



MACOMB COUNTY

COMMUNITY MENTAL HEALTH

Subject: Clinical Practice	Procedure: Outreach to Persons Served	
Last Updated: 03/17/2025	Owner: MCCMH Clinical Department	Pages: 4

I. PURPOSE:

To provide operational guidance to Macomb County Community Mental Health (MCCMH) directly operated and contract providers who conduct outreach to persons served when an unplanned discharge occurs or an initial or follow up appointment is missed.

II. DEFINITIONS:

- A. Established/Current Person Served
An individual receiving services through MCCMH who is authorized for services and has participated in treatment with a primary provider within the MCCMH network.
- B. Missed Appointments
An appointment scheduled but not attended or rescheduled by a person served.
- C. Prospective/New Person Served
An individual seeking services through MCCMH who is not currently authorized for services and has not yet participated in treatment with a primary provider within the MCCMH network.
- D. Service Provider
An agency or organization directly operated or under contract with MCCMH to deliver services to persons served.
- E. Unplanned Discharge
When a person served terminates services before a comprehensive transition plan can be developed and/or completed.

III. PROCEDURE:

- A. When an unplanned discharge occurs, MCCMH team members make every available effort to develop and complete a discharge/transition plan for the person served to ensure continuity of care.

- B. MCCMH team members document in chart notes all attempts to re-engage the person served in the person's electronic medical record (EMR).
- C. Attempts to re-engage a person served in services and supports may include:
 - 1. Attempts to locate the person at their last known residence by phone;
 - 2. Sending an outreach letter; and
 - 3. Attempts to contact the person using all available resources and stage wise treatment matching interventions (based on the person's current stage of change).
- D. Persons served leaving services against treatment advice (ATA) are provided education regarding the risks associated with an early discharge, and this is documented in progress notes in the EMR.
- E. When a **newly referred individual** misses their **first** scheduled appointment:
 - 1. Within the **first seven (7) days**:
 - a. An initial call is attempted within twenty-four (24) calendar hours of the missed appointment, ideally at the time of the missed appointment.
 - b. At least two additional calls are attempted and documented in the person's FOCUS EMR. Calls should be made at varied times, and if feasible, at times associated with previous successful contacts.
 - c. For individuals whom the missed appointment is the initial intake/onset of services, an Adverse Benefit Determination Notice (Due Process Adequate Notice) of case closure is mailed to the individual within twenty-four (24) hours of providing the information on the missed appointment and dates and times of outreach attempted, with the information on how to re-engage in services detailed. An appointment should be offered in this communication to re-engage, in the event the individual does not have the means to re-engage by phone.
- F. For person served who are **established** and have been in service, the following apply:
 - 1. Two (2) phone calls will be made at varied times to engage the person served.
 - 2. An Outreach Letter is sent to the person served after seven (7) days of attempting to reach them. The letter should include a date of face-to-face contact, a drop by appointment date/time/location, or a day/time to expect a phone call.
 - 3. Adverse Benefit Determination (Due Process Advance Notice) is mailed to the person served at least ten (10) days before the date the case will be closed.

This Notice must include all relevant outreach information that has occurred to date. The Due Process Advance Notice period will end on day thirty (30) from the missed appointment.

- G. The person's record can be closed after a thirty (30) day engagement process has been completed without any contact made by the person served.
- H. A discharge summary is completed in the EMR to close the person's record.
- I. The discharge summary will be provided to the person served by mail if contact information is available.
- J. A discharge plan may include but is not limited to:
 - 1. Instructions to maintain support and treatment outcomes;
 - 2. Relapse prevention and recovery;
 - 3. Instructions for crisis intervention;
 - 4. Notification to other involved providers/supports persons; and
 - 5. A summary of a person's served strengths.

IV. REFERENCES:

None.

V. RELATED POLICIES:

- A. MCCMH MCO Policy 2-010, "Clinical Service Documentation"
- B. MCCMH MCI Policy 4-004, "Due Process System"

VI. EXHIBITS

- A. Outreach Letter Example

Exhibit A- Outreach Letter Example

Dear _____,

I hope you are doing well.

Over the past few weeks, I have not seen you for our scheduled appointment(s) or been able to reach you. I have called you and your emergency contacts several times to check in but have been unable to contact you.

I look forward to speaking with you soon, hopefully, for an update on how you are doing, and to offer any support that I can. Please call me at XXX-XXXX and if I am not available and you need immediate assistance, you can ask for the clinic manager/supervisor.

I hope to hear from you soon,
