



The Substance Use Navigator (SUN) Tool Kit:

*A Guide For Establishing a SUN Program In Your
Emergency Department*

Premier Health developed this tool kit to help health care providers like you establish a Substance Use Navigator (SUN) program in your emergency departments. The SUN program is designed to help you connect ED patients with treatment services for substance use disorder and opioid use disorder.

We established SUN programs in the EDs of Miami Valley Hospital North, Miami Valley Hospital, Atrium Medical Center, and Upper Valley Medical Center, with the help of a Comprehensive Care for Substance Use in Ohio Emergency Departments (CCOED) grant from the Ohio Department of Health and Centers for Disease Control and Prevention. And we created this tool kit as a deliverable of the grant, based on our experience and to help you bring SUN to your ED.

The CCOED grant has **three overarching goals** focused on treating substance use disorder and opioid use disorder:

1. **To identify** patients with opioid use disorder by implementing a screening process in emergency departments
2. **To manage** opioid use disorder by implementing evidence-based practices in emergency medicine
3. **To transition** patients to long-term care and supportive services using innovative processes that improve pathways to treatment

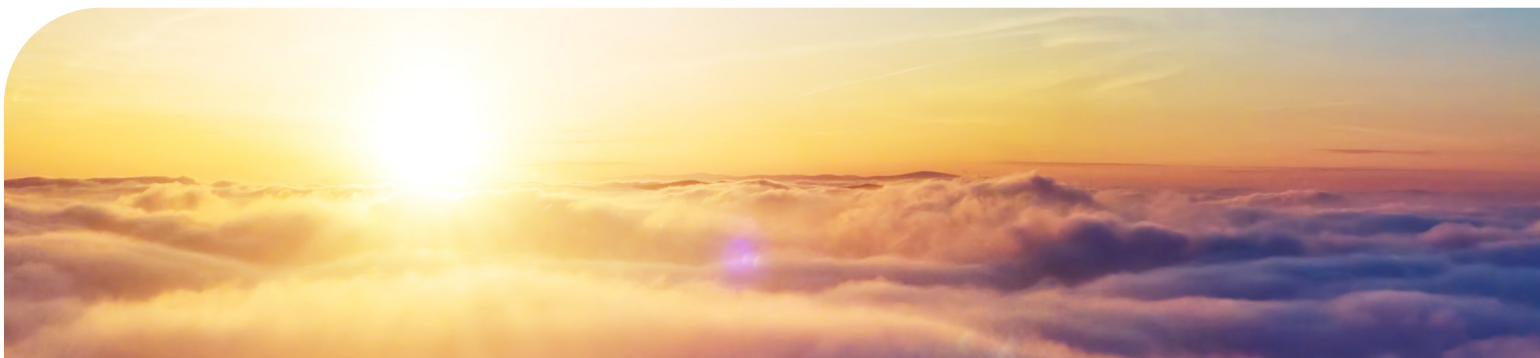
Premier Health has adapted this tool kit from **CA Bridge** and includes recommendations from our experience in implementing the program and onboarding substance use navigators in our EDs.

In the following pages we cover:

- The Scope Of Work Of Substance Use Navigators At Premier Health
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The Scope Of Work Of Substance Use Navigators At Premier Health

What Is a Substance Use Navigator?

At Premier Health, SUNs serve alongside behavioral health, social work, and nursing teams. They focus on providing supportive services and resources to patients with suspected, or confirmed, substance use disorder. Their services give the behavioral health and social work teams the time they need to focus on supporting high acuity mental health patients.

SUN candidates have experience in behavioral health, mental health, social work, and lived experience, to help prepare them to provide substance use disorder patients warm handoffs to the services they need.

SUNs provide individualized care and placement for patients. This includes scheduling substance use-related appointments, referrals to treatment, and other important wraparound services. This position was modeled after the role of Substance Use Navigator developed by [CA Bridge](#) (also known as California Bridge).

