An approachable alternative to the emergency room and first-time entry point of care for individuals experiencing mental health symptoms

NAMI Metro Suburban, in collaboration with Healthcare Alternative Systems (HAS) and Pillars Community Health, works with guests in a warm, approachable environment to gain immediate stabilization and subsequently work to move guests beyond one-time drop-in support for urgent mental health care to ongoing peer counseling, promoting long-term wellness and recovery. A nationally recognized model, our organizations are uniquely positioned to operate the Living Room facilities and are the only providers of peer-operated urgent care for psychiatric conditions in the western suburbs of Cook County.

The first NAMI Metro Suburban Living Room was established in La Grange in 2016. In 2018, a second Living Room in Broadview was launched. A holistic, person-centered model, our Living Rooms serve any adult experiencing concerns related their mental health at no cost. We utilize a strengths and evidence-based approach that relies on a peer model of support. Through this approach, peers offer their unique lived experience with mental health conditions to provide support focused on advocacy, education, mentoring, and motivation.

**LIVING ROOM SERVICES**

2016 to date
LaGrange Unduplicated 551
Services rendered 2,852

2018 to date
Broadview Unduplicated 187
Services rendered 809
According to SAMHSA, of adults with mental illness in Illinois, more than half (55.4%) received no mental health treatment whatsoever. This can be the result of numerous obstacles, including costs of treatment and lack of medical insurance coverage, and/or stigma related to mental health conditions.

Luis – Luis came to the Living Room seeking support for his anger. He shared that he did not know how to manage his anger and it was threatening his marriage. Luis became aware during his first visit to the Living Room that his anger may be related to trauma he experienced as a child, and there was something he could do about it. He said to our Certified Recovery Support Specialists: “I now have hope for the future”. He also continues to be steadfast about not only getting better and keeping his family together but also about getting the healing process underway. While he came to the Living Room for himself, Luis introduced his wife to our services. Since his initial visit to the Living Room, Luis has become very active at church, he and his wife engaged in domestic violence counseling and later marital counseling with Pillars Community Health. Their 5-year-old son will soon be receiving counseling services as well.

Rosario – Rosario’s family was coping with the recent loss of Rosario’s twin sister, and even more recently the loss of Rosario’s brother. It had been very challenging for Rosario and her mother to navigate through the stages of grief after experiencing these losses with the ongoing issue of Rosario’s increased drinking. Their first few visits to the Broadview Living room presented a unique challenge in that Rosario was not ready to change her habits. Rosario’s most recent visit to the Living Room was a huge step towards Rosario’s recovery. Our Certified Recovery Support Specialists understood that Rosario was ready to take action, and that the window of opportunity may not last. NAMI and H.A.S staff found an inpatient treatment center that could complete her intake that same day over the weekend and supported her through the process. While at the Living Room in Broadview, Rosario made the call and set up her appointment. Afterward, we saw a different side of Rosario. She smiled with sense of refreshing relief. After years of coping with life’s stressors by using alcohol, Rosario was finally ready to turn a new page and begin her journey to recovery.

Recognized as an evidence-based practice by the Center for Medicare and Medicaid Services in 2007, peer support helps individuals have a sense of hope about recovery. Recent data has shown the effectiveness and efficacy of the peer-based recovery support model. According to such literature, research reveals that of those receiving peer run respite services, there was a 32% reduction of involuntary hospitalizations (Bergeson, 2013). Additionally, there was a 56% reduction in hospital readmission rates (MHA, 2019) for those involved in a peer support program. Further, individuals receiving peer support are more likely to have employment (Repper & Carter, 2011), and report overall increases in their quality of life (SAMHSA, 2016).

One of the many tools used to track Living Room program effectiveness is through the Subjective Units of Distress Scale (SUDS), a pre- post- survey that measures self-reported levels of stress. Percentage of guests that indicated a decrease in the SUDS by at least 2 points after their visit:

- 2017 - 63%
- 2018 - 64%
- 2019 - 62%

82% experienced a reduction of stress

49% returned for follow up services

IT IS ESTIMATED THAT SINCE OPENING THE LIVING ROOMS, WE HAVE HAD A MINIMUM IN ER VISIT COST SAVINGS OF OVER A $1,000,000 (based on $2,225 average cost of an emergency department visit)

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