



## Licking Memorial Health Systems

1320 West Main Street  
Newark, Ohio 43055

Please take a few minutes to read this month's report on **Behavioral Health Care**.

You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!

Visit us at [www.LMHealth.org](http://www.LMHealth.org).

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TRUVEN HEALTH ANALYTICS

**100 TOP HOSPITALS**

2013



## Quality Report Card 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 continuous adverse consequences, such as repeated embarrassing behaviors, relationship, occupational, or health problems. 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 use disorder, you may contact Shepherd Hill at (800) 223-6410 or (740) 348-4877, or by e-mail at [info@shepherdhill.net](mailto:info@shepherdhill.net).

# Behavioral Health Care – How do we compare?

Check out our Quality Report Cards online at [www.LMHealth.org](http://www.LMHealth.org).

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 2010	LMH 2011	LMH 2012	Goal
Psychiatric readmissions within 31 days	4.0%	5.1%	0.9%	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 2010	LMH 2011	LMH 2012	Goal
Patients remaining abstinent	76%	88%	89%	greater than 85%
Improvement in quality of relationships	93%	92%	93%	greater than 85%
Improvement in overall physical and mental health	90%	95%	94%	greater than 85%
Improvement in overall quality of life	90%	90%	91%	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 2010	LMH 2011	LMH 2012	Goal
Average length of stay – alcohol treatment	2.5 days	2.7 days	2.5 days	less than 3 days
Average length of stay – opiate treatment	2.6 days	2.6 days	2.5 days	less than 4 days
Average length of stay – tranquilizer treatment	3.1 days	2.7 days	2.4 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 2010	LMH 2011	LMH 2012	Goal
Diagnosis/disease education provided for patients and/or family	100%	99%	99%	greater than 95%
Medication education provided for patients and/or family	99%	100%	99%	greater than 97%

**5** Family participation is an important component in patients’ recovery. For continuity of care, a licensed professional clinical counselor or a 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 2010	LMH 2011	LMH 2012	Goal
Social work/family meeting during patient stay	93%	88%	84%	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 2010	LMHP 2011	LMHP 2012	Goal
Appropriate testing complete for patients taking valproic acid (such as Depakote)	96%	94%	95%	greater than 90%
Appropriate testing complete for patients taking lithium (such as Lithobid)	97%	94%	94%	greater than 90%

# Patient Story - "James"

As "James" (not his real name) listens intently to new group members at the Shepherd Hill treatment center talk about their personal struggles with drug and alcohol addiction, he can relate to each experience. Seven years ago, James was in their place with similar feelings of hopelessness and loss of control, and he also gained comfort by talking with others who had beat addiction, themselves. "There are feelings that you know only if you are an alcoholic or addict," he said. "Addiction is a terrible place to be in your life."



James' life began to turn around after he received treatment for alcohol addiction at Shepherd Hill.

Thirty years of James' life was spent alternately drinking and trying to quit. Now he is newly retired as a local plant manager, and has been sober for seven years – an accomplishment he credits to the staff at Shepherd Hill, which is the Behavioral Health Department of Licking Memorial Hospital (LMH). He demonstrates his gratitude by volunteering to help facilitate group sessions.

James' own narrative of alcohol addiction began while he was a teenager in Cincinnati. He wrestled in high school, and continued to compete at Xavier University. "While I was in training, I did not drink very much," he remembered. "However, in the off season, I drank heavily. Then, after college, it got worse."

Six months after graduating from college, James got married, and he and his wife soon began a family. He landed a job as the public works director of a small town in southern Ohio. "It was a blue collar town where people were hard workers and hard drinkers," he said. "I would often go straight to a bar after work."

Drinking soon became a point of contention between James and his wife. "I knew I had a problem, but I did not think it was a big problem. There had been no bad consequences for me, yet," he explained. However, when a coworker who was an AA member spoke to him about the organization, James decided to attend a few meetings. He was sober for a short time, but gradually resumed drinking. "Everything we did in that town involved alcohol," he said. "Lots of young couples lived there, and there was alcohol at every gathering."

Eight years later, James and his wife had their third child. His wife urged him to quit drinking, so he rejoined AA and stayed sober for six weeks. Unfortunately, the addiction proved to be stronger than his resolve, and he began drinking again.

