

Behavioral Health Care – How do we compare?

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At Licking Memorial Hospital (LMH), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your healthcare choices.

1 Behavioral health is a broad term that refers to psychiatric and/or chemical dependency illnesses. Inpatient hospitalization for either condition is often necessary for effective intervention. LMH provides a wide range of services for people with behavioral health illnesses at its Shepherd Hill facility. One goal is to transition patients into outpatient settings where they can continue treatment, decreasing the need for readmission.

	LMH 2011	LMH 2012	LMH 2013	Goal
Psychiatric readmissions within 31 days	5.1%	0.9%	3.0%	less than 5.6%

2 Outcome studies are conducted to monitor and measure the success of chemical dependence treatment. Our data show how patients are doing up to two years after completing the program. Information regarding abstinence one year after completing the program is self-reported by patients.

	LMH 2011	LMH 2012	LMH 2013	Goal
Patients remaining abstinent	88%	89%	87%	greater than 85%
Improvement in quality of relationships	92%	93%	92%	greater than 85%
Improvement in overall physical and mental health	95%	94%	95%	greater than 85%
Improvement in overall quality of life	90%	91%	93%	greater than 85%

3 Detoxification – the safe, medically supervised elimination of addictive substances from the body – is the most intensive care offered for chemical dependency patients. Acute withdrawal symptoms are managed by the appropriate medications for each patient’s situation. The length of stay for detoxification depends upon the drug of choice and the severity of the withdrawal.

	LMH 2011	LMH 2012	LMH 2013	Goal
Average length of stay – alcohol treatment	2.7 days	2.5 days	2.4 days	less than 3 days
Average length of stay – opiate treatment	2.6 days	2.5 days	2.5 days	less than 4 days
Average length of stay – tranquilizer (benzodiazepines) treatment	2.7 days	2.4 days	2.3 days	less than 5 days

4 Education is considered an essential component of providing complete behavioral health care. A thorough understanding of the diagnosis, the purpose of medications, side effects to medications and the expected response to treatment leads to decreased relapse and readmission rates and increased long-term compliance with medication on an outpatient basis.

	LMH 2011	LMH 2012	LMH 2013	Goal
Diagnosis/disease education provided for patients and/or family	99%	99%	99%	greater than 97%
Medication education provided for patients and/or family	100%	99%	98%	greater than 97%

5 Family participation is an important component in patients’ recovery. For continuity of care, a licensed professional clinical counselor or social worker will initiate contact with family members of Shepherd Hill psychiatric inpatients and encourage them to participate in a family meeting during the period of inpatient treatment.

	LMH 2011	LMH 2012	LMH 2013	Goal
Social work/family meeting during patient stay	88%	84%	91%	greater than 95%

6 Valproic acid and lithium are two common medications used to treat multiple behavioral health diagnoses. These medications can facilitate control of symptoms and assist in recovery, but both have potentially dangerous side effects. Licking Memorial Behavioral Health professionals monitor their patients’ blood at specified intervals to ensure therapeutic levels of the medications and to observe for toxicity or other negative effects on vital organs.

	LMHP 2011	LMHP 2012	LMHP 2013	Goal
Appropriate testing complete for patients taking lithium (such as Lithobid)	94%	94%	95%	greater than 90%
Appropriate testing complete for patients taking valproic acid (such as Depakote)	94%	95%	95%	greater than 90%

Patient Story – Phil L.

In his retirement years, Phil L. of Pataskala is dedicated to the cause of sobriety – for himself and other recovering alcoholics whom he sponsors. Phil has been sober for nearly 11 years, and credits Shepherd Hill, the behavioral health department of Licking Memorial Hospital, and Alcoholics Anonymous (AA) for helping him regain control of his life. However, his recovery has had many setbacks, and he is still working at staying sober every day.



Phil first began drinking during his freshman year at college. “When I started drinking, I could handle only one beer at a time,” he remembered. “I did not like knowing that my friends could drink more, so I practiced and became very good at it. By the time I graduated, I could drink an entire six pack.”

In graduate school, Phil's drinking increased even more. He said, “After classes, the graduate students would meet with professors to 'solve' the world's problems over a few drinks. At that point, I was drinking every day. I did not think that it was interfering with my studies or my social life. In fact, I felt like alcohol made me more outgoing and uninhibited. With alcohol, I could adapt to any group of people.”

