

# NC STAR



**Tom Savidge**

Pitt County Mental  
Health



**Ann Davis**

Walter B. Jones



**Glenn Buck**

Pitt County Mental  
Health



**Christale  
White**

Pitt County Mental  
Health



# Pitt County, North Carolina

## Population

134,977

61% White

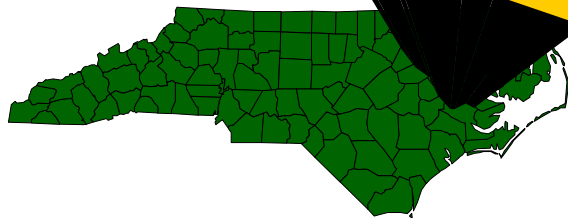
34% African-American

3.2% Hispanic

1.1% Asian

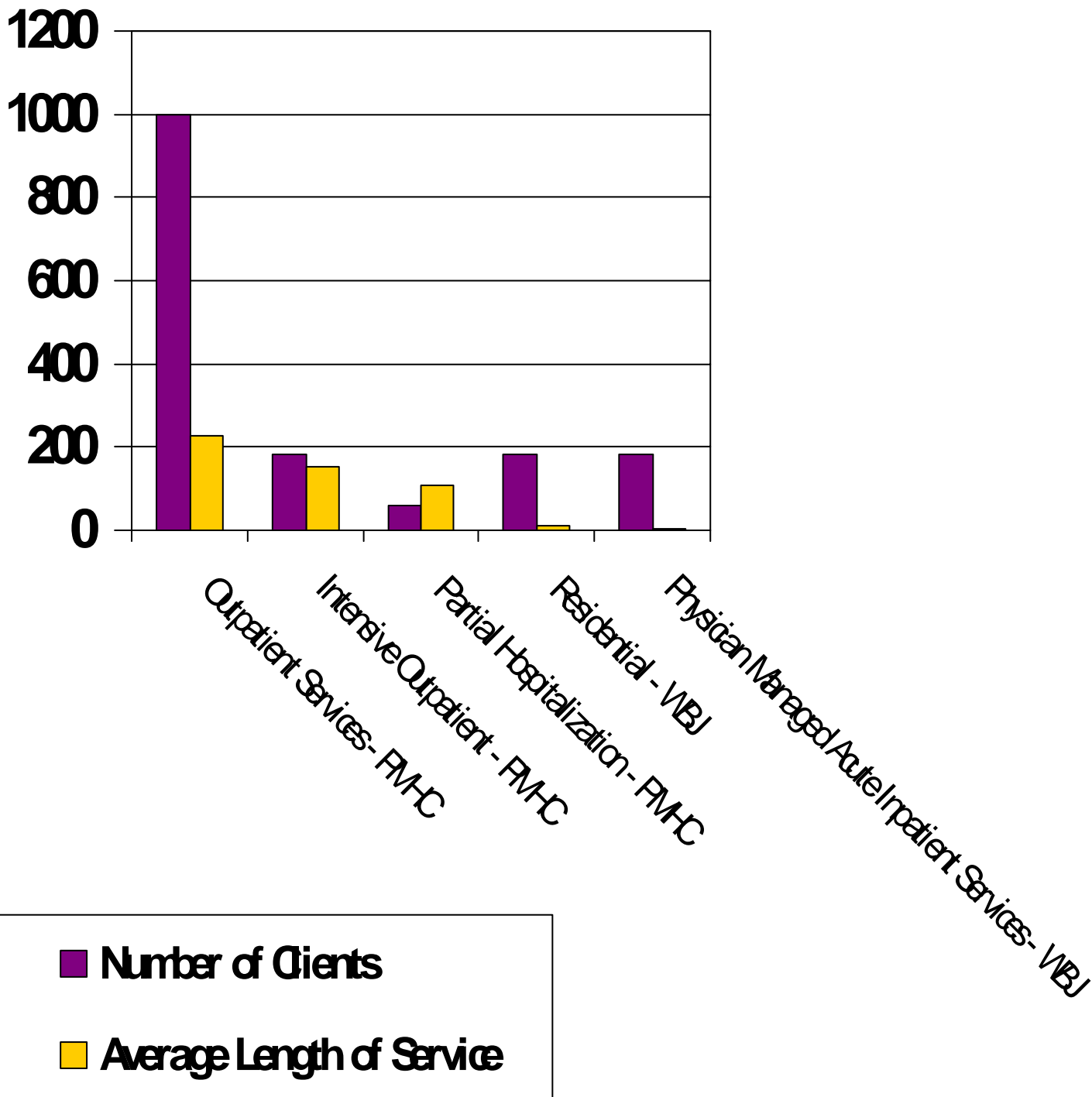
3% Native American

20% Living  
Below  
Poverty



# Services

## Clients FY 2001-2002



# Goals & Objectives

- **Improve engagement of clients – only 51% clients who screened positive came for intake assessment appointments**
- **Decrease waiting time for intake assessments for clients following initial screening from 26 days**
- **Leading to:**
  - **Increase responsiveness of program to clients**
  - **Increase responsiveness of program to referral agencies (criminal justice and social services)**
  - **Improve clinician productivity from 32% or 14-16 client hours within a 40 hour work week**

# Changes Made

- Changed to simplified electronic screening instrument and provided telephone screeners with headsets to allow comfortable data entry
- Decreased intake assessment appointments to 60 minutes because electronic screening transfers information automatically
- Scheduled two clients per hour... placed additional clinicians on call to assist if two clients showed up

## Key Element:

Staff was involved in change and felt ownership in the successful outcomes.



# Simplified Screening

Form # 01-352-01

Pitt County MH/DD/SA Area Program  
203 Government Circle  
Greenville, NC 27834-7704

**TELEPHONE AND FACE-TO-FACE SCREENING FORM**

1. Use to document ALL screenings. 2. If non-client, file in alpha order in Screening file in Medical Records.  
3. If client, file in client's medical record. 4. If person screened becomes a client, remove from Screening file and file in client's medical record.

