

Providing Hope and Recovery

Bridgehaven, Inc., or Bridgehaven Mental Health Services, has served adults with severe and persistent mental illness (SMI) since 1958. Our mission is to provide the highest quality community-based psychiatric rehabilitation and recovery services, education, and support to those living with mental illness. The agency provided the first program in Jefferson County, and one of the first in the country, to help clients reintegrate into the community after being discharged from a psychiatric hospital.

Bridgehaven has secured and maintained accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) since 2001. Most recently, our 2019 CARF Survey resulted in no recommendations, which is an accomplishment only 3% of CARF accredited facilities achieve in a given year. Our accredited programs include: Adult Outpatient Mental Health Services and Psychosocial Rehabilitation/Community Integration.

Bridgehaven's psychiatric rehabilitation and recovery services incorporate a "clubhouse" model designed to promote community integration. We serve almost 500 unduplicated clients (clients of Bridgehaven prefer to be called "members") per year with severe and persistent mental illnesses. The Bridgehaven model is a multidisciplinary and multimodal approach that provides an array of services.

- Clinical Groups & Counseling
- Skill Building
- Peer Support Services
- Outreach & Socialization
- Supported Employment Services (IPS Model)
- Medication Management
- Integrated Behavioral Health
- Primary Health Care
- Cognitive Enhancement Therapy
- Comprehensive Community Support

In 2020, we completed an expansion project which would have allowed us to expand our services and program attendance by 25%; however, due to the pandemic, the newly renovated space instead allowed us to maintain existing programming while adhering to COVID safety protocols of social distancing and reducing the chance of outbreaks. We look forward to the time when we can fully utilize this new space as intended to bring more services to our surrounding community and the Metro Louisville Area.

Bridgehaven programing is data driven, meaning that we rely on the data collected about service effectiveness, to both provide existing services and to determine other services that may be needed. We are very proud of the impact of our services on psychiatric hospitalizations and on homelessness, described outcomes of our health and wellness clinic, and post-discharge input from our members about the quality of their lives.

Table A: Impact of Program on Psychiatric Hospital Days Used						
Fiscal Year	Hospital Days pre-Program	Hospital days post-program	Total Days Reduced	Cost Savings¹		
2016	188	60	128	\$153,600		
2017	481	88	393	\$471 , 600		
2018	569	29	540	\$648,000		
2019	182	31	151	\$181,200		
2020	92	1	91	\$109,200		
Total	1512	209	1303	\$1,563,600		

Based on average per hospital day cost community norm (\$1,200/day)
Source: Electronic Medical Record

Members experience fewer psychiatric hospitalizations (and fewer days in re-hospitalization) and decreased homelessness compared to the six months prior to their participation in Bridgehaven programming (Table A). Our annual hospitalization study shows an 86% reduction (1,303 days) in inpatient psychiatric treatment days, representing a savings of \$1,563,600 to the Commonwealth.

Bridgehaven services contribute to reduced homelessness among its members (Table B) by stabilization psychiatric symptoms. From 2016 to 2020, Bridgehaven served 79 homeless individuals. During this period, an average of 85% of the participants obtained and/or maintained housing.

Table B: Homelessness Pre/Post Program Participation					
Fiscal Year	# previously homeless	# homeless during program	Housing maintenance rate		
2016	17	4	76%		
2017	20	3	85%		
2018	25	1	96%		
2019	10	3	70%		
2020	7	1	86%		
Total	79	12	85%		
Source: Electronic Medical Record					

Also important to quality of life is health status. **Our Bridges to Health Clinic and Wellness Program** (Table C), It emphasizes improving coordination of care with Primary Care Providers and empowering members to be their own health advocates. Participants are encouraged to take medications as prescribed for such chronic diseases as hypertension and diabetes and are encouraged to adopt healthier eating and exercise habits. Our goal is for members to be active, thriving members of the community who are knowledgeable about their health and health challenges.

Table C: Bridges to Health Clinic and Wellness Program Outcomes (Calendar Year 2019)						
Obesity	Primary Care Access	Diabetes	New Groups			
Intervention Exercise group and YMCA Memberships; Healthy Cooking and Food for Thought groups.	Intervention Members working with Peer Support Specialists/Health Advocates navigate PCP appointments to assist in advocacy and communication.	Intervention Group instruction on diet and lifestyle, diabetes management along with blood sugar moni- toring.	Intervention Per member feedback, groups/ services were added to meet the perceived needs of Clinic Participants.			
Outcomes 81 members participating in the YMCA group lost 171 pounds; Average BMI decreased from 35.0 to 30.5 for these members.	Outcomes 175 total PCP and specialist visits for 30 members with the most complex co-morbidities. Specif- ically, two members had cancer diagnoses caught early enough to prevent the need for much more costly care/treatment.	Outcomes Average fasting blood sugar readings have improved from 211 to 175 for members participating in this group.	Outcomes Medication Education; Food for Thought II; Mindful Eating; Indi- vidual Consultation with APRN for nutrition; Coping with Chronic Illness.			

Our service cost per person per day is low, but our emphasis is on improving our members' quality of life and reducing the impairments resulting from severe mental illness. Members and referral sources trust our program to help individuals with severe and persistent mental illness (SMI) successfully accomplish recovery and community integration goals. Our intent is for members to overcome co-occurring physical health issues, lead healthy lives, remain in the community, and enjoy a satisfying life after leaving Bridgehaven's program. We are proud of these outcomes, and we practice continuous performance improvement in all areas of the agency, including fiscal management and fundraising.

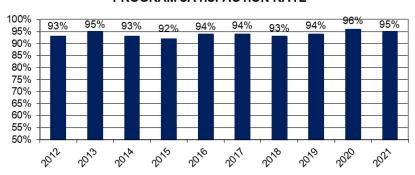
Table D: Access Timelines

Fiscal Year	% Scheduled within 7 days of intake call
2016	97%
2017	95%
2018	84%
2019	93%
2020	92%*

Our rate in FY2019-2020 was 94%*; however, due to the pandemic, we had to transfer intake calls to telephonic and telehealth media which lowered our response rate while we were making this transition.

Table E. Program Satisfaction

PROGRAM SATISFACTION RATE



In closing, it is important to note that recovery from severe mental illness is rarely linear. It is human nature to try to assign a linear trajectory to "getting better" from any illness because that makes sense to the way our brain likes to process information. You have an illness, you go to the doctor, you are started on a treatment, and you see progress – hopefully, you are cured or you recover from that illness. Insurance services also assume that recovery from illness is linear and looks for progress in order to approve the next treatment protocol. Services that must be pre-authorized ask about projected length of treatment, expectation of when the service will be successful and when the treatment can be discontinued. Recovery from mental illness is sometimes cyclical; sometimes it looks like a wave length with highs and lows, and sometimes it might look like a line with very sharp peaks and valleys. Successful treatment of mental illness requires professionals to use the best evidence-based practice at the most appropriate time. The staff at Bridgehaven, and many other treatment facilities across the state, strive to meet our clients where they are in their "journey" as it relates to mental illness. There is no "one size fits all method" and we must be prepared for the cyclical nature of recovery. Ben Jaggers, a former member of Bridgehaven and current Adult Peer Support Specialist, is here to discuss his personal journey to recovery.

We would be pleased to have any legislative or staff member of the KY General Assembly come visit us at Bridgehaven and have the opportunity to speak with our members and staff. If you are interested, please contact Stewart Bridgman, Chief Executive Officer or Brad Leedy, Chief Operating Officer at 502-585-9444 or by email: SBridgman@bridgehaven.org or BLeedy@bridgehaven.org.