

Missouri Division of Behavioral Health

Bulletin Number: FY 19 - 049	COMMUNITY TREATMENT BULLETIN	Effective Date: November 1, 2018
New	Subject: Addressing Physical Health Needs of Assertive Community Treatment (ACT) Clients	Number of Pages: 2

1. Programs Affected

- 1.1 Community Mental Health Center Healthcare Homes (CMHC HCH), Assertive Community Treatment (ACT) teams, and Assertive Community Treatment/Transition Age Youth (ACT/TAY) teams.

2. Background and Purpose

- 2.1 This bulletin **replaces** the following memo: HCH Nurse Care Manager Responsibilities (with ACT Clients) dated March 2, 2012.
- 2.2 Effective November 1, 2018, Assertive Community Treatment and Assertive Community Treatment/Transition Age Youth will be referred to collectively as ACT.
- 2.3 This bulletin is to provide direction for addressing the physical health needs for ACT clients.
- 2.4 The DBH does not mandate enrollment of ACT clients in HCH. The agency has the discretion to make the decision on how to adequately meet the healthcare needs of ACT clients. The agency may choose to enroll some ACT clients in HCH and not others.
- 2.5 The healthcare needs of ACT enrolled clients can be addressed within two models:
 - 2.5.1. The ACT client can be enrolled in both ACT and HCH; or
 - 2.5.2 The ACT client is solely enrolled in ACT.

3. Model One: Clients Enrolled in Both HCH and ACT

- 3.1 The ACT client must have eligible Medicaid coverage and meet HCH eligibility requirements to be enrolled in HCH. HCH reporting requirements must be met, including but not limited to: annual health screen, metabolic syndrome screen, and medication reconciliations completed within 72-hours of hospital discharge.
- 3.2 The agency has a written policy for when ACT clients are to be admitted to and discharged from HCH.
- 3.3 A HCH nurse care manager (NCM) is assigned to an ACT team.
- 3.4 Both nurses are cross-trained on the other's program, with job shadowing preferred, to ensure a good general understanding of both programs and the respective nursing roles in each.

- 3.5 The NCM attends ACT daily meetings on a regular basis, at least weekly, and both nurses communicate frequently.
- 3.6 Nursing roles and activities are clearly defined between the two nurses to ensure activities are not duplicated. This includes, but not be limited to, annual health screens, metabolic syndrome screenings, and medication reconciliations for clients experiencing a care transition. The ACT nurse is still expected to do a medical/nursing assessment as part of the ACT comprehensive assessment, and then update that on an ongoing basis as it may change.
- 3.7 The ACT nurse is trained in CareManager, but the HCH NCM typically will play the primary role in identifying persons with insufficiently managed chronic health conditions and collaborating with the ACT nurse to schedule actionable interventions.
- 3.8 Team care consultations of ACT clients with the HCH Primary Care Physician Consultant (PCPC) occur as needed.
- 3.9 The NCM and/or PCPC leads in providing education and training on management of chronic health conditions to all ACT staff.

4. Model Two: Clients Enrolled Only in ACT

- 4.1 The ACT nurse is trained in and has significant expertise in using CareManager. The ACT Team Leader and Program Assistant are also trained in CareManager.
- 4.2 The ACT nurse uses CareManager to identify persons with poorly managed chronic health conditions, so that actionable interventions can be scheduled.
- 4.3 The agency has a written policy for how ACT clients with specialized health care needs and conditions get access to consultation by a primary care physician or other specialists when necessary.
- 4.4 The agency has a written policy for how the ACT nurse and other ACT team members access training and education on the management of chronic health conditions.
- 4.5 The agency has a written policy for how metabolic syndrome screenings are tracked and completed for ACT clients who meet the requirements for a metabolic syndrome screening, and how the data is entered into CareManager.
- 4.6 If the agency enrolls some eligible ACT clients in HCH, but not others, the agency has a written policy for eligible ACT clients to be admitted to and discharged from HCH.