

Meaningful Connections to Minimize Corrections: Implementation of a Multi-Site Outreach Clinic in Rural Ohio

John Henning, MD¹, Shafi Lodhi, MD¹, Christopher Marett, MD, MPH¹

¹University of Cincinnati Department of Psychiatry & Behavioral Neuroscience, Cincinnati, OH

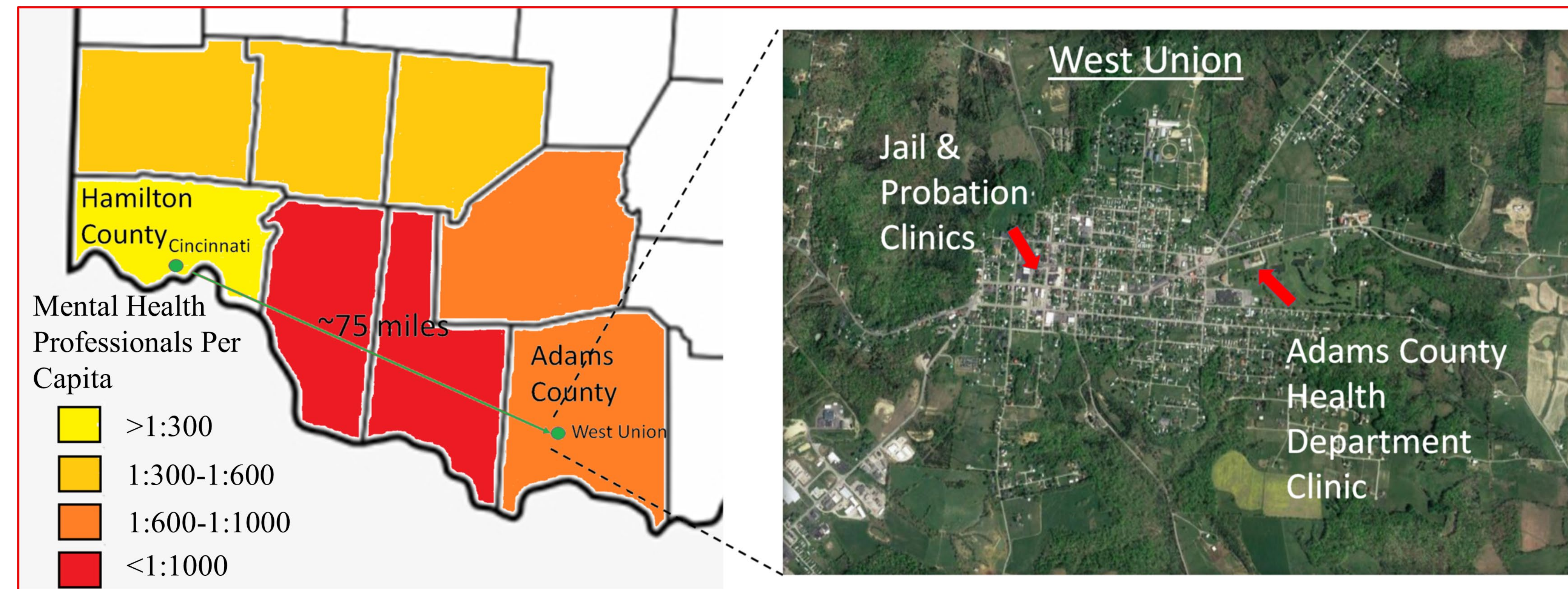
Background

- There is increasing appreciation of the relationship between psychiatric illness, addiction, and criminal recidivism. Yet local leaders often face a shortage of psychiatrists and facilities to meaningfully intervene.
- Jail and probation populations represent a crucial point of contact to reach patients who are otherwise unlikely to engage in mental health treatment
- Many rural Ohio counties do not have ANY board-certified psychiatrists (1)
- Correctional facilities are the largest de-facto psychiatric facilities in Ohio, but struggle to recruit psychiatrists (2)
- 85% of corrections representatives reported difficulty in recruiting mental health professionals (3)
- Adams County, Ohio has a population of approximately 27,600 with two practicing psychiatrists.
- Meeting local needs means being innovative and flexible in our means of outreach and train psychiatric residents to foster skills and comfort to practice in these areas

