HS BH NY First Episode Psychosis

1. Untitled Scene

1.1 Welcome
1.2 Objectives

Course Objectives

When you have completed this course you will be able to:

- Define both psychosis and first episode psychosis (FEP)
- Identify the incidents of FEP in both New York and across the United States
- Describe the gaps in care for treating members with FEP, and the ramifications if not identified in a timely fashion
- Identify the goals, staffing and early 2014-2015 statistical outcomes for the New York Program (NYC Start)
- Access community resources for assisting members showing signs of FEP

1.3 Terms and Definitions

Acronyms you may find in this course:

- FEP: First Episode Psychosis
- DUP: Duration of untreated psychosis
- EIS: Early intervention services
- CSC: Coordinated specialty care
1.4 What is psychosis?

What is psychosis?

It is a term used to describe a state of mind in which a person experiences a distortion or loss of contact with reality.

1.5 What are the impacts?

What are the impacts?

Psychosis impacts thoughts, feelings and behaviors. Symptoms may include hallucinations, delusions, confused or disorganized thoughts or behaviors.

(1) Barbato, A. WHO/MSA/NAM/97.6
(2) New York State Office of Mental Health
1.6 FEP Statistics

Some facts on psychotic illness

About 100,000 adolescents and young adults in the US experience First Episode Psychosis each year, as calculated by NIMH based on research by McGrath, Saha, Chant, et al., 2008.
1.8 New York Data

Psychotic illness in New York

An estimated 60,000 New Yorkers have psychotic illnesses (1)

2,000 new cases of psychotic illness develop annually in NYC (2,3)

1) NYC DOHMH Patient Characteristics Sunny 2011

1.9 Care Rates for FEP

What are the rates of care?

Only 40%-50% of individuals with psychotic illnesses receive ongoing psychiatric care (4,5)

Without follow-up treatment, over 25% of individuals with first-episode psychosis will be re-hospitalized within one year.

4) NYC DOHMH Medicaid analysis
1.10 Untreated Psychosis

The average duration of untreated psychosis is between 1 - 3 years.

Studies show that shorter duration of untreated psychosis associated with better treatment response and outcomes.


1.11 Coordinated Specialty Care

In a 2014 report entitled, “Evidence-Based Treatments for First Episode Psychosis: Components of Coordinated Specialty Care,” the National Institute of Mental Health (NIMH) specified the components of early-intervention services, calling them “Coordinated Specialty Care” (CSC) for individuals with early psychosis.
1.12 NYC Program Goals

Program Goals and Staffing

1.13 Early implementation

Implement a program early!

The goal is to alter the downward trajectory of New Yorkers with first episodes of psychotic illness.
1.14 Program Model

Services are across all parts of the city. An interdisciplinary team is utilized, including social workers and peer specialists.

A Critical Time Intervention (CTI) case management approach is taken, modified for the first episode psychosis population.

1.15 When are services offered?

Services are offered during hospitalization, and continue for 3 months after discharge to support linkage to out-patient services and community supports.

Engagement occurs simultaneously with the family support system.
1.16 Staffing Readiness

Staffing Readiness and Information

- WellCare will ensure that staff is educated about what FEP is, how to identify individuals experiencing FEP, and what treatment is needed.

- Our network has programs meeting FEP guidelines and training is offered to providers on FEP.

- WellCare will include monitoring of FEP in its quality monitoring program.

- A website will make information on FEP available to members, family members, and providers.

1.17 Provider Training

Provider Training

WellCare is expected to develop and implement a comprehensive provider training and support program for network providers to gain appropriate knowledge, skills, and expertise and receive technical assistance to comply with the requirements under managed care.

Primary care providers and Health Homes will be offered training on identification of individuals with FEP and referral to appropriate FEP services.
1.18 Knowledge Check 1

(Matching Drop-down, 100 points, 2 attempts permitted)

Select the definition that matches the term.

<table>
<thead>
<tr>
<th>Correct</th>
<th>Choice</th>
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<tbody>
<tr>
<td>First Episode Psychosis</td>
<td>A term used to describe a state of mind in which a person experiences a distortion or loss of contact with reality</td>
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<tr>
<td>40-50%</td>
<td>Young adults suffering from psychotic illnesses who receive ongoing psychological treatments.</td>
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<tr>
<td>25%</td>
<td>The number of individuals who can expect to be re-hospitalized within one year without ongoing follow up care.</td>
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Feedback when correct:
That's right! You selected the correct response.