James' drinking eventually led to the downfall of his marriage, and his wife told him that she wanted a divorce. "That was a wake-up call for me for a little bit," he said. "But then, I realized that now I could drink through the week whenever I wanted, and see the kids on weekends. I was a pretty selfish person. I thought I was a good father, but my relationship with my kids started falling apart. You could find me in a bar every night after that."

James was able to perform adequately at work, but he felt that his life was in a downward spiral. He checked into a rehabilitation center in Kentucky briefly, but did not stay. He entered another rehabilitation center in Kentucky at a later time, and stayed for 14 days. He remained sober for nearly four months, but then relapsed again. "I went back to work. I was single and messing around with friends who were alcoholics. I moved out into the country where it was more private, and I started drinking even more."

The alcohol took a toll on James' body, and his family physician explained that his kidneys and liver were developing damage. James refused to return to one of the rehabilitation centers, so his physician agreed to prescribe medication to control withdrawal symptoms while James tried to quit drinking on his own.

During the withdrawal period, James began to hallucinate, and thought he saw an intruder in his house. He shot the "intruder" six times and ran to a neighbor's home for help. A search of his house

revealed that the "intruder" had not been real, but the six gunshots were, and he was arrested and found guilty of shooting a firearm while intoxicated, a misdemeanor offense. James was then asked to retire from his city position after 30 years of service. "Fortunately, I had a pension, so I went home and tried to stay sober," he said. "But I had lots of time on my hands. Even though I had lost my family and job, and wrecked vehicles, I still went back to drinking."

In 2005, James had another auto accident. He said, "My car and an oncoming car sideswiped each other. The other driver and I were both drunk." The two drivers ended up in a fist fight, and James was arrested a few days later. "I had hit bottom, I was getting drunk twice a day, and I could not look myself in the mirror. I did not care if I lived or died," he said. Fearing for her son's life, James' mother researched Shepherd Hill and recruited some friends to get him there. "My buddies came to my house and said, 'Get up and get dressed!' I was not going to let them in the house, but they let me know that they were prepared to break the door down," James recalled. "It was a long drive up to Newark, and I had never felt that low in my life."

But as he stepped in the doorway at Shepherd Hill, things began to turn around for James. He said, "You could tell the staff genuinely cared about you. I had a feeling that I was where I needed to be. Through their care and education, I realized that I was powerless against my addiction, and I opened up my mind to learning."

After meeting with counselors who helped him create a treatment plan, James spent a couple of days in a detoxification program with medication to control his withdrawal symptoms. He then spent the remainder of 10 weeks in addiction education, counseling, group sessions and AA meetings.

"It was fantastic! With education, I learned to accept my disease, and learned that it could be treated," James said. "The moment that was the real turning point for me was two weeks into the treatment. I was praying in the chapel, and I asked God to take the addiction away. A feeling came over me, and I realized soon after that the compulsion to drink was gone. I had never felt anything like that before. It was incredible, and I knew that everything was going to be alright."

Part of James' treatment plan included getting a job after he left Shepherd Hill. A fellow patient introduced him to the owner of a local business who offered him a management position. Three years later, James married another former Shepherd Hill patient, who understands his past struggles.

*Patient Story – James (continued on next page)*



“My life has come back together. I have a wonderful wife, my kids came back, and I am closer to them now than I have ever been,” James said. “It is a shame that I wasted so many years, but the last seven years have been the best of my life!”

James has a challenge that he gives others who may not admit that their drinking has become a problem. “If you do not have

a drinking problem, quit for a year. If alcohol is not that important in your life, you should be able to quit for a year.”

James has a new perspective on caring for his physical and mental health. The former wrestler has taken up bodybuilding, and still attends three AA meetings each week to continue learning and maintaining his sobriety.

## Heroin Joins Local List of Commonly Abused Drugs

Many local residents believe that Licking County is sheltered from the drug and alcohol abuse problems that face other American cities. However, Addiction Medicine Physician Richard N. Whitney, M.D., witnesses cases every day at the Shepherd Hill treatment center in Newark that prove otherwise.

