

The Effect of Focused Client Education on Case Management (CM) & Readmission Rates in Homeless Individuals with Co-occurring Disorders (H-COD) Admitted to a Jail Diversion Program (JDP)

PALLAVI RAO, BSN, RN; MARY JOHNSON, DNP, PMHNP-BC
UNIVERSITY OF TENNESSEE, KNOXVILLE

BACKGROUND

- Individuals with mental illness(es) & substance use disorders (SUD) occurring simultaneously are known as having co-occurring disorders (COD)¹⁰
- The rate of COD in homeless individuals (H-COD), or the target population, was higher than found in the general population.⁸
- Nationally, 26% of people experiencing homelessness have severe mental health problems, & ~35% have chronic substance-related disorders.¹⁵
- Due to this dual diagnosis, H-COD clients are unable to better their lives; their risk of involvement with the criminal justice system increases¹⁰

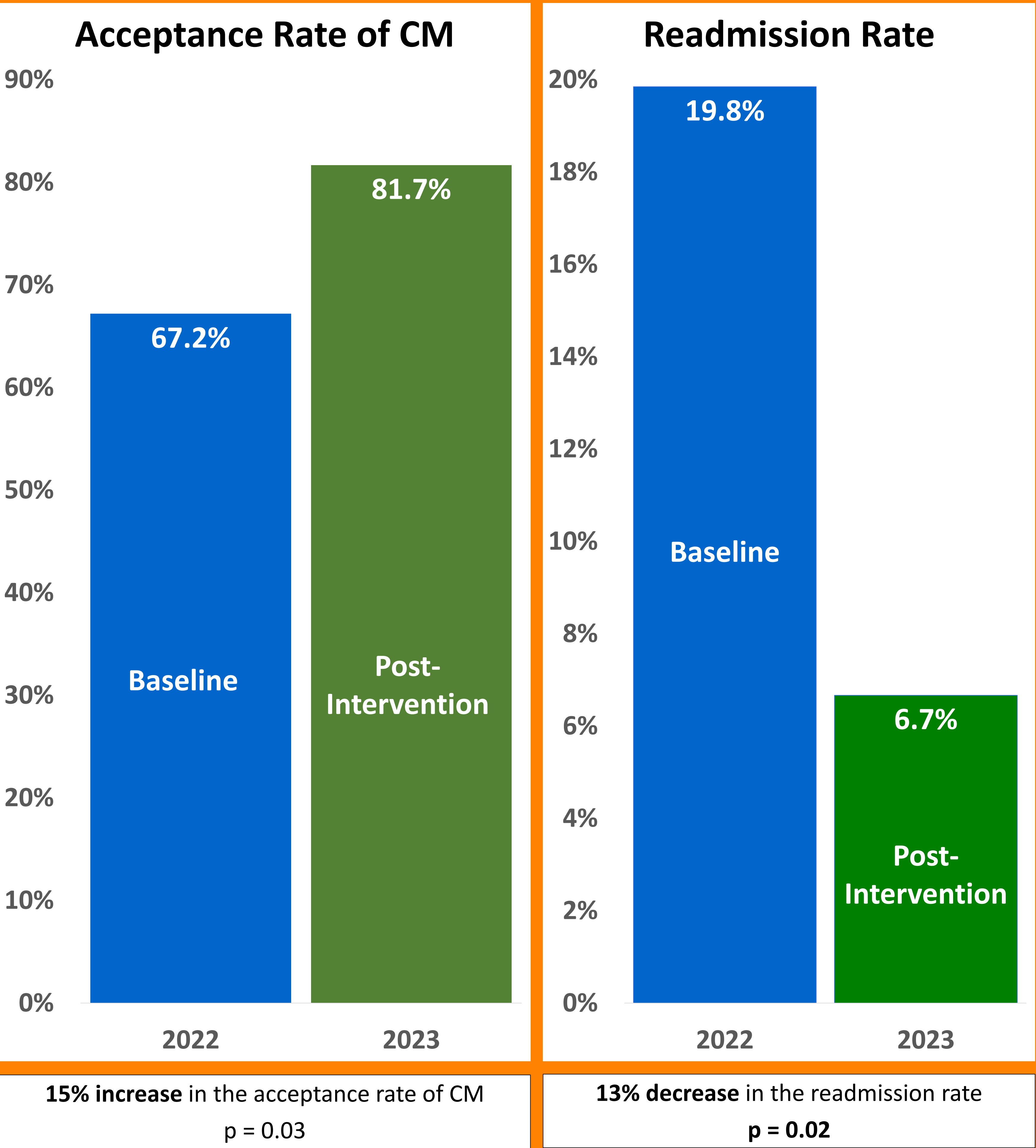
LOCAL PROBLEM

- **Project Site:** A private non-profit jail diversion program in TN (JDP) where 79% of admitted clients have COD & ~80 are homeless⁹
- Prior to any interventions, the case management (CM) acceptance rate for the target population was 67% & the readmission rate to the JDP was 19.8%
- Purpose of project: To improve the health & social outcomes of H-COD clients admitted to the JDP by improving an existing process
- Project objectives: 1) increase the CM acceptance rate among H-COD clients and 2) decrease the readmission rate of H-COD clients to the JDP

METHODS

- The Model for Improvement (MFI) was used to guide the development, implementation, & evaluation of the project.⁶
- Literature search & critical appraisal demonstrated good evidence & consistent results for client-specific adaptations in integrated CM instead of generalized CM to further improve outcomes in H-COD clients.^{1-4,7,16,12-13,14,16}
- Intervention-related materials were prepared & trial-run using Plan-Do-Study-Act (PDSA) cycles⁶
- CM acceptance rate was calculated for H-COD clients during the intervention period (March 3 to Aug 31, 2023) & compared to baseline data from the previous year (March 1 to Aug 31, 2022)
- During the intervention period, each H-COD client was monitored for 90 days to calculate their readmission rate. Equivalent data was pulled from the matching time frame during 2022 (baseline data).
- The chi-square test for homogeneity was used to compare the measures & the level of significance for the test was 0.5 ($\alpha=0.05$)

