

Lawrence Memorial Hospital
2007 Request for Funding - City of Lawrence Alcohol Tax Funds
TREATMENT

Lawrence Memorial Hospital is a 173-bed, not-for-profit, general acute care hospital. We have worked to provide excellent, accessible health care since the hospital's founding more than 80 years ago. We are dedicated to improving the health of our community, and we invest excess revenue over expenses into services, equipment and facilities that further this mission. LMH serves the community's health care needs regardless of individuals' ability to pay.

Treatment Program Description: Lawrence Memorial Hospital offers assessment and medical stabilization for patients with alcohol and substance abuse issues through its Emergency Department, Intensive Care Unit and General Medical Unit.

Assessment/Evaluation: The LMH Emergency Department is the community's primary intake facility for alcohol and substance abuse patients who are in crisis. Immediate medical needs are stabilized, and patients often are given multi-vitamin IV fluids to facilitate re-hydration and speed sobriety. Patients are assessed for potential admission to the hospital and referred by a primary care or ER physician to the Psychiatric Consultation Team. Funding received from the City of Lawrence Alcohol Tax Funds in 2004 enabled us to improve the medical treatment of alcohol abuse through this interdisciplinary Psychiatric Consultation Team. Made up of a psychiatrist, a psychiatric nurse and other clinical team members (for example, a social worker and/or a chaplain as indicated by the patient's needs), the team provides primary medical treatment during crisis, stabilization of the patient's medical condition and coordination of community services for long-term treatment. Additionally, the standardized order set for patient detoxification continues to be used and appreciated and, in some cases, decreases detoxification time by approximately one-half.

Counseling and Education: Education is a key component of our care for patients with alcohol and substance abuse issues. Patients learn and must be able to verbalize the physiological and psychological effects of substance abuse; be aware of community support groups, locations and meetings times; be able to define "sponsor" and know how to obtain a sponsor; and verbalize their plan for maintaining sobriety. Many patients with alcohol and substance abuse issues carry dual diagnoses that include psychosis, depression or other forms of mental illness. The comprehensive nature of our services ensures that we can meet these complex medical and social needs or refer them to inpatient facilities or other resources when necessary.

Introduction to Aftercare: Before being discharged, each patient must have his or her own plans for meeting post-hospital needs, and the patient or significant other must verbalize understanding of all medical attention, limitations and follow-up. Patients receive a comprehensive information packet that is culturally sensitive and tailored to an individual's specific needs. The packet includes information on community resources so that they know where to seek additional help in the future. Our social work staff assists in making appointments with appropriate agencies for nearly 100% of all inpatients we treat.

Needs Assessment: Lawrence Memorial Hospital is the only inpatient medical stabilization resource for alcohol and substance abuse in Lawrence/Douglas County. Without LMH's services, many of those in need of medical stabilization for alcohol and substance abuse would not receive care. LMH currently has two mental stabilization rooms in the Emergency Department and there are plans to add a third. The LMH Emergency Department receives nearly 100% of

individuals in substance abuse crisis picked up by the Lawrence Police Department or the Lawrence-Douglas County Fire and Medical Department, provided they are not threatening immediate bodily harm to themselves or to others. In 2005, staff in the Emergency Department attended to 1,158 patients with a primary or secondary diagnosis of alcohol abuse/dependency. A secondary diagnosis means that while their initial reason for coming to the hospital may have been depression, a broken limb, a gunshot wound or a head injury, they also required medical attention for conditions related to alcohol use. A total of 210 patients (18.1% of those 1,158) subsequently were admitted to the hospital.

Lawrence Memorial Hospital is committed to our community and serves patients regardless of their ability to pay; however, the rising costs associated with this need are alarming. In 2005, the hospital paid for \$3,865,000 in charity care, nearly \$932,935 of which was for patients with diagnoses of alcohol and substance abuse/dependency. **\$5,038 was expended on transporting patients with diagnoses of alcohol and substance abuse/dependency to other area facilities.** An uninsured patient diagnosed with alcohol and/or substance abuse/dependency cannot be admitted to a substance treatment program without a State-required RADAC screening. The patient is required to pay \$75-150 for the RADAC screening. In most cases, these patients do not have those funds available, so they might not be able to receive the treatment they need.

Through the collaborative efforts of many, LMH continues to meet our obligation of medically stabilizing and treating patients with alcohol and substance abuse issues. We provide crisis medical management through the primary care or ER physician in conjunction with our interdisciplinary Psychiatric Consultation Team.

Outcomes: It is important to us that patients improve in health, are satisfied with our services, and obtain the necessary education and tools to successfully handle their disease. LMH employs several standard mental health outcomes that address the clinical and functional status of substance abuse patients. Before patients are discharged from the hospital, our professionals determine their improvement through such indicators as reduction of symptoms, self-care abilities and overall physical health. Through our training and education program, each patient receives education about the causes, symptoms and effects of alcohol and substance abuse; verbalizes understanding of medical attention and follow-up needs; and develops a personal plan to help maintain sobriety. Our results also are measured by patient, physician and employee satisfaction.

