



# Mobile Crisis Intervention Services Performance Improvement Center (PIC)

# **Quarter 2 Report: Fiscal Year 2019**

October 1 - December 30, 2018

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The Mobile Crisis Performance Improvement Center is housed at the Child Health and Development Institute of Connecticut, Inc.



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### **Executive Summary**

<u>Introduction:</u> Starting in Q2 FY2016, Mobile Crisis PIC has restructured quarterly reports to incorporate DSM-V data and a Results Based Accountability (RBA) report card to enhance the capacity for DCF and statewide stakeholders to monitor quality assurance of the Mobile Crisis program.

<u>Call and Episode Volume</u>: In the second quarter of FY2019, **2-1-1 received 5,904 calls** including 4,373 calls (74.1%) handled by Mobile Crisis providers and 1,531 calls (25.9%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). Of the 4,373 episodes of care, 4,204 (96.1%) were received during regular hours, 166 (3.8%) were handled after hours. This quarter saw a 6.1% increase in total call volume compared to the same quarter in FY2018 (5,562), and the total episodes increased by 7.4% compared to the same quarter in FY2018 (4,072).

Among the **4,373 episodes of care** generated in Q2 FY19, episode volume ranged from 539 episodes including After Hours calls (Eastern service area) to 1,217 episodes including After Hours calls (Hartford service area). Relative to the population of children in each service area, the statewide average service reach rate per 1,000 children this quarter was 5.4, with service area rates ranging from 3.2 (Southwestern) to 7.7 (Hartford). Additionally, the number of episodes generated relative to the number of children in poverty in each service area yielded a statewide average poverty service reach rate of 11.3 per 1,000 children in poverty, with service area rates ranging from 6.5 (Southwestern) to 15.9 (Hartford).

Each quarter, every Mobile Crisis site is required to achieve an overall service reach rate of 2.5 episodes per 1,000 children. For this quarter, 13 of 14 sites met this benchmark.

<u>Demographics</u>: Statewide this quarter, 45.8% of children served were reported as female and 54.2% male. Youth ages 13-15 years old comprised the largest portion of children served (33.4%). Additionally, 29.3% were 9-12 years old, 20.1% were 16-18 years old, 12.9% were 6-8 years old, and 3.8% were five or younger. Almost one-third (32.3%) of youth served were of Hispanic ethnicity. Additionally, the majority of the children served were White (61.1%), and 22.3% were African-American or Black. The majority of youth were insured by Husky A (63.0%) and private insurance (29.3%). Finally, the majority of clients (85.1%) were not DCF-involved.

Clinical Functioning: The most commonly reported primary presenting problems for clients statewide included: Harm/Risk of Harm to Self (31.7%), Disruptive Behavior (23.1%), Depression (15.6%), Anxiety (6.9%), Harm/Risk of Harm to Others (6.8%), and Family Conflict (3.9%). The top client primary diagnoses at intake this quarter were: Depressive Disorders (33.9%), Conduct Disorders (15.0%), Adjustment Disorders (12.7%), Anxiety Disorders (9.8%), Attention Deficit/Hyperactivity Disorders (9.4%), and Trauma Disorders (7.1%). This quarter, 75.5% of Mobile Crisis clients statewide met the definition for Serious Emotional Disturbance (SED).

In this quarter, the **statewide percentage of children with trauma exposure reported at intake was 56.5%**, with service areas ranging from 50.3% (Southwestern) to 67.4% (Central). The most common types of trauma exposure reported at intake statewide were: Disrupted Attachment/Multiple Placements (23.6%), Witnessing Violence (21.0%), Victim of Violence (17.4%), and Sexual Victimization (11.1%).

The statewide rate for the percentage of children evaluated in an Emergency Department once or more in the six months prior to a current episode of care was 18.3%, a decrease from 21% in the same quarter last fiscal year. Over nineteen percent of children were evaluated one or more times *during* an episode of care. The inpatient admission rate in the six months prior to Mobile Crisis referral was 9.4% statewide, which is slightly lower than the rate in the same quarter in FY2018 (10%). The admission rate to an inpatient unit during a mobile crisis episode was 6.7%, compared to a rate of 7% in the same quarter last fiscal year.

<u>Referral Sources</u>: Statewide, 50.5% were received from schools, and 30.9% of referrals were received from parents, families and youth. Emergency Departments (EDs) accounted for 10.6% of all Mobile Crisis referrals. The remaining 8.0% of referrals came from a variety of other sources.