Substance Use Navigator (SUN) Scope Of Work

At Premier Health, the scope of work for the SUN is to provide linkages to care, complete chemical dependency assessments, advocate for Nasal Naloxone (Narcan) and medication-assisted treatment (MAT), and follow up with patients post-discharge.

Provide Linkages To Care

SUNs are responsible for providing warm handoffs and referrals to treatment and other wraparound services for patients presenting in the emergency department with substance use disorder. According to the U.S. Department of Health and Human Services: Agency for Healthcare Research and Quality (2017), a warm handoff is defined as “a transfer of care between two members of the health care team, where the handoff occurs in front of the patient and family.” (U.S. Department of Health and Human Services) SUNs are also responsible for completing referrals to treatment facilities and other wraparound services needed by the patient.

According to standards of the Ohio Department of Health, a referral to treatment is defined as making formal referrals within an EMR system, scheduling an appointment for or with the patient, assisting with or facilitating the patient to make their own appointment, as well as providing patients that do not receive formal referrals via EMR with information on where and how to access services. A referral is also defined as providing information on where to obtain services.

The Ohio Department of Health states that wraparound services include peer recovery support (PRS) coaches, testing (HIV/HCV/STI), syringe service programs, fentanyl test strips, primary medical, dental, and mental health care, childcare, educational, vocational, family housing, transportation, food security, health insurance, and financial and legal assistance.

SUNs take time to identify the personal needs of patients, connect them with resources, and remove as many barriers as possible to allow them to access treatment and services.



Complete Chemical Dependency Assessments

The SUN should complete a Chemical Dependency Assessment (CDA) with patients.

MAT And Naloxone Advocacy

MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of opioid use disorder (Substance Abuse and Mental Health Services Administration, 2022). MAT normalizes brain chemistry, blocks the euphoric effects of opioids, relieves physiological cravings, and normalizes body functions without the negative and euphoric effects of the substance used (Substance Abuse and Mental Health Services Administration, 2022).

Naloxone is a medicine that is used to reverse opioid overdoses (National Institute on Drug Abuse, 2022). It is an opioid antagonist, meaning that Naloxone binds to opioid receptors and can reverse and block the effects of other opioids, such as heroin, morphine, and oxycodone (Substance Abuse and Mental Health Services Administration, 2023). SUNs are expected to initiate conversations with patients to determine their interest in MAT treatment. SUNs also should advocate with providers to consider if their patients would benefit from MAT. SUNs are also expected to:

- Discuss naloxone with patients and provide them education on how to use the medication.
- Collaborate with each patient's nurse and provider to ensure that patients for whom naloxone treatment is recommended, receive the treatment.

Follow Up With Patients To Confirm Treatment Retention

Premier Health SUNs are expected to follow up with patients to confirm they accessed provided services. For patients who are receiving medication assisted treatment (MAT), Premier Health expects SUNs to follow up within 72 hours to confirm they accessed their long-term appointment. For patients we were unable to see due to not being in the office, we are expected to follow up within 48 hours to explore if the patient needs treatment or support. We also follow up with patients for six weeks or more post-discharge to confirm if they accessed the services we provided and if they are retaining treatment or the support services given during their ED visit.

Connect With Community Resources

Our SUNs are expected to be attuned to the resources available in our community. We encourage our SUNs to visit treatment centers frequently and learn as much as possible about direct points of contacts and inclusionary and exclusionary criteria for placement. The more information our teams know, the better we can serve our patients.





Billing For Services Of Substance Use Navigators

Premier Health uses Medicare and Medicaid HCPCS codes to bill for the services provided by our substance use navigators. Please note that commercial insurance varies with each health care organization's contract and that inpatients are bundled as a part of a Diagnosis Related Group.

To ensure that your health care organization meets these requirements to bill you will want to complete the following:

- Verify that your substance use navigator positions meet the criteria of Ohio law allowing you to bill for their services.
- Confirm that applicants for your SUN positions have the appropriate credentials.
- Connect with your independent social work teams where SUNs will be placed to confirm that social and behavioral health leads are willing and comfortable attesting to chemical dependency assessments completed by the SUNs.
- Connect with your revenue and billing services teams to identify proposed charge codes and build the necessary charge master infrastructure.
- Ensure that your SUNs have the correct EPIC templates to push their chemical dependency assessment notes to an independent social worker for their attestation.
- Assign your downstream revenue.