Home Record # (if applicable) \_\_\_\_\_ Seen here before?  Yes  No  
Verified by Psych Counselor?  Yes  No

Date \_\_\_\_\_ Time \_\_\_\_\_  am  pm Duration: \_\_\_\_\_ minutes Contact Type  Telephone  
 Face-to-Face  
 After Hours

Is Contact with  Client?  Potential Client?  Other? Relationship? \_\_\_\_\_

Client Information  Male  Female Communication and Language  English  
 Spanish  
Age \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_  Other  
 TDD

Address (street, city, state, zip) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Insurance \_\_\_\_\_

Is person in here the legal guardian?  Yes  No  
Name & relationship of responsible person \_\_\_\_\_

Referred by  Self  OSS Reason for contact  Info regarding client services  
 Family  Court  Info regarding other MH services  
 Friend  Private  Info regarding community resources  
 School  Other  Requesting clinic-based services, evaluation, and/or therapy  
 Crisis Assistance

Presenting Problem & Background \_\_\_\_\_

Substance Use and/or Abuse \_\_\_\_\_

Current Medications \_\_\_\_\_

Hospital Discharge Diagnosis \_\_\_\_\_

Treatment History \_\_\_\_\_

Are Case Management Services indicated?  Yes  No

**Lethality Assessment**  
Suicidality?  None, No thoughts  Low  Moderate  High  
Homicidality?  None, No thoughts  Low  Moderate  High

History/Plan/Intervention \_\_\_\_\_

Priority Admission Status:  Pregnant and Injecting Drugs  Urgency  Emergent (60 min.)  
 Pregnant and Using Alcohol/Drugs  Urgent (48 hrs.)  
 Injecting Drugs  Routine (7 days)  
 At Risk for getting HIV/AIDS  State Hospital Discharge (5 days)  
 Hospital Discharge  
 Not Applicable

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Form # 01-352-01

Screening file in Medical Records  
If not, remove from Screening file

Yes  No  
 Yes  No

**Assessment**  
Needs (MR, MI, MH, SA)

Person with Children

Discipline

Referred to (State internal/external Provider and Appointment Date & Time, if scheduled)