Feedback when incorrect:
You did not select the correct response.

1.19 Knowledge Check 2

(Multiple Choice, 100 points, 2 attempts permitted)

How many adolescents and young adults in the US experience First Episode Psychosis each year?

- 5,000
- 50,000
- 100,000
- 500,000

Feedback when correct:

That's right! You selected the correct response.
1.20 Knowledge Check 3

(Multiple Choice, 100 points, 2 attempts permitted)

How long after discharge are services offered in order to give adequate time to link members to community services?

- 3 days
- 3 weeks
- X 3 months
- Unlimited

Feedback when correct:
That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.

1.21 Reporting
1.22 Reporting First Episodes

Criteria for Reporting:
Individuals over 18 and under 30 years of age admitted to a hospital with a psychosis diagnoses and with no known prior hospitalizations for psychosis as an adult.

1.23 Reportable Diagnoses

Reportable Diagnoses

(A) Schizophrenia (any type)
(B) Psychosis NOS
(C) Schizophreniform Disorder
(D) Delusional Disorder
(E) Schizoaffective Disorder
(F) Brief Psychotic Disorder
(G) Shared Psychotic Disorder
(H) Other Specified Schizophrenia Spectrum and Other Psychotic Disorder
(I) Unspecified Schizophrenia Spectrum and Other Psychotic Disorder
1.24 2015 Hospital Reports

The following slides show a series of charts and graphs on the number of reports of FEP received through April of 2015.

Note that the report does not distinguish reports stemming from episodes of substance abuse induced psychosis.

1.25 Initial Hospital Reporting

Initial Hospital Reporting

First Episode Psychosis Hospital Reports
Monthly to April 2015

[Chart showing the number of reports received monthly from June 2014 to April 2015]
1.26 Cumulative Hospital Reports

### Diagnosis - All Hospital Reports
Cumulative to April 2015

- Schizophrenia (Any Type): 14%
- Psychotic Disorder NOS: 70%
- All Other Diagnosis: 16%

### Age - All Hospital Reports
Cumulative to April 2015

- 18-24: 72%
- 25-30: 28%

### Insurance - All Hospital Reports
Cumulative to April 2015

- Medicaid: 43%
- Private Insurance: 30%
- Uninsured: 12%
- Unknown: 15%

1.27 Hospital Report Dispositions

### Hospital Report Disposition
Cumulative to April 2015

- Pending: 1%
- Ineligible: 21%
- Refused services: 21%
- Accepted services: 57%

### Hospital Report Disposition Among eligible individuals

- Refused services: 27%
- Accepted services: 73%

Percent of NYC START Participants Attending an Outpatient MH Appointment Within 30 Days of Hospital Discharge

Target: 79.7%

- Qtr 1 (Jan-Mar): 69.7%
- Qtr 2 (Apr-Jun):
- Qtr 3 (Jul-Sep):
- Qtr 4 (Oct-Dec):
What is the age range that a member with a FEP must be reported?

- Over 18
- 18-30
- 21-30
- 18-25

**Feedback when correct:**
That's right! You selected the correct response.

**Feedback when incorrect:**
You did not select the correct response.
1.29 Knowledge Check 5

(Multiple Choice, 100 points, 2 attempts permitted)

If a member has had a prior episode, can their current one be reported as FEP under some circumstances?

- Yes
- No
- The answer varies based on other factors

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<td>Yes</td>
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<tr>
<td>X</td>
<td>No</td>
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<td>The answer varies based on other factors</td>
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Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.
1.30 Knowledge Check 6

(Multiple Choice, 100 points, 2 attempts permitted)

Has the number of FEP cases reported by hospitals from 2014 to 2015 shown a general increase, or a decrease?

- Decrease
- Increase
- Too close to call

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<td>Decrease</td>
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<tr>
<td>X</td>
<td>Increase</td>
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<td>Too close to call</td>
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Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.
1.31 Knowledge Check 7

(Multiple Choice, 100 points, 2 attempts permitted)

As of first quarter 2015, how close is the NYC START program to hitting their target for getting members into an outpatient appointment within 30 days of discharge?