In 1967, Phil accepted a job with the federal government in Washington, D.C. He lived alone, relaxing with a few drinks every evening, and drinking much more on the weekends. He began to experience “blackouts” occasionally, but did not consider them to be serious. “Things were still good as far as I was concerned,” Phil said.

Phil got married in 1973, and for a while, he cut back on drinking quite a bit. However, his alcohol consumption then began increasing again to the point that in 1982, his wife told him that his drinking was causing problems, and she joined Al Anon to help her cope. “I was so happy that she joined Al Anon,” Phil said, “because it got her out of the house a few nights every week, and I could drink all I wanted while she was gone.”

In 1983, Phil began to realize that alcohol was taking over his life, and decided to seek help. First, he visited a private counselor, but that treatment proved ineffective for him. “I lied to her,” Phil admitted. “I kept telling her that things were getting better. Alcoholics are good at conniving, manipulating and hiding their actions.” Then, he checked into a residential addiction treatment center in Minnesota with a 28-day program. After completing the program, he joined an AA group in Washington, D.C. The camaraderie between members of the 12-step program gave him the support he needed to stay sober.

After more than a decade of sobriety, Phil and his wife moved to Pataskala. He became unhappy with his new work, and had not made connections with a local AA chapter. Lacking the familiar support system, he turned to drinking again. In 2000, he checked into the same Minnesota facility to complete a second 28-day residential treatment program there.

Shortly after his dismissal, Phil received a request from President-Elect George W. Bush to return to Washington, D.C., to assist with the Presidential transition. “It was supposed to be a one-year commitment, but then the tragic 9/11 event happened, and it turned into two years,” Phil explained. “Our team worked grueling 15- to 18-hour days. I was living out of a hotel and immediately started drinking again.”

One day in late 2002, Phil set out for the 400-mile drive home to Pataskala. “I had been drinking and was stopped for drunk driving. I had driven the last 60 miles in a blackout.” Phil received a DUI conviction and checked into the 70-day treatment program at Shepherd Hill. After completing the program, he stayed sober for 13 months, until he made another car trip to Nebraska to visit his mother. He stopped for the night at a motel and decided to buy fuel at a nearby gas station. Inside the gas station, he noticed a row of alcoholic beverages on the shelf, and thought to himself, “No one will know.” Phil drank non-stop for the next four days, even taking a vodka-filled water bottle with him to visit his mother in an assisted-living facility.

Phil checked into Shepherd Hill again in November 2003, and has been sober ever since. He said, “J.R. (J.R. Abrahamsen) and Ellen (Ellen Laubis, M.Ed., LICDC) are the best counselors I have ever had. They are compassionate, yet tough. The most important thing that I learned at Shepherd Hill is that I have a disease,” Phil explained. “My body's chemistry has changed, and the only way that I can live a happy and free life again is to remain abstinent from all mood-altering substances.”

In spite of the ups and downs in Phil's recovery from alcohol addiction, he has learned to forgive himself for past relapses and celebrate his current sobriety. “I love the life that I am living now,” he said. “For me, the key is to stay in touch with AA. Shepherd Hill got me cleaned up and sober and back out into society, but unless I stay active in AA, I know that I am not going to make it. The sad truth is that alcoholism is a fatal disease.”

Currently, Phil attends a minimum of five AA meetings every week. He is currently sponsoring four AA members and gives them support by listening carefully and sharing his own history of alcoholism. He also stays in touch with the Shepherd Hill staff and returns occasionally to give inspirational presentations about his on-going experiences.

Medications Available to Treat Drug Addiction and Alcoholism

Many residents of Licking County, Ohio, mistakenly believe that their community is relatively free of drug addiction problems that affect other areas. However, research has shown that the level of illicit drug use in Licking County closely aligns with the national rate, with an estimated 12 to 14 percent of Americans diagnosed with a substance use disorder at some point in their lifetime. Drug and alcohol addiction can be medically treated, but many recovering patients suffer relapses that hinder their success. In recent years, two new medications have been approved by the FDA that greatly increase the success rate for continued recovery.