ED utilization of Mobile Crisis varies widely among hospitals in Connecticut. This quarter, a total of **465 Mobile Crisis referrals were received from EDs**, including 215 referrals for inpatient diversion and 250 referrals for routine follow-up. Regionally, the highest rate of ED referrals, as a percentage of total referrals, was observed in the Western service area (20.2%) and the lowest was in the

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<sup>&</sup>lt;sup>1</sup> Per question regarding "Sex Assigned at Birth".

Eastern service area (2.2%). Statewide, 10.6% of all Mobile Crisis episodes came from ED referrals this quarter, consistent with the rates from Q2 FY2018.

<u>Mobility</u>: The average **statewide mobility this quarter was 94.0%**, approximately two percent higher than the rate in Q2 FY2018 (Police referrals are excluded from mobility calculations). All six service areas met the benchmark of 90% this quarter. Mobility rates among service areas ranged from 91.4% (Central) to 96.8% (Western). The range in mobility percentages widened slightly more among individual providers, from 82.4% (CHR: Middlesex Hospital) to 98.2% (Wellmore: Danbury). Among the providers, 13 of the 14 either reached or surpassed the 90% benchmark.

Response Time: Statewide this quarter, **86.3%** of mobile episodes received a face-to-face response in **45** minutes or less. Performance on this indicator ranged from 80.2% (New Haven) to 94.0% (Southwestern) with all of the six service areas above the 80% benchmark. Across the state, **11** of the **14** providers met the benchmark. In addition, the statewide median response time this quarter was 30.0 minutes, with three of the six service areas demonstrating a median response time of 30 minutes or less.

<u>Length of Stay</u>: Among discharged episodes statewide this quarter, 14.2% of Phone Only episodes exceeded one day, 30.3% of Face-to-Face episodes exceeded five days, and **3.9% of** *Stabilization Plus Follow-up* episodes exceeded **45 days**, meeting the statewide benchmark of less than 5%. The statewide median LOS among discharged episodes was 0 days for Phone Only, 4.0 days for Face-to-Face episodes, and 15.0 days for *Stabilization Plus*.

Statewide, the median Length of Stay (LOS) for open episodes of care with a Crisis Response of Phone Only was 78.0 days and ranged from 52.0 days (Western) to 88.0 days (Southwestern). The statewide median LOS for Face-to-Face was 51.0 days and ranged from 27.0 days (Eastern) to 71.0 days (Hartford). For *Stabilization Plus Follow-up*, the statewide median LOS was 53.0 days with a range from 44.0 days (Western) to 65.0 days (Central). Across open episodes of care with phone and face-to-face crisis response categories during the second quarter of FY2019 100% of episodes remained open beyond the benchmarks (1 day for Phone Only, 5 days for Face-to-Face). For open *Stabilization Plus Follow-up*, there was a wide range of cases remaining open past the benchmark (45 days). Statewide, 63.7% of these open cases exceeded the benchmark, while regionally this ranged from 37.5% (Eastern) to 91.7% (New Haven). Cases that remain open for services for long periods of time can impact responsiveness as call volume continues to increase, and can compromise accurate and timely data entry practices.

<u>Discharge Information</u>: The overwhelming majority of clients lived in a private residence at discharge from Mobile Crisis (96.3%). Statewide, the top three reasons for client discharge were: Met Treatment Goals (73.7%), Family Discontinued (16.3%), and Client Hospitalized: Psychiatrically (4.7%).

Statewide, clients were most likely to be **referred to Outpatient Services at discharge (45.7%)**. Other care referrals at discharge included: Intensive Outpatient Program (8.4%), Other Community Based Services (5.5%), Inpatient Hospital (3.3%), Partial Hospital Program (3.9%), Intensive In-Home Services (2.1%), and Care Coordination (1.0%). An additional 27.7% of clients indicated "none" for discharge referrals, a category that includes referrals back to an existing provider.

Across the state, Ohio Scales showed an improvement on parent and worker rated functioning of 1.80 and 2.08 respectively. Decreases in problem scores of 1.90 points on parent ratings and 2.68 points on worker ratings were reported. Changes on Worker Functioning, Parent Problem, and Worker Problem scores were statistically significant.

