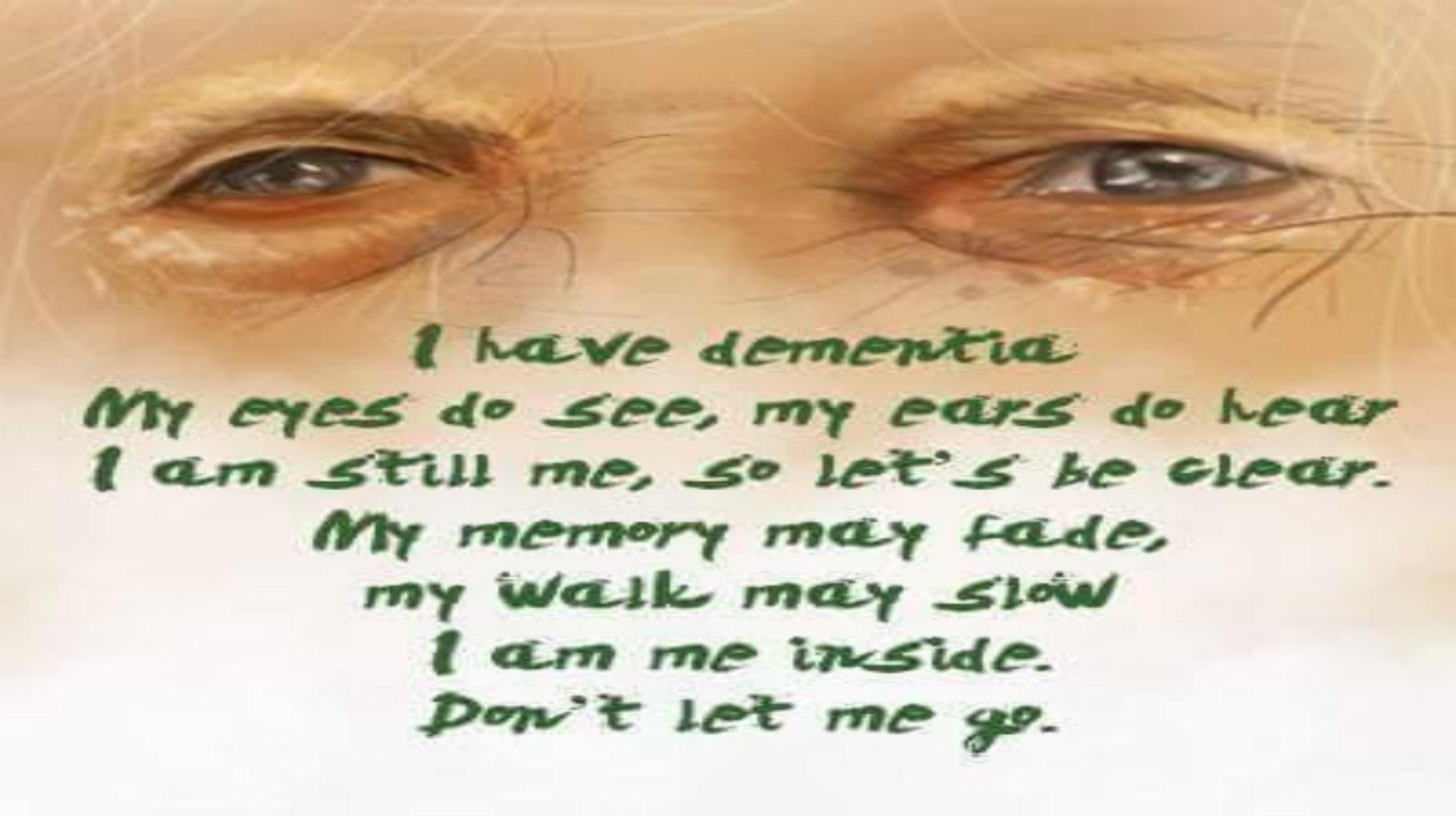
- CHARGES RANGE FROM TRESPASSING TO MURDER
- MOST COMMON CHARGE IN STATE HOSPITALS IS SECOND DEGREE ASSAULT
- HAVING LEGAL CHARGES MAKES DISCHARGE PLANNING MORE PROBLEMATIC
- DISCHARGE PLAN MUST MITIGATE RISK OF PERSON REOFFENDING IN THE COMMUNITY
- PLAN MUST ADDRESS PUBLIC SAFETY CONCERNS



CAREGIVER TIP #105

"Be kind to yourself and don't take on the guilt. Just do your best.. but remember you can't do it all."

- Christine H.

A close-up photograph of a person's eyes, looking slightly to the right. The eyes are light-colored and framed by dark eyeliner. The skin around the eyes is fair. The text is overlaid on the lower half of the image.

I have dementia

My eyes do see, my ears do hear
I am still me, so let's be clear.

My memory may fade,
my walk may slow
I am me inside.
Don't let me go.

Thank

You

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