Dr. Whitney is the Medical Director of Addiction Services at Shepherd Hill, the Behavioral Health Department of Licking Memorial Hospital (LMH). In recent years, he has seen a shift in the types of substances being abused locally. “Law enforcement agencies and pharmaceutical manufacturers have made a dedicated effort to curtail misuse and abuse of prescription pain-killers. The success of their efforts has had an unintended consequence – the re-emergence of heroin use, nationwide. At Shepherd Hill, we are seeing an increase in patients who require treatment for heroin addiction. As prescription pain-killers became less available, many addicts turned to heroin, which is also an opioid, and is inexpensive and easily available. Unfortunately, it is also extremely addictive and dangerous,” Dr. Whitney said.

Licking County’s resurgence of heroin use is confirmed by LMH Emergency Department (ED) physicians. “We see cases of substance abuse daily,” said Randy E. Jones, M.D. “The most commonly abused substances we see in the LMH ED are alcohol, prescription narcotics, marijuana and heroin. The cases may involve patients who come in looking for help in treating an addiction, as the result of an accident they sustained while under the influence, or as the result of an altered mental state that was noticed by others who called the emergency medical squad.”

Licking County’s rate of drug and alcohol abuse closely aligns with national rates. “It is estimated that 12 to 14 percent of Americans will be diagnosed with a substance abuse disorder at some point in their lives, and that is approximately the same level of abuse we see locally,” Dr. Whitney stated. “We cannot identify one particular community or socioeconomic status that is at higher risk than others because drug and alcohol use affect all groups. What we do know is that the onset of abuse often begins at a young age – from the teens to the early 20s – and that there is a large spike in heroin use in the 17- to 20-year-old age range.”

“Alcohol is still, by far, the most commonly abused substance in Licking County and the U.S.,” Dr. Whitney added. “As a comparison to another medical disease, diabetes affects 10 million Americans, and alcohol use disorders affect nearly 14 million.”



Information about Shepherd Hill’s services is available by calling (740) 348-4877, or toll-free at (800) 223-6410, or by visiting online at [www.ShepherdHill.net](http://www.ShepherdHill.net).

Dr. Whitney explained that, unlike abuse of prescription or illegal drugs, alcohol abuse and addiction are more difficult for patients to understand. “Because alcohol is legal and socially accepted as a recreationally and socially used beverage, many patients with alcohol use disorders do not understand the difference between social drinking, alcohol abuse and alcoholism. At Shepherd Hill, we educate patients that alcoholism is a chronic brain disease that can be effectively treated. In general, alcohol consumption becomes ‘too much’ when it causes repeated alcohol-related problems or complicates the management of other health problems.

According to the National Institute on Alcohol Abuse and alcoholism, men who drink five or more drinks in a single occasion, or more than 14 in a single week, are at increased risk for alcohol-related problems. For women, the risk increases for those who drink four or more drinks in a single occasion, or more than seven in a single week. Drinking at even lower levels may also be problematic, depending on many factors, such as age, co-existing medical or psychological conditions, and use of medications.”

Some indications that an individual’s alcohol consumption needs to be professionally evaluated can be found through the following questions:

- Do I feel the need to cut down on my drinking?
  - Do I feel annoyed by others’ criticism of my drinking?
  - Have I had guilty feelings about my drinking?
  - Have I needed a morning “eye-opener” to start the day?
- Anyone who answers “yes” to two or more of these questions may have an alcohol-related disorder and should visit a qualified healthcare practitioner.

Shepherd Hill’s treatment for drug and alcohol dependence is based upon knowledge of chemical dependency as a progressive and ultimately life-threatening medical disease. Patients are taught how to manage their disease through an abstinence-based lifestyle and involvement in the program of Alcoholics Anonymous and other Twelve-Step support groups. Family members and friends receive education about the disease and the effects that the disease has had on their lives. The goal is to match the intensity of treatment with the severity of illness to ensure individualized care. Treatment may begin at the inpatient, residential, or intensive outpatient level of care, depending on the patient’s need. Patients are continuously assessed to determine when they can be safely transitioned to a less intense level of treatment. For an appointment with a Shepherd Hill assessment nurse, patients may call (740) 348-4877 or toll-free at (800) 223-6410, or they may request a referral from a physician.