Completion rates of the Ohio Scales at discharge for the Worker Functioning and Problem Severity scores increased by 10.5 percentage points when compared to the same quarter in FY2018. The completion rate for Parent Problem and Functioning scores increased by 2.6 percentage points each compared to FY2018 Q2.

<u>Satisfaction</u>: This quarter, 60 clients/families and 60 other referrers responded to the satisfaction survey; both groups gave favorable ratings to 2-1-1 and Mobile Crisis services. On a 5-point scale, **clients' average ratings of 2-1-1 and Mobile Crisis were 4.51 and 4.29**, respectively. Among **other referrers (e.g. schools, hospitals, DCF, etc.)**, the average ratings of **2-1-1 and Mobile Crisis were 4.37 and 4.34**, respectively. Qualitative comments (see Section X) varied from very satisfied to dissatisfied.

<u>Training Attendance</u>: The statewide percentage of all twelve trainings completed by all active staff as of December 31, 2018 is 25%. This percentage of staff completing all trainings is higher than Q2 FY2018 (13%).

Community Outreach: Outreach numbers ranged from 0 (Wheeler: Meriden and CFGC: Norwalk) to 11 (Wellmore: Waterbury).

#### SFY 2019 Q2 RBA Report Card: Mobile Crisis Intervention Services

Quality of Life Result: Connecticut's children will live in stable environments, safe, healthy and ready to lead successful lives.

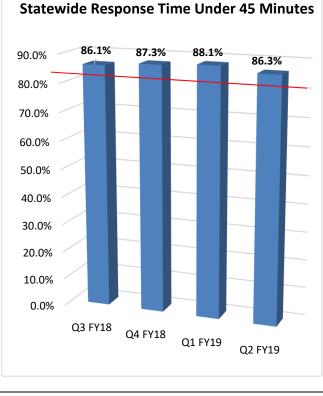
**Contribution to the Result:** The Mobile Crisis services provide an alternative, community based intervention to youth visits to hospital emergency rooms, inpatient hospitalizations and police calls that could remove them from their home and potentially negatively impact their growth and success. Mobile Crisis providers are expected to respond to all episodes of care. Partners with DCF include Child and Health Development Institute (CHDI) as the Performance Improvement Center.

How Much Did We Do?

Program Expenditures: Estimated SFY 2019 State Funding: \$11,970,297

How N	luch Did	We Do?			
	Total	Call and	d Episod	e Volume	
100.0%	4%	5% 3%	5% 4%	5.2% 3.5%	4:1% 3:4%
90.0%	23%	3%	4/0	3.3%	3.476
80.0%	23/0	29%	29%	28.3%	32.4%
70.0%	5%				
60.0%		4%	4%	4.2%	2.3%
50.0%					
40.0%	<b>57%</b>	42%	41%	42.5%	41.7%
30.0%					41.776
20.0%					
10.0%	140/	17%	18%	16.4%	16.2%
0.0%	11%				
				sis Mobile Crisis	
	Child	Episodes	•	•	Episodes
	Population (2015)	Q3 FY18	Q4 FY18	Q1 FY19	Q2 FY19
Unable 1	to report		Multira	cial	
Hispanio	-Any Race		Other N	Ion-Hispanic	
■ White N	on-Hispanic		■ Black o	r African America	n Non-Hispanic
		Q3 FY18	Q4 FY18	Q1 FY19	Q2 FY19
	ile Crisis	44.40	4004	2200	4272
-	isode	4149 1492	4004 1487	2200 861	4373
2-1	-1 Only	1492	1487	861	1531
1	Γotal	5641	5491	3061	5904

	Episodes Per Child													
Q3 FY18	DCF Child	Non-DCF Child	Total											
1	312 (13.5%)	2006 (86.5%)	2,318											
2	42 (19.7%)	171 (80.3%)	213											
3	4 (12.5%)	28 (87.5%)	32											
4 or More	2 (20.0%)	8 (80.0%)	10											
Q4 FY18	DCF Child	Non-DCF Child	Total											
1	342 (14.8%)	1964 (85.2%)	2,306											
2	36 (17.4%)	171 (82.6%)	207											
3	10 (25.6%)	29 (74.4%)	39											
4 or More	1 (12.5%)	7 (87.5%)	8											
Q1 FY19	DCF Child	Non-DCF Child	Total											
1	182 (14.4%)	1083 (85.6%)	1,265											
2	34 (38.2%)	55 (61.8%)	89											
3	9 (50.0%)	9 (50.0%)	18											
4 or More	2 (22.2%)	7 (77.8%)	9											
Q2 FY19	DCF Child	Non-DCF Child	Total											
1	326 (12.5%)	2291 (87.5%)	2,617											
2	43 (18.1%)	194 (81.9%)	237											
3	7 (18.9%)	30 (81.1%)	37											
4 or More	1 (20.0%)	4 (80.0%)	5											



How Well Did We Do?