- 10% below the target
- 2% below the target
- On target!

Feedback when correct:
That's right! You selected the correct response.

Feedback when incorrect:
You did not select the correct response.
1.32 Services and Resources
1.33 On Track NY

The program is organized within a collaborative team that provides multi-element and multi-disciplinary services to a defined set of clients. A Team Leader has overall responsibility for the program. The philosophy is recovery-oriented and uses shared decision making. Program staff makes outreach visits into the community when necessary for engagement and identification of new clients as well as for the treatment of current clients. Each client has a primary clinician on the team.

Services offered to all clients include case management for social and community needs, supported employment and education, FEP-relevant psychotherapy and support, pharmacotherapy and primary care coordination, and family support and education.

Additional information:
http://practiceinnovations.org/CPIInitiatives/OnTrackNY.aspx

1.34 On Track NY

Currently there are five OnTrackNY sites:

- **Manhattan**: Washington Heights Community Service
- **Queens**: North Shore / Long Island Jewish
- **Brooklyn**: Kings County Hospital Center
- **Yonkers / Westchester County**: Mental Health Association Westchester
- **Catholic Charities of Broome County**
1.35 2015 Implementation

July 2015 Implementation Plan

- Jewish Board of Family and Children Services (Manhattan)
- Bellevue Hospital Center (Manhattan)
- Parsons Northern Rivers (Rensselaer County)
- Suffolk County Farmingville Clinic (Suffolk County)
- Lakeshore Behavioral Health (Erie County)
- Hutchings Psychiatric Center (Onondaga County)
- Elmira Psychiatric Center (Chemung County)
- Chautauqua Tapestry (Chautauqua County)

1.36 LIJ Early Treatment Program

LIJ Early Treatment Program

Zucker Hillside Hospital and Lenox Hill Hospital

The early treatment program (ETP) provides targeted, state-of-the-art care for adolescents and young adults in the early phases of schizophrenia and bipolar disorder.

The ETP is modeled after the National Institute of Mental Health’s early psychosis initiative.
1.37 Parachute NY

Parachute NYC

A new model of care for people in emotional crisis

- Manhattan, Queens, and the Bronx 18 - 65 experiencing a psychosis-related crisis
- Respite Centers (Mobile Treatment Teams in home services with Needs Adapted Mobile Team)
- Support Line Peer run “warm line” for anyone in emotional distress 646-741-HOPE (4673)
- For additional information or referrals 1-800-LIFENET (543-3638)

1.38 The Data Book

The Data Book

As of January 2015, the Office of Mental Health County Capacity and Utilization Data Book (2013-2014) is available on the OMH website:

1.39 The Data Book

The Data Book describes inpatient and community-based psychiatric service utilization and capacity statistics at the statewide and county levels.

Inpatient and outpatient service capacity and utilization are displayed for the adult (18 and older) and child (under 18) populations where appropriate.

Other measures reported include psychiatric residential, licensed outpatient, emergency, and support program capacity and utilization by county and program type.

1.40 Knowledge Check 8

(Multiple Choice, 100 points, 2 attempts permitted)
How many OnTrackNY community resource sites are there available in early 2015?

- 5
- 10
- 15
- 50

**Feedback when correct:**

That's right! You selected the correct response.

**Feedback when incorrect:**

You did not select the correct response.
1.41 Knowledge Check 9

(Multiple Choice, 100 points, 2 attempts permitted)

What is the key to successfully treating members suffering from FEP?

- Early program participation
- Successful follow up outpatient care
- Successful links to community resources
- All of the above

Correct Choice

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<tr>
<td></td>
<td>Early program participation</td>
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<td>Successful follow up outpatient care</td>
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<td>Successful links to community resources</td>
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<tr>
<td>X</td>
<td>All of the above</td>
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Feedback when correct:

That's right! You selected the correct response.

Feedback when incorrect:

You did not select the correct response.
1.42 Summary

**Summary**

You should now be able to:

- Define both psychosis and first episode psychosis (FEP)
- Identify the incidents of FEP in both New York and across the United States
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1.43 Thank You

Thank You

You may now exit this course.