Department Integration And Workflows Created For the Premier Health SUN Program

At Premier Health, our substance use navigators use the four-step workflow below. Feel free to adapt your process as needed within your health care organization.

1. THE PATIENT NEED IS IDENTIFIED

In triage, patients are asked the drug screen question: **In the past year, have you used an opiate such as heroin or fentanyl or a narcotic prescription for nonmedical reasons or more than prescribed?**

A positive drug screen does not indicate opioid use disorder, but it does provide the opportunity for the SUN to connect with the patient and have additional conversations on the result and inquire if support is needed or wanted.

Positive screening initiates the following actions:

- Sends a silent Best Practice Advisory (BPA) by way of an in-basket feature in EPIC to the SUN's in-basket
- Initiates a "SUN" Icon next to the person's name in EPIC in a SUN tracker column. The SUN will then review the patient's social history. SUNs have permission to look at the patient's social history and determine if, based on previous history, the patient would benefit from connecting with the SUN to explore if further support is needed or wanted.

A referral from a provider, nurse, or social worker will be sent. Providers, nurses, and social workers can send a message to the SUN in a secure chat to reach out to the patient. Campus-specific group chats were created for a patient's care team to not have to remember the SUN's name specifically.

2. A PATIENT ENCOUNTER OCCURS

The SUN connects with the patient's nurse to get approval for the best time to connect with the patient. Once approval is granted, the SUN will assign themselves to the patient's care team in EMR system and see the patient. If the patient is not interested in receiving support and services, the SUN documents this in the chemical dependency assessment.

3. LINKAGES ARE MADE TO CARE

If the patient is interested in services provided by the SUN, the SUN completes a chemical dependency assessment (CDA) or Screening, Brief Intervention and Referral for Treatment (SBIRT). The SUN then connects the patient to the services they request such as treatment, inpatient services, outpatient services, etc. The SUN documents the patient's follow up as a behavioral health note assessment to have their site independent social worker attest their charting.

4. PATIENT FOLLOW-UP IS PROVIDED

The SUN follows up with patients. At Premier, we have set criteria for patient follow-up time frames. If the patient has started MAT in our ED, the SUN will follow up with the patient within 72 hours. If a SUN is unable to connect with a patient while in the emergency room, the SUN will reach out within 48 hours to offer services to the patient. All calls and attempted calls will be documented in EPIC. All patients the SUN has assigned themselves to will be followed up within 6 weeks post-discharge.

Training For Substance Use Navigators

SUNs are in a unique position, working with nursing and social work teams. To clearly define the roles, responsibilities, and scope of work of SUNs, we recommend that you involve your medical director, nursing directors, nursing managers, nurse educator, social work manager, and behavioral health manager in discussing and developing the SUNs' role and their training and orientation process.

SUN orientation at Premier Health consists of three days with our Psychiatric Consult Liaison team and three to five days with a SUN. Once a new SUN has completed orientation and feels comfortable in their position, the SUN is permitted to see patients on their own.

EPIC And EMR Training

Electronic medical records (EMR) training for SUNs at Premier Health focuses on the Case Management Module in EPIC. Our SUNs learn the following:

1. Reports pertaining to the grant: Drug Use Reports and Patients Assigned to the Care Team
2. The SUN track board column. On the track board the SUN indicates that the patient answered "yes" to our drug screen question.
3. Where to look for chief complaints and history for substance use disorder
4. How to find patients in the system
5. How to add themselves to a care team as a substance use navigator
6. How to access secure chats, etc.
7. How to fax sheets to treatment facilities concerning a patient
8. How to complete behavioral health placements

Social Work Training

Our SUNs spend a few days with behavioral health teams to:

1. Learn where offices are located
2. Tour the facility
3. Attend a Unit Safety-AVADE training
4. Train on completing chemical dependency assessments:
 - Documentation of assessments
 - Documentation for 30-day consults
 - Entering charges
 - Education on co-signature process (for dependent licensed staff only)
 - Outpatient referrals
5. Learn about available community and transportation resources

SUN-to-SUN Orientation

SUN-to-SUN orientation consists of each SUN spending time with another SUN. This allows the SUN in training to use information learned from the social work team in actual practice, under the guidance of an experienced SUN. Under the guidance of an experienced SUN, the SUN in training should have the opportunity to talk with patients to allow them to master their approach to authentically connect with patients, and to practice completing chemical dependency assessments. In orientation, SUNs will watch a California Bridge SUN Orientation video and videos on the California Bridge YouTube channel.



Recommendations For Implementing the SUN Program

At Premier Health, our experience in developing this innovative position in our EDs, with assistance from originators, California Bridge, has provided several opportunities for us to share our knowledge with others wanting to implement SUNs in their EDs. We encourage you to consider the following infrastructure elements prior to posting for applicants and launching your SUN program.

Consider the appropriate EMR system for your SUNs prior to their start date.

Connect with your IT, EMR, social work, and Pyxis teams prior to your SUNs beginning work to ensure the appropriate clearances and templates are in place. Our team had several conversations over the correct build and template for our SUNs. Our recommendation is to confirm your SUNs' scope of work and workflow for the appropriate clearances and builds within your EMR system.

Create and/or review necessary policies to ensure SUNs can provide education and Nasal Naloxone (Narcan) to patients.

At Premier Health, a committee led by our pharmacy leadership created a policy to allow emergency department staff who are appropriately trained to furnish Nasal Naloxone (Narcan) to at-risk individuals. We encourage you to connect with your leadership to establish a similar policy for your team, to allow SUNs and others to furnish Nasal Naloxone (Narcan) kits as a part of their job function to relieve stress from the nursing discharge team.

Confirm billing and revenue requirements for your SUN position.

It is critical that you connect with your revenue team to ensure that your job description and expectations for SUNs meets the requirements of Ohio law. You should also ensure that you have the necessary infrastructure (i.e., charge codes) in place prior to your SUNs' start date for billing purposes.

Confirm that the appropriate BPAs and workflows are in place.

Prior to the SUN start date, collaborate with your organization's Best Practice Advisory (BPA) Committee to ensure you have appropriate workflows to notify SUNs of patients and to ensure appropriate orders are in place in your system for appropriate referrals and order sets.

References

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Appendix A – Substance Use Navigator Job Description

Below is Premier Health’s job description for the Substance Use Navigator position:

General Summary/Responsibilities:

The Substance Use Navigator is responsible for providing coordination and support to Premier Health Emergency Department/OB Triage patients who have been identified with substance use disorder (SUD). SUN will be responsible for supporting linkage and warm handoff for Medications for Addiction.

Treatment (MAT) from the ED. This includes, but is not limited to regularly performing SUD assessments, linkages to ongoing treatment, linkages to community resources, educating patients, communicating with clinical and administrative staff, monitoring and reporting outcomes, and participation in other grant-related meetings and activities. Additionally, ensures follow-up regularly occurs with the identified patient population.

Education

Minimum Level of Education Required: Associate degree or sign a memorandum of understanding (MOU) to have your associates completed in 3 years from your start date.

Area of study of major: Allied Health, Chemical Dependency Concentration, or health services-related field

Preferred educational qualifications: Social work licensure

Experience

Minimum Level of Experience Required: 1 - 3 years of job-related experience

Prior job title or occupational experience: Community Health Worker, Peer Recovery Supporter, Case Manager or emergency department experience.