On the other hand, Vivitrol requires less supervision. Dr. Whitney said, “Vivitrol is administered as a once-a-month injection. Many physicians prefer prescribing Vivitrol over Suboxone for patients with opiate addictions, partly because it does not require the patient to remember when to take it, and it is not possible to divert it to other individuals for illicit use. The patient visits the physician only once a month for an injection. When Vivitrol

was first introduced, most insurance providers did not cover its use, but it has proven so effective that many insurance providers now cover the cost to help their clients with addiction issues achieve healthy, long-term sobriety.”

After the misuse of prescription painkillers, such as OxyContin® and Percocet®, rose to epidemic proportions in the U.S., law enforcement agencies and pharmaceutical manufacturers intensified their efforts to make the drugs less available and less easily abused. While the endeavors have been largely successful, they have had an unintended and dangerous consequence – the resurgence of heroin use by those seeking an inexpensive and readily accessible alternative.

Before taking Vivitrol, the patient must be free of opiates for 7 to 10 days to avoid opiate withdrawal. In addition, Vivitrol can be used to treat alcohol addiction. The treatment plans at Shepherd Hill also include individual counseling, family counseling, participation in a 12-step program, and aftercare.

Addiction is a treatable disorder. Through treatment that is medically supervised and tailored to individual needs, patients can learn to control their condition and lead normal, productive lives. Much like patients who are treated for diabetes or heart disease, those who receive treatment for alcohol and drug addiction learn behavioral changes and often take medications as part of their treatment regimen.

Shepherd Hill’s treatment for drug and alcohol dependence is based upon knowledge of chemical dependency as a progressive and ultimately life-threatening disease. Patients are taught how to manage their disease through an abstinence-based lifestyle and involvement in a 12-step support group, such as Alcoholics Anonymous. Treatment may begin at the inpatient, residential or intensive outpatient level of care. For an appointment with a Shepherd Hill assessment nurse, patients may call (740) 348-4877, or toll-free (800) 223-6410. They also may ask their physician to make a referral.

Two medications that have emerged as standouts for treating drug addiction are Suboxone® and Vivitrol®, which are prescribed after a patient has “detoxified,” or stopped using mood-altering substances long enough to clear them out of the body’s tissues. Both medications are available only by a physician’s prescription.

Richard N. Whitney, M.D., is Medical Director of Shepherd Hill, the behavioral health department of Licking Memorial Hospital. He explained how the two medications work. “Suboxone is a weak form of opioid, so it satisfies the body’s dependence on many drugs, without the individual getting high or suffering withdrawal and physical cravings,” Dr. Whitney said. “Frequent visits to the physician are necessary because Suboxone requires medical supervision to find the correct dosage for each individual. The patient must be careful to take Suboxone tablets or films by dissolving them under the tongue at the same time each day.”



Shepherd Hill’s treatment plans for alcohol and drug addiction are customized for each individual. Many patients have achieved long-term sobriety through medications designed to suppress the cravings that can trigger a relapse.



Licking Memorial Health Systems

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Health Tips – Helping Someone Who Has an Addiction

- Drug and alcohol addiction are diseases that are often progressive and fatal. By encouraging a friend or loved one to seek treatment, you may prevent their permanent disability or death.
- Addicted individuals' perception of their use of alcohol and other mood-altering drugs is distorted. They truly believe that they do not have a problem, despite continual adverse consequences, such as embarrassing behaviors and problems with their health, relationships, and occupations. They also mistakenly believe they can quit using alcohol and other drugs whenever they choose.
- Treatment of alcohol and drug addiction works, and permanent remission of these diseases is possible. Treatment does not need to be voluntary to be effective. The outcomes are similar for those who enter treatment voluntarily as well as for those who are under legal or other pressure to do so.
- Effective treatment addresses medical, social, psychological, occupational and legal problems.
- Support from family and friends increases the chance of treatment success.
- Despite common misconceptions, addiction happens at all income and education levels, to both men and women, and to all ethnic groups and cultures.
- If you have questions about arranging an assessment for a friend or loved one whom you believe may have an alcohol or drug abuse disorder, you may contact Shepherd Hill at (800) 223-6410, or (740) 348-4877, or by e-mail at info@shepherdhill.net.