211 Care Coordination Impact Report

FISCAL YEAR 2023
November 2023

211 Care Coordination’s Impact in Fiscal Year 2023

The Maryland Information Network (MIN) is proud to submit its 211 Care Coordination Impact Report. We are grateful for our partnerships with the Maryland Department of Health/Behavioral Health Administration, Springboard Community Services, Local Behavioral Health Authority (LBHA), Core Service Agency (CSA), and Local Addictions Authority (LAA), Maryland hospitals, and the many partners, whose collective efforts made our accomplishments possible.

In a holistic care system, care coordination is a critical component that intentionally connects those in need to crucial services that provide support and enable positive change. MIN has been crucial in this process, bringing together the efforts of many organizations, agencies, and individuals with one aim: to make sure every Maryland resident who requires urgent behavioral health services in our emergency departments can find and receive the care they need.

This 211 Care Coordination Impact Report encapsulates our journey, highlighting the strides we’ve made, the challenges we’ve overcome, and the impact our coordinated efforts have had on the communities we serve. Through data, narratives, and testimonials, we aim to present a comprehensive view of how MIN, in conjunction with its partners, has made care coordination not just a service, but a promise of hope, support, and transformation for Maryland. As you delve into this report, may you find both inspiration in our achievements and motivation for the continued path of service and innovation ahead.

Sincerely,

Quinton Askew
President/CEO

Sincerely,

Favour Akhidenor, Ph.D.
Program Director
The Value of Partnership

In an era where the confluence of information technology and health services is indispensable, the 211 Care Coordination partnership between the Maryland Information Network, (MIN) and the Maryland Department of Health/Behavioral Health Administration emerges as a beacon of innovation and synergy.

MIN, a vital conduit for digital transformation, stands at the forefront of streamlining data, enhancing communication, and ensuring that the power of information is harnessed to its fullest potential. Its capabilities in data integration, analytics, and dissemination have reshaped the way information is processed and accessed across various sectors in Maryland.

On the public health side, the Maryland Department of Health, with its vast expertise and commitment, anchors the state’s health initiatives. Tasked with safeguarding the health of Maryland’s diverse populace, it continually seeks innovative strategies to enhance service delivery, policy formulation, and public health interventions.

Together, MIN and MDH are working to provide a single access point for inpatient and outpatient care coordination services for all Maryland hospital ED discharge planners who have patients with behavioral health needs for whom they have not been able to locate a needed discharge placement. This collaborative effort has ushered in an era of accelerated information exchange, real-time care coordination, and a more informed, data-driven approach to public health decisions. When technology and health governance unite, the result is a more responsive, efficient, and holistic health ecosystem.

The 211 Care Coordination program allows a single access point for Marylanders and hospital staff to get resources when needed. Its goal of increasing the ease of referrals and placements for patients is especially vital for behavioral health patients. Through collaboration with discharge planners, hospital staff and social workers, care coordination ensures that access to behavioral health resources remains a critical part of patient care.”

Laura Hererra Scott
Secretary, Maryland Department of Health
Hospital Training and Outreach

The 211 Care Coordination Program implemented a thorough and proactive community engagement approach in FY 2023. We successfully conducted outreach and comprehensive virtual training sessions on the program for all Maryland state hospitals. These efforts raised awareness, sparked queries, and initiated ongoing collaborative opportunities. The positive response from hospitals indicates a growing interest in the program and the potential for long-term engagement. We aim to continue our outreach and community engagement efforts, expand our network, and ensure effective coordination of the program.

The 211 Care Coordination Program will always hold a special place in my heart. Over the course of the last year that I have had the pleasure of working alongside the 211 Care Coordinators, Dr. Favour Akhidenor, and the state, I can truly say a difference is being made daily. Being able to be a part of a program that is helping individuals get the treatment and care they need and deserve is not only impactful but meaningful and absolutely necessary. It’s been a monumental effort for all parties involved. This program benefits patients at ED’s who may face an overstay, and it is also a way to help connect patients to outside resources, if needed, to ensure their continued care once discharged. I truly believe it’s a win-win for all involved! On my end, there is no better feeling then following up with a referring ED to find that “Yes, the patient has been placed.” A difference is being made! I am beyond appreciative and grateful that I am able to be a part of such a devoted and caring program that cares in ensuring patients get the Mental/Behavioral Health services in which they need and deserve!

Courtney Pyles
Sheppard Pratt
211 Care Coordination Program

for Hospital Emergency Departments

Hospital staff, discharge planners, and social workers in emergency departments: Need help identifying behavioral health referrals for your patients?

The 211 Care Coordination Program is here to help.

Refer patients that are in the Emergency Department to the Care Coordination Program when assistance is needed in locating the behavioral health resources they need.

To make a referral, visit 211md.org/carecoordination or dial 211 and press 4 immediately.

1. 211 Care Coordinators will acknowledge your referral within 30 minutes of receipt and will immediately begin identifying available resources.

2. 211 Care Coordinators will connect hospital staff and patients to available, conveniently located behavioral health services.