Preferred experience: Medical Terminology, emergency department, substance abuse case management, grants

Other experience requirements: Experience with data/MS Office

Knowledge/Skills

- Understanding of SUD as a medical condition
- Exceptional communication, organizational and interpersonal skills
- Ability to work with diverse group of individuals, without judgment, in a culturally relatable way
- Ability to work independently and as an integral member of a team
- Ability to plan, organize and conduct work with minimal supervision
- Ability to deal with a changing environment with possible high stress levels and be open to new ideas
- Ability to design and deliver creative solutions
- Ability to work with confidential patient information
- Ability to conduct motivational interviewing
- Knowledge of available community resource
- Knowledge of EPIC and/or other electronic health records systems and general computer literacy

Appendix B – Substance Use Navigator Follow-Up SMART Note

Our EPIC and Data Analytics teams collaborated to create smart phrases for charting and patient follow-up encounters completed by our SUNs. The SUN follow-up note below is what Premier Health substance use navigators use to record their encounters when following up with patients.

SUN Follow-Up Note

The SUNs use the smart phrase .edusun for this smart note to come into their chart.

Did the patient answer the phone? – Yes or No

Did the patient seek treatment after the visit? – Yes or No

Did the patient report treatment retention? – Yes or No

Type of treatment retention – MAT, detox, inpatient rehabilitation, intensive outpatient, wraparound services, other

Treatment location/site – OneFifteen, Hopeline, Brightview, TCN, Samaritan, Beckett Springs, Sunrise

Other

Additional Notes

Appendix C – SUN Training And Orientation Schedules And Objectives

Training orientation for Premier Health SUNs is outlined below:

TRAINING TITLE AND PURPOSE	LEARNING OBJECTIVES
<p>GRANT OVERVIEW – PROJECT COORDINATOR</p>	<ul style="list-style-type: none"> History of the Comprehensive Care for Substance Use in Ohio Emergency Departments grant Job expectations: Complete warm handoffs in front of patients and connect them with services Work responsibilities within the ED Process overview: View track board, connect with nurse to see patient, check in with provider for assessments Supervisor’s expectations
<p>CALIFORNIA BRIDGE SUN OVERVIEW – PROJECT COORDINATOR</p> <p>Provides specific information on how California Bridge utilizes their SUNs as an opportunity for our SUNs to become more aware of the goal for their position</p>	<ul style="list-style-type: none"> Provided SUN tool kit from California Bridge and reviewed California Bridge orientation materials found on the California Bridge website CA Bridge Navigation to Care videos
<p>RESOURCES BINDER - PROJECT COORDINATOR</p> <p>Provides information on EPIC, community resources, and information related to substance use disorder</p>	<p>Four tabs in the SUN Resource Binder consist of the following information:</p> <ul style="list-style-type: none"> AUDIT and DAST EPIC Orders and notes Resources
<p>EPIC OVERVIEW – SOCIAL WORK TEAM</p> <p>Provides specific information Substance Use Navigators need to know about using EPIC</p>	<ul style="list-style-type: none"> Learn how to run reports pertaining to the grant: Drug Use Reports and Patients Assigned to the Care Team Learn how to add the SUN track board column Where to look for chief complaints and history for substance use disorder How to find patients in the EMR system How SUNs add themselves to a care team How to access secure chats, etc.
<p>SOCIAL WORK ORIENTATION – SOCIAL WORK TEAM</p> <p>Provides pertinent information critical to social work functions within the emergency department</p>	<p>ORIENTATION TO CONSULT TEAM</p> <ul style="list-style-type: none"> Location of offices Therapy staff
	<p>EPIC SOCIAL WORK TRAINING</p> <ul style="list-style-type: none"> How to complete online referrals How to fax items to other facilities How to facilitate warm handoffs in EMR systems

TRAINING TITLE AND PURPOSE	LEARNING OBJECTIVES
	<p>UNIT SAFETY</p> <p>AVADE® Workplace Violence Prevention training programs are designed to educate, prevent, and mitigate the risk of violence to workers in health care and private corporations.</p>
	<p><u>SBIRT by Ohio Mental Health and Addiction Services</u></p>
	<p>CHEMICAL DEPENDENCY ASSESSMENTS</p> <ul style="list-style-type: none"> • Documentation of assessments • Documentation for 30-day consults • Entering charges • Education on co-signature process (for dependent licensed staff only) • Outpatient referrals
	<p>RESOURCES AND TRANSPORTATION</p>
	<p>WHO TO CONTACT FOR FURTHER ASSISTANCE</p>
<p>SUN-TO-SUN ORIENTATION – PROJECT COORDINATOR AND SUNS</p> <p>Provides direct interaction and mentorship of experienced SUNS to support newly hired SUNs</p>	<ul style="list-style-type: none"> • Learn how to run reports pertaining to the grant: Drug Use Reports and Patients Assigned to the Care Team • Learn how to add the SUN track board column • Where to look for chief complaints and history for substance use disorder • How to find patients in the EMR system • How SUNs add themselves to a care team • How to access secure chats, etc.

