






Discharge Resources for City Emergency Departments (EDs)

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Catherine E. Pugh
Mayor, Baltimore City

Leana S. Wen, M.D., M.Sc.
Commissioner of Health, Baltimore City

@Bmore_Healthy 
@DrLeanaWen 
BaltimoreHealth 

health.baltimorecity.gov

ED Best Practices for Discharge

- 1) All patients will be assessed for accommodations suitable for a safe discharge.
 - a. If the accommodations are not suitable for a safe discharge, then a social work or case manager consult must be called.
- 2) All patients will be assessed for transportation to their discharge location.
 - a. If transportation is not readily available, assistance will be provided.
- 3) All patients will be discharged with adequate outerwear, clothing and/or shoes for the expected weather exposure.
- 4) All hospitals should provide their ED staff members annual training on the following topics:
 - Homelessness including the location and limitations of shelters or services for those who are homeless
 - Addiction and mental health resources including the 24/7 hotline for addiction and mental health - 410-433-5175
 - Trauma-informed care if available.



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Shelter Information

List of Emergency Shelters*: <http://bit.ly/outreachcard>

Winter Shelter Information: <http://bit.ly/baltwintershelter>

- During temperatures of 32° F or colder, **overflow shelters** will open.
- Individuals experiencing unsheltered homelessness can access overflow shelter and transportation through these two hubs:

	Adult-Only Household	Families with Minor Children
Shelter	Weinberg Housing and Resource Center	Sarah's Hope
Address	620 Fallsway	1114 N Mount Street
Phone	443-478-3777	410-396-2204
Capacity**	275 beds	131 beds
Intake Hours	8 am – 4pm	9 am-3pm

Arrive by **6pm** to allow sufficient time for transportation to overflow shelter facilities and dinner service. Transportation to overflow shelter will be available until **11pm**.

**Please call before referring a patient to a shelter to see if beds are available.*

*** This is the capacity for these two shelters. During Winter Shelter, overflow shelters facilities will open.*



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Homeless Client Checklist

- Please use the following checklist as a guide to determine whether the patient will be appropriate for discharge to a homeless shelter.

The following checklist was developed by the High Utilizer Task Force for hospitals. The checklist is to be used as a guide to determine whether or not it is appropriate to discharge a patient to a homeless shelter. If "No" is checked, there is a greater likelihood that the patient will return to the hospital.

Functional Criteria

Activities of Daily Living:	Yes	No
Able to bathe and maintain oral hygiene		
Able to dress oneself		
Able to feed oneself		
Able to manage bowel/bladder continence independently		
Able to relocate from a seated position to bed or toilet		
Able to independently use any necessary medical equipment		
Able to self-administer insulin/monitor insulin levels		
Able to manage catheters (indwelling or external)		
Client does not require intensive physical rehabilitation, convalescent care, or a skilled nursing facility		

Mental Health Criteria

Criteria	Yes	No
Stable enough with mental health symptoms to exist in a group living environment without creating risk or disruption.		
Assessed for suicidality and does NOT demonstrate intent to kill themselves disorders		
Cognitive abilities, including memory impairment, do not prevent them from living in a group environment without creating risk or disruption		

Special Considerations

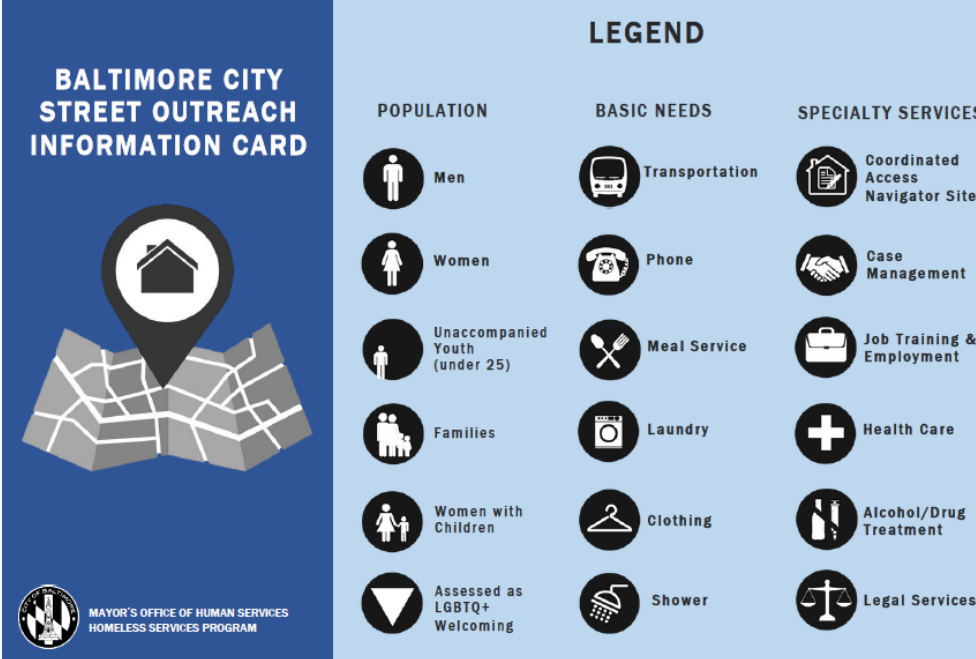
- A shelter may not be appropriate for an immunocompromised patient due to crowded conditions and close proximity to others who may have poor health conditions
- Clients who arrive without proper medications will be received; however this may increase the likelihood of the client re-entering the Emergency Room.
- Clients who require special diets must arrive with proper documentation stating the restrictions signed by a physician



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New Homeless Street Outreach Card



**BALTIMORE CITY
STREET OUTREACH
INFORMATION CARD**

MAYOR'S OFFICE OF HUMAN SERVICES
HOMELESS SERVICES PROGRAM

LEGEND

POPULATION	BASIC NEEDS	SPECIALTY SERVICES
 Men	 Transportation	 Coordinated Access Navigator Site
 Women	 Phone	 Case Management
 Unaccompanied Youth (under 25)	 Meal Service	 Job Training & Employment
 Families	 Laundry	 Health Care
 Women with Children	 Clothing	 Alcohol/Drug Treatment
 Assessed as LGBTQ+ Welcoming	 Shower	 Legal Services

To view resources from the Mayor's Office of Human Services, visit: <http://bit.ly/outreachcard>



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24/7 Phone Hotline for Addiction & Mental Health

- Call if need of mental health or substance use treatment
- Call if need of immediate crisis services
- For more information, visit <http://bit.ly/CIRline>



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Opioid Crisis Service Unit

- Urgent/Walk-in screening and referral 24 hours a day at the Gaudenzia, Park Heights location.
- Inpatient stay for up to 96 hours with referral to another level of care.
- Evaluation for Medication Assisted Treatment (MAT), Buprenorphine induction, and linkage to community services for follow-up care
- 12 Beds

Call (443) 453-9075 from 8 am – 9 pm
Call (443) 308-8900 from 9 pm – 8 am



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ED Best Practices for Patients with Opioid Use Disorder

Patients with an opioid use disorder should receive the following upon discharge:

- Baltimore City Standing Order Prescription
- Information about harm reduction practices, overdose response, and Baltimore 24/7 behavioral health hotline
- Two doses of naloxone if available.
- Offer patient an opportunity to watch the overdose response and naloxone training video at www.dontdie.org.



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