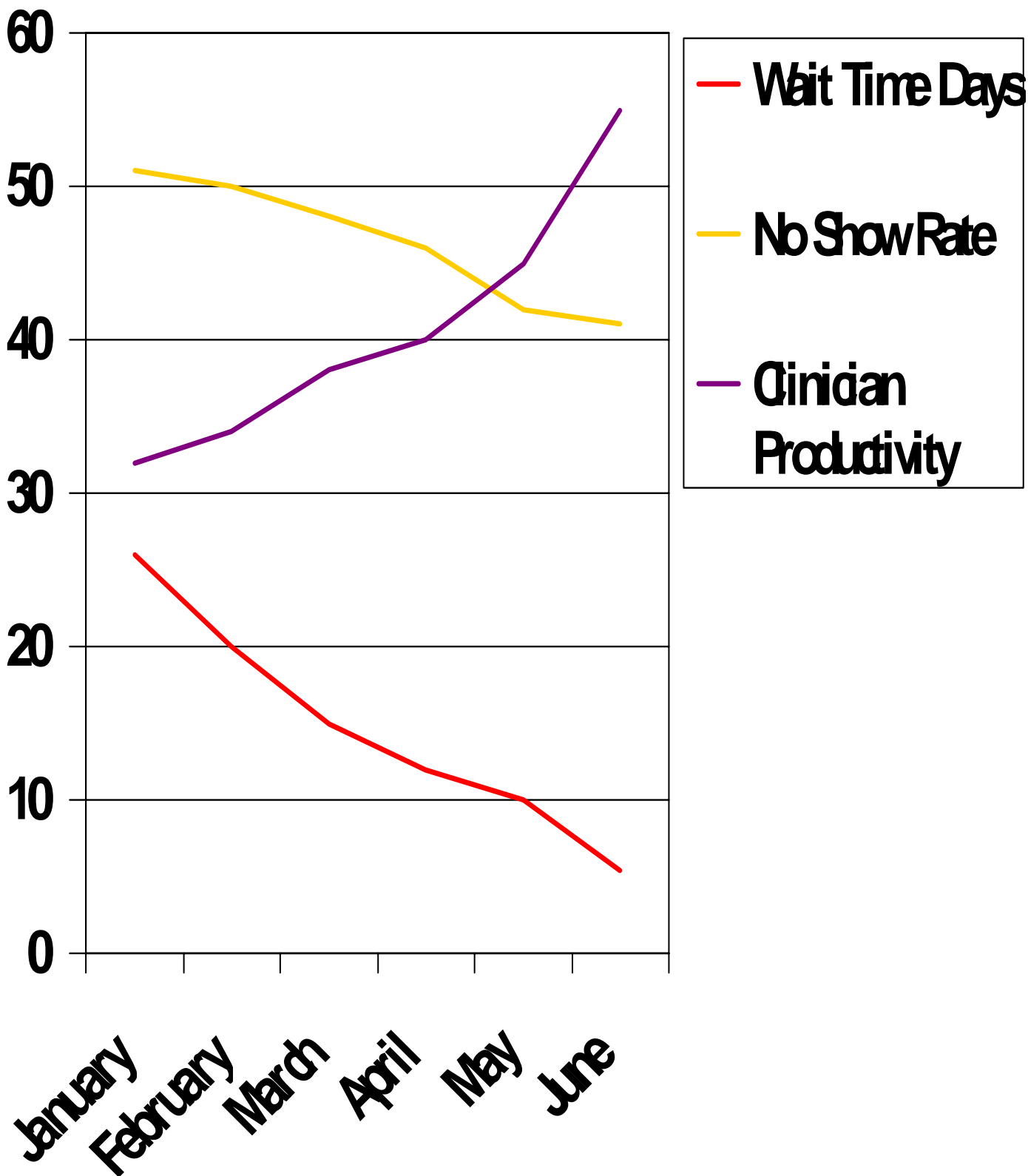
Informed Choice

Signature and Authentication: \_\_\_\_\_ Date \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date \_\_\_\_\_

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# Results





# Future Plans

- Decrease wait time for first appointment
- Develop outpatient therapy capacity building strategy
- Address paperwork problems created by increase in clinician productivity