Appendix D – Expectations Of Substance Use Navigators

The following is a document used to ensure Substance Use Navigators are aware of their current job expectations.

As a Substance Use Navigator, I am expected to:

- Complete warm handoffs, referrals, and linkages to care for outpatients presenting with substance use disorder. A warm handoff must be done in front of the patient. I am expected to schedule appointments for patients, complete referrals in EMR system, and provide patients with resources at discharge
- Advocate for MAT Self Start and provide naloxone for patients
- Complete chemical dependency assessments
- Connect with community resources
- Connect with patients six weeks or more post discharge
- Run weekly reports and follow up with patients. I am expected to connect with patients who receive MAT within 72 hours, patients who I missed seeing in the ED within 48 hours, and patients to whom I've assigned myself six weeks or more post discharge.

Appendix E – Substance Use Navigator Check List

Premier Health provides SUNs with this guide and checklist to follow when serving patients.

How To Identify Patients

View the patient's history for certain chief complaints:

- Addiction problem
- Cocaine use
- Detox
- Drug abuse
- Drug problem
- Drug/alcohol assessment
- Heroin overdose accidental
- Heroin overdose intentional
- Opiate withdrawal
- Overdose accidental
- Overdose intentional
- Withdrawal drug
- Abscesses

View patient's social history for drug and alcohol use

Receive a patient referral from provider, nurse, or social worker

View the track board column for patients with a “ ” which indicates a positive response to our drug screen question



When seeing a patient for the first time, I should ask myself:

Did I review the patient's chart history?

Did I get approval from the nurse prior to entering the patient's room?

- Did I discuss MAT with the patient?
- Did I discuss Narcan with the patient?
- Did I discuss the LocalHelpNow Treatment Finder with the patient?

Did I assign myself to the patient's care team?

Did I complete a chemical dependency assessment?

- If the patient declined resources, did I note that on the assessment?
- If I completed a full assessment, did I receive the orders necessary for a chemical dependency assessment?
- Does my assessment include a DAST and AUDIT?

Did I complete an accurate patient chart?

- Did the chart include date and time of encounter?
- Did the chart include the name of the provider or nurse who provided approval to see the patient?
- Did the chart state who was in the patient's room?
- Did the chart share what was discussed with the patient?
- Did the chart summary state that verbal consent was provided to reach out to treatment centers?
- Did the chart state the patient's final plan, e.g., when the final appointment was if placement was provided?
- Was Narcan distributed or discussed with the patient?
- Was MAT discussed or provided to the patient?

Did I send my notes to the correct independent social worker to be signed and approved?

Did I charge for this service, and did I use the appropriate HCPCS charge codes?

MAT Self Start

If starting a patient on MAT, did I:

- Ask the patient if they had any questions on the patient education handout the patient received with the provider?
- Schedule a follow-up appointment with OneFifteen or another provider of the patient's choice as soon as possible, but within 72 hours?
- Follow up with the patient within 72 hours post discharge to confirm if they accessed their appointment?
- Use a behavioral health assessment note and the .edusun follow-up to chart this patient encounter?

Patient Follow-Up

When following up with my patients, I will:

- Not leave a voicemail
- Confirm two patient identifiers before sharing any health information about the patient, e.g., the patient's name and date of birth
- Confirm that the patient is in a private space to talk and is not on speaker phone
- Document the encounter using a progress note and .edusun follow-up as a behavioral health assessment note