Story Behind the Baseline: In SFY 19 Q2 there were 5,904 total calls to the 2-1-1 Call Center resulting in 4,373 mobile episodes. Compared to the same quarter in SFY 18 this represents an increase in 2-1-1 calls of 6.1% (342 more calls) and an increase in mobile episodes of 7.4% (301 more episodes). The percentages of both Black and Hispanic children served is higher than the statewide population percentages, while the percentage of White children is lower. Compared to SFY 18 Q2 the racial composition percentages of children served are similar, with slight increases in White and Hispanic children served.

Trend: 个

Story Behind the Baseline: In SFY 19 Q2 of the 2,896\* children served by Mobile Crisis, 90.4% (2,617) received only one episode of care, and 98.5% (2,854) received one or two episodes of care; compared to 88.9% (2,258) and 98.1% (2,492) respectively for SFY 18 Q2. The number of children with 4 or more episodes has slightly decreased compared to the last 5 quarters. The data indicates that Mobile Crisis involvement with a youth and their family continues to significantly reduce the need for additional Mobile Crisis services.

\*Note: Only children with DCF/Non DCF status identified were included.

Trend:  $\rightarrow$ 

Story Behind the Baseline: Since SFY 11 Mobile Crisis has consistently exceeded the 80% benchmark for a 45 minute or less mobile response to a crisis. In SFY 19 Q2 86.3% of all mobile responses achieved the 45 minute mark compared to 85.8% for SFY 18 Q2. The median response time for SFY 19 Q2 was 30 minutes. This reflects how Mobile Crisis continues to be a highly responsive statewide service system that is immediately present to engage and deescalate a crisis and return stability to the child and family, school or other setting they are in.

Trend: →

#### How Well Did We Do? Race & Ethnicity of DCF & Non DCF Clients Served 100.0% 6% 90.0% 4% 23% 80.0% 29% 31% 30% 33% 34% 36% 38% 41% 5% 70.0% 60.0% 5% 5% 5% 3% 3% 3% 3% 2% 50.0% 40.0% 57% 43% 34% 33% 41% 43% 33% 33% 30.0% 20.0% 10.0% 19% 18% 18% 17% 15% 16% 15% 14% 11% 0.0% O3 FY18 O4 FY18 O1 FY19 O2 FY19 O3 FY18 O4 FY18 O1 FY19 O2 FY19 (360)(389)(227)(365)(2171)(2211)(1154)(2470)**Distinct Clients Served** CT Statewide Distinct Clients Served

Story Behind the Baseline: In SFY 19 Q2 Hispanic and Black DCF and Non-DCF involved children<sup>1,2</sup> accessed Mobile Crisis services at rates higher than the CT general population. Both DCF and Non-DCF-involved White children accessed the service at lower rates. White Non-DCF-involved children utilized Mobile Crisis at higher rates than their DCF involved counterparts. Both Hispanic and Black DCF-involved children utilized Mobile Crisis at higher rates than Hispanic and Black Non-DCF involved children.

Notes: <sup>1</sup>Only children having their DCF or non DCF status identified were included. <sup>2</sup>For the Distinct Clients served some had multiple episodes as identified above in Episodes per Child.

Trend: →

#### Is Anyone Better Off?

Non-Hispanic

Child Population

(2015)

■ Black or African American ■ White

#### % Clinically Meaningful Change For Statewide Ohio Scale Scores 25.0% 19.1%\* 18.8%\*\* 16.9%\* 15.5%\*\* 20.0% 14.7%\*\* 10.9% 15.0% 9.2%\*\* 6.6%\*\* 6.7%\*\* 6.7% \* 5.6% \* \* 6.5% \* 6.5% \* \* 8.5%\*\* 10.0% 6.0%\*\* 5.0% 0.0% (N=905) (N=68) (N=686) (N=68) (N=685) (N=71)(N=722) (N=71)N=722) (N=64) (N=430) (N=64)(N=430) (N=104)(N=905) (N=107)Q1 FY19 Q2 FY19 Q3 FY18 **Q4 FY18** (1,507)(1,586)(988)(2,021)Parent Functioning Worker Functioning Parent Problem Severity ■ Worker Problem Severity