3. 211 Care Coordinators will follow up to ensure a successful placement and update the electronic record to close the loop with discharge planners.
Program Enhancements

Outpatient/Inpatient Services: The 211 Care Coordination program started with an outpatient program in July 2022 and, in December, expanded to provide inpatient program support in partnership with Sheppard Pratt. Over the past year, the program has evolved to include the following:

Case Consultation Services: Individual case consultation was introduced as a method to foster deeper engagement with hospitals. The primary goal was to collaborate with the hospital to discuss and solve complex patient cases. The case consultation methodology has not only proven effective in fostering collaboration but also in boosting patient referral rates and improving case closure outcomes.

The 211 Hospital Network: The Hospital Network is a collaborative platform designed to bring together hospital staff, state coordinators, care coordinators, Behavioral Health Administration (BHA) staff, Developmental Disability Administration (DDA) staff, and other state partners. Through monthly meetings, the network enables participants to discuss best practices, identify gaps in service, and develop long-term, sustainable solutions. This collaborative initiative aims to navigate the dynamic healthcare delivery system and support a holistic approach to patient care. The primary goal of the Hospital Network is to identify and implement collective strategies to enhance population health.

The Internship Program: The internship program is an effective channel for attracting and engaging individuals interested in working and expanding their knowledge within the field of behavioral health. It offers comprehensive training to interns, preparing them for a future role within care coordination and the behavioral health service sector. It is a strategic initiative designed to serve several interconnected purposes. It functions as a mechanism to retain staff by providing exposure to the nuances of care coordination.

The 211 Care Coordination team continues to expand in response to the rising care demands and prolonged patient stays in the Emergency Department. Our system transcends traditional information and referral services by embracing a patient-centric model. With our most recent collaboration with the Chesapeake Regional Information System (CRISP), the Care Coordination initiative has incorporated a closed loop model.
of patient care. This collaboration has provided the opportunity for enhanced Community Information Systems (CIS) and cross-sector data sharing, placing an emphasis on addressing the entirety of a patient’s health. The CIS adopts a meticulous methodology for patient care, allowing health professionals to pinpoint patient needs via a thorough database management system. This strategy yields insightful data about patients, highlighting their healthcare requirements and pathways to enhancing their health outcomes.

“... My time with 211 Maryland, as an intern, has been an incredible experience. It has provided a wonderful field instructor, friendly staff, meaningful work, and a supportive work environment. I have learned so much about Maryland, its people, and the amazing resources Maryland has. I will be forever grateful for my experience here and look forward to continuing to work with 211 Maryland.”

**Brandi Connor-Vargeson**  
211 Maryland Intern/Care Coordinator

“... 211 is a reliable resource to make referrals for community resources and outpatient support.”

**Maria Manna**  
Northwest, Director of Care Management

“... The case consultation services are helpful for check-in and patient placement. The care coordination case consultation allows us to be on the same page when discussing critical patient cases.”

**Rachel Boro-Hernandez**  
Johns Hopkins Hospital Director, Pediatric Social Work
Impact

The 211 Care Coordination program has had a substantial impact in supporting hospitals with ED discharges. A total of 532 individuals were referred for services, with a majority of 365 being inpatient referrals. The program has effectively utilized various methods of referral, with 443 via electronic form and 36 via phone. Northwest Hospital had the highest engagement, contributing 210 referrals.

The program has served a diverse age group with most patients falling within the ages of adolescents (13-17 years), transitional age youth (18-25 years), and adults (26-45 years). The average age for patients needing outpatient services was 29 years, and for patients needing inpatient services, it was 34.8 years.

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<thead>
<tr>
<th>Total number of referrals (inpatient and outpatient)</th>
<th>Number of Inpatient Referrals by Age</th>
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<tbody>
<tr>
<td>Outpatient</td>
<td>167</td>
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<tr>
<td>Inpatient</td>
<td>365</td>
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<table>
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<tr>
<th>Total number of participating hospitals</th>
<th>25</th>
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<tr>
<td>Number of counties served</td>
<td>14</td>
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<table>
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<tr>
<th>Diagnoses by diagnostic category</th>
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<tbody>
<tr>
<td>37.0% Depressive Disorders</td>
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<tr>
<td>18.3% Schizophrenia Spectrum and Other Psychotic Disorders</td>
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<tr>
<td>12.2% Bipolar and Related Disorders</td>
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<tr>
<td>7.9% Anxiety Disorders</td>
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<tr>
<td>5.9% Neurodevelopmental Disorders</td>
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<tr>
<td>5.7% Trauma- and Stressor-Related Disorders</td>
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<tr>
<td>4.3% Other Mental Disorders</td>
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<tr>
<td>3.6% Substance-Related and Addictive Disorders</td>
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The Path Forward

In the early stages of the 211 Care Coordination program, the accomplishments we’ve seen highlight the power and promise of our partnership, showcasing the significant benefits of unified care pathways for the people of Maryland. Looking forward, we are excited about the prospects of reaching new milestones, enhancing our approaches, and more deeply integrating our care coordination model into Maryland’s healthcare system. Given our encouraging beginning, we are well-positioned for a future where our care coordination not only thrives but also becomes a model for others to follow.
Maryland Information Network believes in the power of partnership. Working together with the Maryland Department of Health and other state agencies, local governments, thousands of local nonprofits and our valued 211 call centers, we are helping Maryland residents on the path to self-sufficiency every day.