Presenting & discussing case management & client specific needs with H-COD clients during opportune moments increased the acceptance rate of CM & decreased the readmission rate to the JDP.



Note: * = statistically significant ($p < 0.05$); H-COD= homeless individuals with co-occurring disorders; JDP = Jail diversion program

← Scan for more information



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INTERVENTIONS

- JDP nurses, who built trust & rapport with the clients, carried out the 3 interventions, collectively known as “Focused Client Education” (FCE).
- FCE is conducted at opportune moments, meaning when the client is sober/less intoxicated or receptive to engaging & listening. FCE administered on all clients, but data was only assessed for H-COD clients in this study
- **Steps Involved in FCE:**
 1. Presenting a standardized talk on what services are offered by CM at the JDP
 2. Conducting a focused, client-specific education session utilizing brochures to discuss client’s specific type(s) of substance use & mental illness(es) & inquiring what the client’s individual needs are regarding CM. Discussing client’s goals upon discharge.
 3. Providing clients with a laminated community resource card upon discharge & ensuring the card is placed in client’s wallet or possessions for availability of use when in the community. Each resource on the card is explained to client.
- All clients have the option to accept or decline CM services, but evidence suggests that FCE could increase the acceptance rate of CM⁵

RESULTS

- About 75% of the clients admitted during the intervention were H-COD, which is comparable to the baseline of 73% in 2022
- Post-intervention, the CM acceptance rate in H-COD clients improved from the baseline of 67.2% to 81.7%, a statistically significant* ($p=.03$) improvement of about 15%.
- Post-intervention, the readmission rate of H-COD clients to the JDP was lowered from 19.8% (baseline) to 6.7%
- A statistically significant ($p = 0.02$) improvement of 13.2%

CONCLUSIONS

- Incorporating FCE into H-CODs has proven to be effective in enhancing the quality of the existing CM process in a JDP. As a result, the acceptance rate of CM has significantly increased, & the readmission rate to the JDP has significantly decreased.
- Adding FCE to the existing process incurred minimal costs with significant benefits. Although the FCE for the project ended on August 31, 2023, JDP management has continued to use FCE, illustrating sustainability of the newly implemented intervention.