(DCF)

Non-Hispanic

**Story Behind the Baseline:** The Ohio Scales have demonstrated clinically significant positive changes for children following a Mobile Crisis response. For SFY 19 Q2 all the scales showed a decrease in percentage of clinically meaningful change in comparison to SFY 18 Q2. Despite the relative short time of service engagement, the Ohio Scales reflect the continued effectiveness of Mobile Crisis in diffusing the immediate crisis and supporting the positive growth and success of youth. (The smaller quarterly samples, where more variable scores can influence the total score, may result in greater variability in the % of Clinically Meaningful Change scores between quarters).

Trend:  $\rightarrow$ 

<sup>1</sup>Note: Statewide Ohio Scales Scores are based on paired intake and discharge scores. <sup>2</sup>Note: Statistical Significance: † .05-.10; \* P < .05; \*\*P < 0.01

■ Other: Non-Hispanic ■ Hispanic-Any Race ■ Multiracial ■ Unable to Report

#### **Proposed Actions to Turn the Curve:**

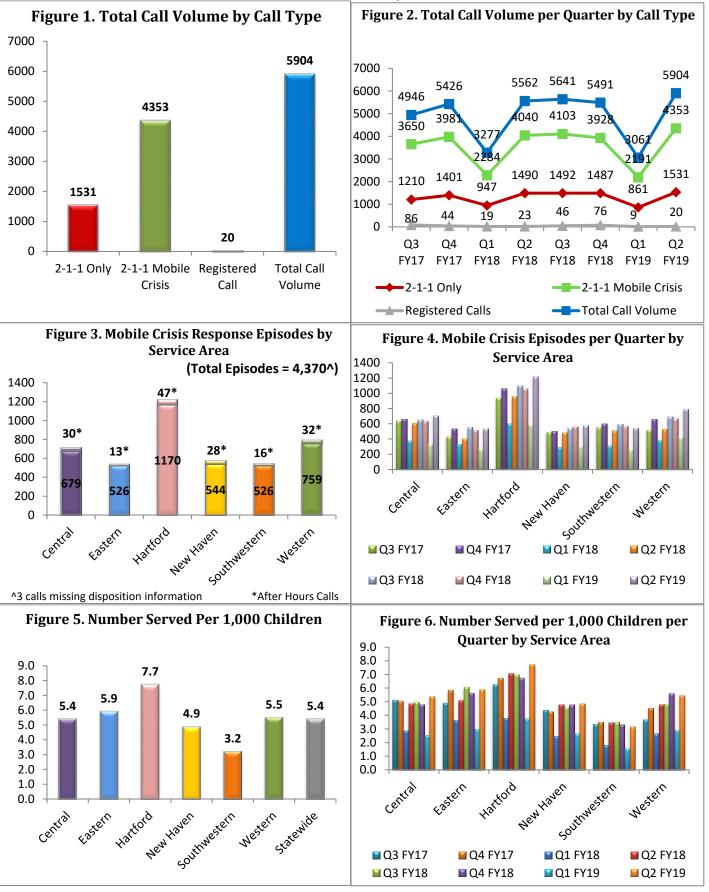
- Mobile Crisis providers will work with schools and Emergency Departments to reduce school utilization of ED's and increase utilization of Mobile Crisis.
- Continue outreach to Police Departments to support their ongoing collaboration with Mobile Crisis.
- Continue to increase the parent completion rates for the Ohio Scales.
- Review with each provider their self-care activities to support their clinical staff in being continuously effective in delivering Mobile Crisis services.
- Continue to review RBA report cards on a quarterly basis with each Mobile Crisis provider, with a focus on the racial and ethnic distributions of the children served in each region.

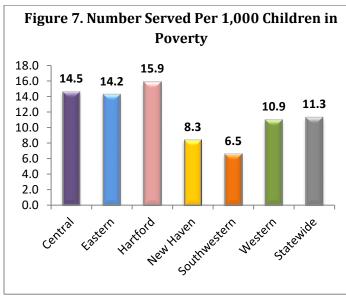
#### **Data Development Agenda:**

- Work with providers to develop data regarding school, emergency department, police department utilization of Mobile Crisis.
- Work with providers to address regional service area demographics for race and ethnicity in their RBA report card stories.

