



# Promising Practice

## Hold Joint Staffings

### Problem

Not enough timely information is exchanged between referring and receiving levels of care.

### Solution

Hold joint case consultations (often called “staffings”) that include clinicians from both the referring agency and the program they will be entering, to discuss clients’ progress, as well as the appropriateness and timing of referrals .

### Featured Stories

**Central New York Services, Inc.** in Syracuse, New York decreased delays, streamlined the transition process and increased the number of clients who continued in treatment by holding joint biweekly meetings (“staffings”) that included both inpatient and outpatient counselors. The meetings were called PIP meetings (Partners in Prevention)—named by the staff. The New York State Office of Mental Health licensed one agency and New York State Office of Alcoholism and Substance Abuse Services licensed the other. This collaboration brought together staff with varying backgrounds, education, and experience, providing a variety of resources available to the team and the clients. They shared information for approximately 1 to 3 months following the transfer. Communication was essential, not just to get someone transferred but also to follow the transfer.

**Jim Taliaferro Community Mental Health Center** in Lawton, Oklahoma has their outpatient staff attend the morning report on the inpatient unit to help plan clients’ discharge, transition, and ongoing outpatient treatment.

**Palladia, Inc.** in New York, New York has residential and outpatient clinical program directors meet monthly via conference call to check that clients who were referred from residential to outpatient care actually attended. They also discussed other changes that were implemented to ensure that they had been sustained. For more information about changes that Palladia made, see Palladia’s [case study](#).

### Lessons Learned

- Use joint staffings to discuss appropriate placement, timing of transitions, and changes in funding.
- Have staff from both the referral source and the program the client will be entering work together to develop streamlined procedures.

### Tracking Measures

#### Cycle Measure

Percentage of referred clients who were admitted

#### Data Collection Forms

- [Referred Clients Admitted Tracking Form](#)

#### NIATx Aims

Reduce waiting time

Reduce no-shows

✓ Increase continuation

✓ Increase admissions

#### Financial Impact

✓ Increase revenue

✓ Increase staff retention

Reduce costs



# Promising Practice

[\(Starting Clients\)](#)

- [Referred Clients Admitted Tracking Form \(Transition Clients\)](#)

## Action Steps

- Plan**
1. Select one referral source.
  2. Arrange for one or two staff members to attend staffings at the referring level of care.
  3. Collect baseline data for the percentage of referred clients who were admitted for two weeks.
- Do**
4. Test holding joint staffings with the selected referrer for the next two weeks.
  5. Track the percentage of referred clients who were admitted.
- Study**
6. Check the fidelity of the change. Was the change implemented as planned?
  7. Evaluate the change:
    - Did communication about clients improve by having the opportunity to discuss plans for clients jointly between staff at the two levels of care?
    - Did the number of referrals from the selected referrer increase?
    - Did the percentage of referred clients who were admitted increase?
- Act**
8. If this change was an improvement:
    - Adopt this change or adapt it for more improvement and re-test it with the same referral source.
    - Expand the use of this process to other referral sources.
    - Document the processes that resulted in an improvement so that you can continue to use them efficiently.
    - Test other, related promising practices that apply to your setting.

If this change was not an improvement and you can't make it work, abandon this practice and test other promising practices that might be more successful in your setting.

## Related Promising Practices

- [Offer a Tour Guide](#)
- [Guide Referrers to Make Appropriate Referrals](#)
- [Blend Levels of Care](#)



## Promising Practice

- [Overlap Levels of Care](#)
- [Streamline Paperwork between Levels of Care](#)
- [Tailor Brochures for Each Referral Source](#)