County	# MH professionals (including SW) ⁽⁴⁾	MHP Per Capita
Adams	40	1:690
Hamilton	3043	1:270
Brown	31	1:1410
Clermont	207	1:990
Butler	870	1:440
Warren	533	1:440
Clinton	101	1:420
Highland	40	1:1080
Cuyahoga	4728	1:260
Franklin	3948	1:330
Wood	222	1:590
Montgomery	1400	1:380

References

1) Beck A, Page C, Busche J, Rittman D, Gaiser M. (2018). Estimating the Distribution of the U.S. Psychiatric Subspecialist Workforce.
 2) Johnson, A. (2015, April 19). Ohio's prisons hold 10 times as many mentally ill as its psychiatric hospitals do. The Columbus Dispatch.
 3) Morris, N. P., & West, S. G. (2020). Misconceptions About Working in Correctional Psychiatry. The Journal of the American Academy of Psychiatry and the Law, 48(2), 251–258. <https://doi.org/10.29158/JAAPL.003921-20>
 4) County health rankings & Roadmaps. (2020). Retrieved March 16, 2021, from <https://www.countyhealthrankings.org/app/ohio/2020>



Methods

- Three clinic locations have been established:
 - ❖ Adams County Jail
 - ❖ Adams County Probation Department
 - ❖ Adams County Health Department.
- Video visits are conducted using Zoom Professional; medical records kept in University of Cincinnati Epic EMR
- Advanced Psychiatry Residents rotate on service and see patients with active concurrent supervision by an attending psychiatrist with forensic training
- Clinic logistics are managed locally by health department staff and Community Coordinators, in conjunction with the Health Department physician
- Funding is from monies allocated to mental health initiatives from local government as well as billing insurance

Cultural Considerations

- Wide spectrum in lifestyle between town and more remote rural living
- Edge of Appalachia
 - “Off the grid” living or in cabins/tents with limited electricity, running water, etc.
 - Appreciation and pride in nature
- “Small World” concerns
 - Often treating several patients in the same family, or couples
 - “Everybody knows everybody”
- Significant Amish population with unique attitudes towards psychiatry and the law
- Farming is a way of life
 - Even if not working on a farm, many born and raised on one, or tangentially connected to farm life

Results

- All Clinics began week of October 14th 2020, effectively more than doubling the number of psychiatrists and increasing clinic locations from 1 to 4
- 132 Total Patient Visits
 - 63/132 at Adams County Health Department
 - 41/132 at Adams County Jail Clinic
 - 28/132 at Probation Clinic
- 21 patients have had 2 or more follow up visits
- General Trends:
 - Significant comorbid substance use, particularly methamphetamine and opioids throughout all three clinic settings
 - High frequency and magnitude of childhood trauma

Conclusions

- The Adams County Outreach Clinic has been successfully initiated and represents an innovative way to meet an urgent need in rural communities
- The model engages residents to become adept in treating patients with complex dual diagnoses and in managing the interplay between mental illness, substance use disorders, and the correctional system.
- This model can serve as a hub for research and innovation in the area of rural & forensic outreach with the aim to be reproducible in similar settings throughout the country



Future Directions

- Continue to collect data to inform treatment and justify continued public investment in mental health and ensure sustainability, with particular focus on retention and mitigating recidivism
- Incorporate Child & Adolescent Psychiatry
- Gather ongoing resident feedback and maintain resident involvement
- Regular meetings with local stakeholders
- Advocate for and utilize local resources & initiatives (e.g. vocational rehabilitation)