(Non DCF)

# Section II: Mobile Crisis Statewide/Service Area Dashboard





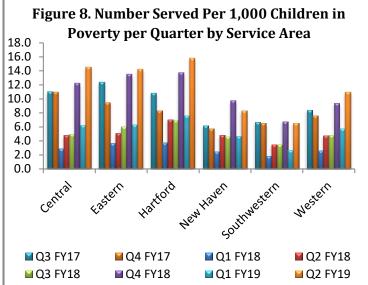
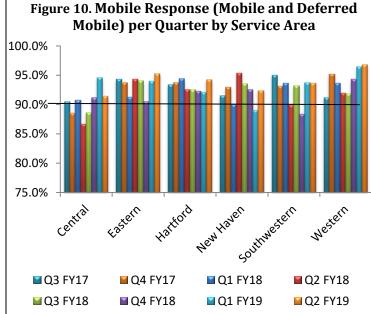
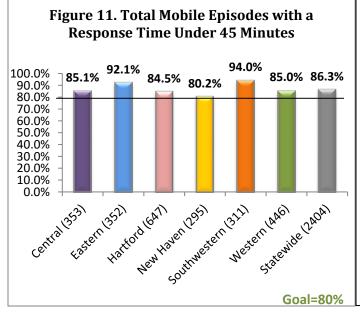
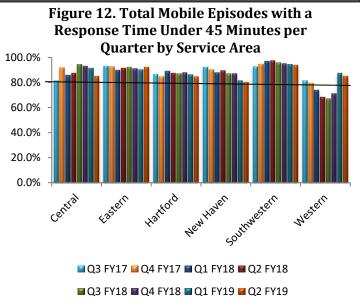
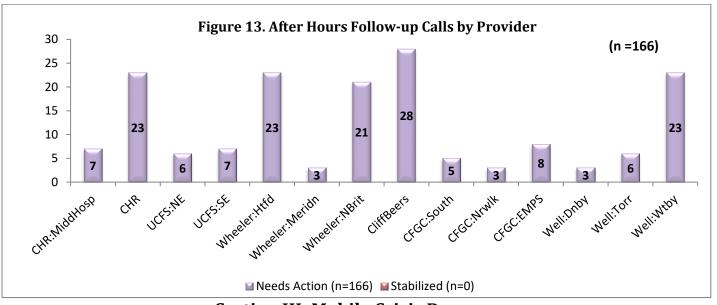


Figure 9. Mobile Response (Mobile and Deferred Mobile) by Service Area 91.4% 95.3% 94.2% 92.4% 93.7% 96.8% 94.1% 100.0% 90.0% 80.0% 70.0% 60.0% 50.0% 40.0% 30.0% 20.0% 10.0% Haven Western Western 0.0% HenHaven Hartford kastern statewide **Goal=90%** 