Our objectives for 2006 are as follows:

- To provide 100 percent of all inpatients actually admitted to the hospital with a primary diagnosis of alcohol abuse/dependency information about treatment options and available resources
- To provide alcohol education packets to 95 percent of all patients admitted for detox within 24 hours of admission
- To reduce the percentage of repeat admissions from the current 29 percent to 25 percent

Evaluation: Progress of the Lawrence Memorial Hospital substance abuse services are evaluated through:

- Clinical assessment tools and individualized plan of care including desired outcomes which are monitored for future hospitalization
- Successful resolution of detox protocol
- Abbreviated mental status examination upon admission and discharge, as indicated
- Depression screen and suicidal screen, as indicated
- Patient satisfaction survey
- Education and discharge planning

Additionally, LMH continues to evaluate community need through regular communication with other integral area agencies such as Bert Nash, DCCCA and Alcoholics Anonymous. Needs are addressed at all levels of the organization, including the Board of Trustees, Medical Staff Executive Committee, Community Education and departmental personnel.

Coordination: Lawrence Memorial Hospital's services are an integral part of the larger network of community agencies addressing the prevention and treatment of alcohol and substance abuse.

As mentioned above, LMH receives substance abuse patients through both the City of Lawrence Police Department and the Lawrence-Douglas County Fire and Medical Department. Individuals are referred to services at LMH by Bert Nash, DCCCA, Ransom Memorial Hospital, Watkins Health Center at KU, Franklin County Mental Health Services and the District Attorney's Office, as well as by local urgent care centers, private physician and therapist practices, and self-referrals. The hospital makes available several rooms each week for Alcoholics Anonymous meetings.

In an effort to ensure maintenance of sobriety, LMH staff conducts an assessment of each patient to identify his or her support systems, determine or recommend involvement with community resources, and make referrals to appropriate agencies. We have developed a community referral manual to help LMH social workers accurately and swiftly refer patients to community resources.

By maintaining a local crisis medical management facility for people with alcohol and drug abuse/dependency, Lawrence Memorial Hospital provides the community with a much-needed safety net for those in need of care.

Organizational Capacity: Lawrence Memorial Hospital's long history of service has enabled it to routinely analyze and improve services, with well-implemented and effective programs being the result. LMH closed the psychiatric unit May 2004. However, we continue to meet our obligation of medically stabilizing and treating patients with alcohol and substance abuse issues. Our primary care and ER physicians refer patients with alcohol and substance abuse issues to the Psychiatric Consultation Team, which includes a psychiatrist, a psychiatric nurse and other staff members as needed by the patient, such as a social worker and a chaplain.

Additionally, systems are in place at LMH to inform and involve all levels of management, from departmental to Board of Trustees, in alcohol and substance abuse issues. A team of nurses, physicians and social workers developed a standardized order set for detoxification, and staff throughout the hospital have been and continue to be educated. This order set has reduced the length of stay of patients with substance abuse, and we believe this is due to the more accurate assessment it allows at the time of initial evaluation.

Budget: Over the last 85 years LMH has been successful in caring for citizens in Lawrence and Douglas County in a fiscally responsible manner. We undergird patient care by the benefit of student and adult volunteers, and the community's recognition of LMH as a viable charity to receive financial and in-kind support.

The Lawrence Memorial Hospital Endowment Association is actively seeking additional funding for all hospital programs. We anticipate a continued need for external funding for alcohol and substance abuse treatment/intervention/coordination services, and we look to our community's alcohol tax funds to provide a portion of this support.

LMH Emergency Department*– 2005:

Personnel (Clerical, Management, Nursing/Clinical):	\$ 2,423,020
Fringe Benefits:	\$ 339,222
SUBTOTAL	\$ 2,762,242

Professional Fees	\$ 2,832,000
Equipment Rental/Lease	13,773
Medical Materials/Supplies	56,060
General Operating Supplies	16,881
Food	5,169
Misc. Purchased Services	221,779
Education/Travel	10,000
Minor Equipment	14,442
Psychiatric Evaluations	12,000
Office Space/Overhead	943,180
Other Misc. Expense	17,604
SUBTOTAL	\$ 4,142,888

GRAND TOTAL	\$ 6,905,130
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*NOTE: We have not included expenses incurred in the hospital's Intensive Care Unit and General Medical Unit.

Other funding sources include Medicare/Medicaid, managed care, commercial insurance, and self-pay.

36.36% of patients with a primary diagnosis of alcohol abuse/dependency, and 31.55% of patients with a secondary diagnosis of alcohol abuse/dependency, do not have insurance. This creates an alarming financial burden for our community hospital. In 2005, we incurred an average loss of \$805 per patient visit among patients with alcohol abuse/dependency.

**LMH 2005 Actual Loss Due to Uninsured Patients with Alcohol/Substance Abuse Issues:
(1,158 patients x \$805 average loss) = \$ 932,935**

While we anxiously await the rewards of efforts aimed at prevention of alcohol and drug abuse, the number of people requiring immediate medical attention continues to climb, as does the cost of providing it. **Of the 1,158 patients with alcohol or substance abuse issues treated in LMH's Emergency Department in 2005, the \$35,000 in alcohol tax funds awarded last year enabled LMH to care for 43.** Our need is great with respect to the amount of alcohol tax funds available, and we know that other community agencies also desire funding support. We are asking for **\$50,000** from the city's alcohol tax funds to offset the costs our community hospital absorbs and to allow us to continue enhancing our treatment program for patients with alcohol-related issues. Thank you for your consideration.