Section: **Clinical Practices**	Procedure Name: **Community Outreach**	Procedure **P12.02.02**
Overarching Policy: **12.02 Integrated Healthcare**		
Owner: **Director of Quality Management and Clinical Outcomes**	Reviewed By: **Alena Lacey, MA, LPC and** **Jeannette Bayyapuneedi, MA, LPC, CAADC**	Total Pages: **4**
Required By: ☐ **BBA** ☐ **MDHHS** ☐ **NCQA** ☐ **Other (please specify):** _____	Final Approval By: *Alena Lacey* _Jeannette Bayyapuneedi_ Jeannette Bayyapuneedi (May 17, 2024 13:57 EDT)	Date Approved: May 17, 2024
Application: ☒ **SWMBH Staff/Ops** ☐ **Participant CMHSPs** ☐ **SUD Providers** ☐ **MH/IDD Providers** ☐ **Other (please specify):** _____	Line of Business: ☒ **Medicaid** ☒ **Other (please specify):** ☒ **Healthy Michigan** _____ ☒ **SUD Block Grant** ☒ **SUD Medicaid** ☐ **MI Health Link** ☐ **CCBHC**	Effective Date: **02/28/2018**

Policy: 12.02 Integrated Healthcare

Purpose:

The purpose of the Community Outreach Procedure is to improve outreach to, and identification of, potential members who are eligible for SWMBH care integration programs: Complex Case Management (CCM), Integrated Care Team (ICT), Level of Care, Priority Population Transition Navigation, or Veterans Affairs (VA) Navigation. These programs will organize and coordinate services for members with multiple or complex conditions helping members obtain access to resources and services by identifying and coordinating member's needs.

Scope:

The overall goal of improving member outreach for Southwest Michigan Behavioral Health (SWMBH) care integration programs is to improve upon the current CCM, ICT, Veteran, or Transition Navigation identification and enrollment methods, and to meet members where they are within the community. Community outreach will provide benefit and service education to high-risk members who may or may not be currently engaged in any mental health, substance abuse or co-occurring treatment services.

Responsibilities: Integrated Care Team (ICT), Level of Care, Priority Population Transition Navigation, or Veterans Affairs (VA) Navigation

Definitions: None

Procedure:

A. Member Vetting
1. For new/unknown member, SWMBH staff will begin with a review of records and phone screen.
2. If there is any documented history of acts of violence or angry outbursts, discuss member history internally at SWMBH and proceed as advised on an individual basis.
3. For the first visit with a member not previously known to SWMBH staff with a history of violent behaviors, consider having the first meeting at Community Mental Health (CMH), Inpatient (IP) facility or Primary Care Provider (PCP) office.

B. Selecting a Meeting Location
1. All member meetings will be schedule within a community partner agency building or in a public, semi-private/confidential location.
2. Vet each county to identify three viable meeting locations.
3. Identify potential community partners to provide a public and private location (i.e. urgent care, CMH, or other agency).
4. Offer two or three options such as a coffee shop, public library, medical agency or other vetted location.
5. For non-medical locations, avoid peak business hours and select private seating.
6. If applicable, confirm non-confidential location is acceptable to member.

C. Safety precautions for meetings in a public setting:
1. If there are known safety concerns (e.g., member with history of violence, environmental safety concerns), then two SWMBH staff will attend a member visit if it is held in a public location, with one staff as the lead for the visit and a second staff can be:
   a. Registered Nurse (RN)
   b. Social Worker
   c. Case Manager I or II
   d. VA/Transition Navigator
   e. or Peer Support staff
2. Appropriate attire will be professional, non-SWMBH logo attire, without SWMBH name badge.
3. A generic SWMBH business card can be provided to confirm staff ID, and provide SWMBH staff office phone numbers only.

D. Safety precautions for member meetings held in a community agency with or without a community partner present.
   1. One SWMBH staff may attend a member visit in the community if the visit is scheduled in partnership with a community agency staff in attendance.
   2. Confirm attendance or availability of community partner (social worker (SW), care manager (CM), RN etc.), if needed.
   3. Professional attire with SWMBH name tag as appropriate.
   4. A generic SWMBH business card can be provided to member to confirm staff ID, and provide contact phone numbers.
E. Community Partner Visits will be conducted to:
   1. Meet with staff to introduce and explain the applicable SWMBH program.
   2. Obtain primary staff contacts for questions and SWMBH Brochure distribution.
   3. Utilize staff contacts for ongoing outreach and identification of new SWMBH CCM, ICT, Transition Navigation, or Veteran members.
   4. Identify or confirm potential community partners that will include, but are not limited to:
      a. Inpatient psychiatric facilities.
      b. Emergency departments.
      c. Non-profit organizations.
F. Documentation
   1. A Smart Care event will be used to document community visit interactions and content of visit discussion
   2. Or, a CCM event will be initiated if applicable.
   3. Follow SWMBH documentation policy
   4. Begin each meeting with the identification of the member's own goals by asking "What is your vision for your own health?"
   5. Seek a signed State of Michigan Behavioral Health Consent to Share Information (Form 5515) if not already completed.

References:
   G. Privacy reference for Michigan Mental Health Code, HIPAA, PA559, 42 CFR, Part 2
   H. State of Michigan Behavioral Health Consent Form (5515)
   I. 12.11 Clinical Documentation Policy
   J. 12.19 Complex Case Management Policy
   K. 12.02 Integrated Healthcare Policy

Attachments: None

Revision History

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
Initial	04/19/2024	N/A: New Template	N/A: New Template	Alena Lacey

P12.02.02 Community Outreach

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