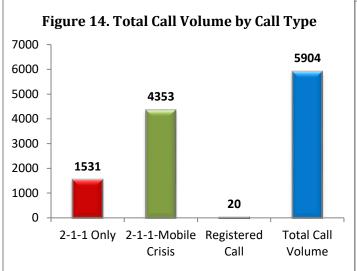


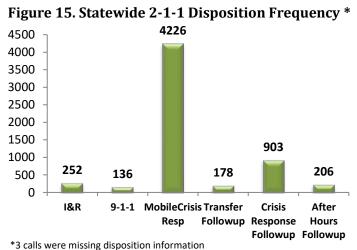


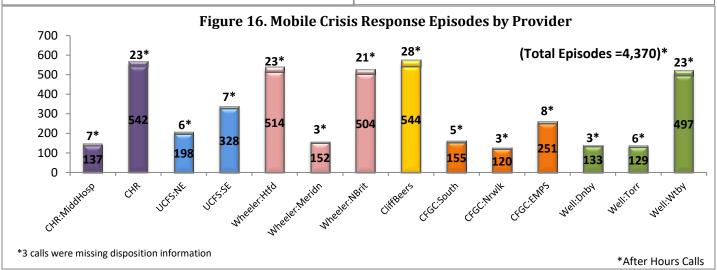


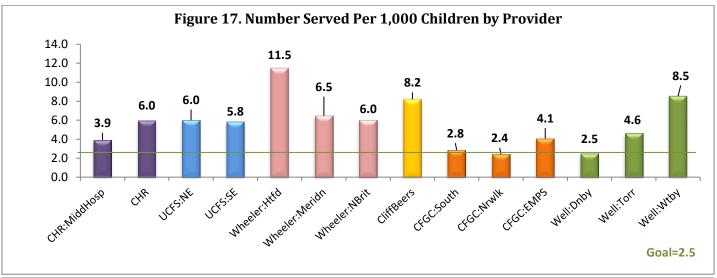


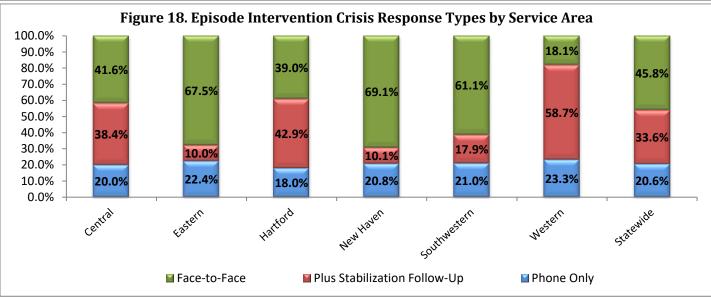
# **Section III: Mobile Crisis Response**

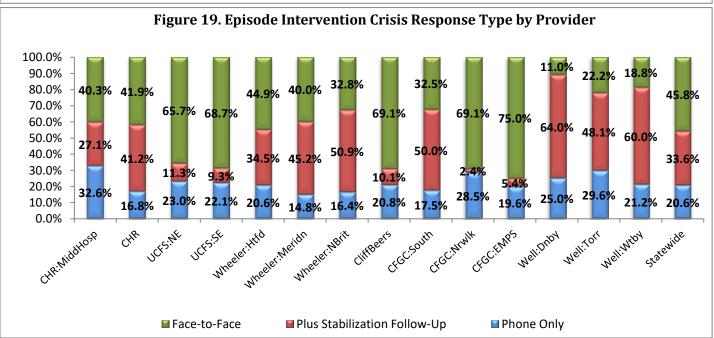




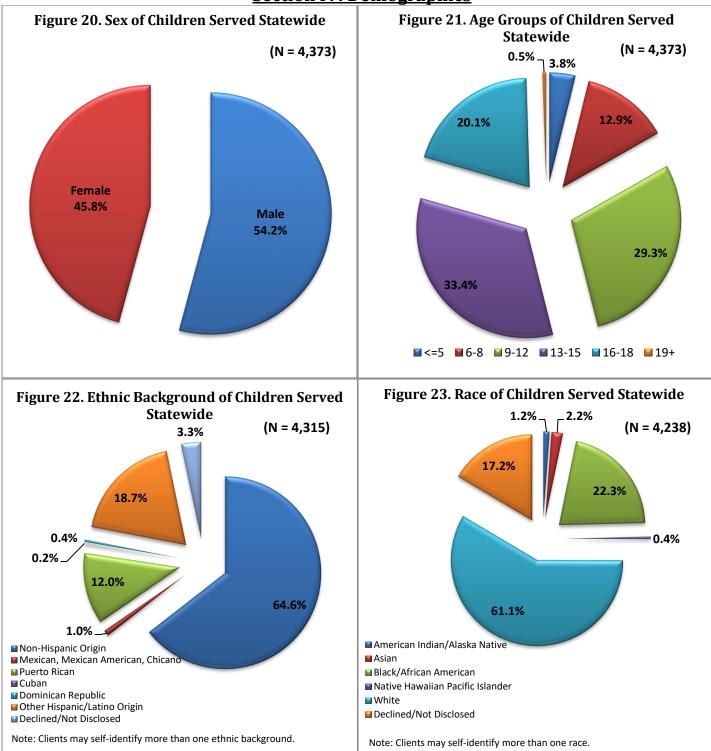




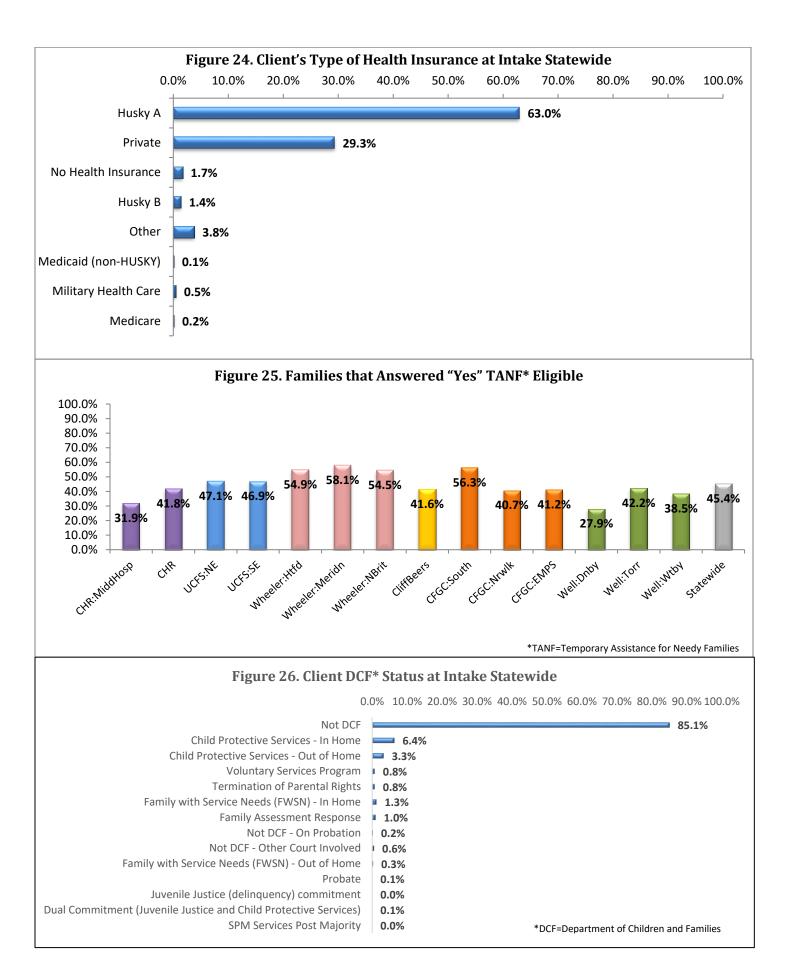




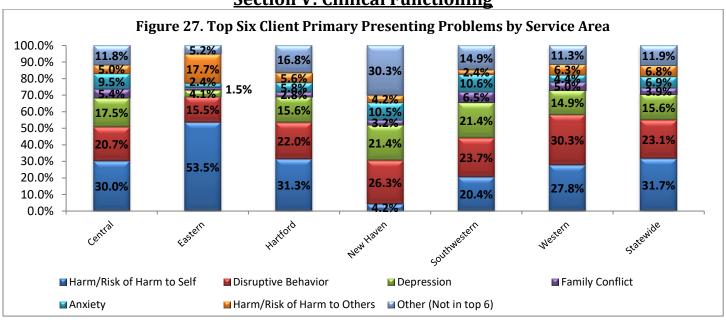
**Section IV: Demographics** 

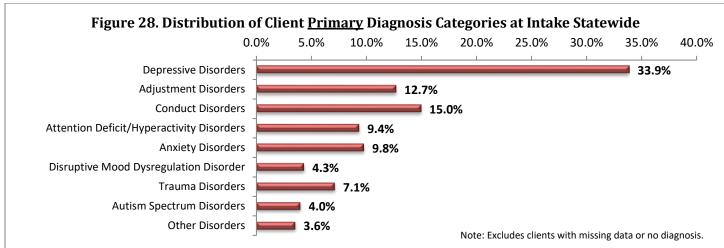


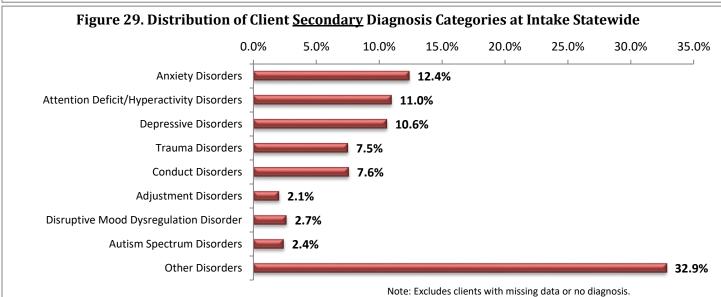
Note: According to the U.S. Census Bureau, "[P]eople who identify their origin as Spanish, Hispanic, or Latino may be of any race...[R]ace is considered a separate concept from Hispanic origin (ethnicity) and, wherever possible, separate questions should be asked on each concept."

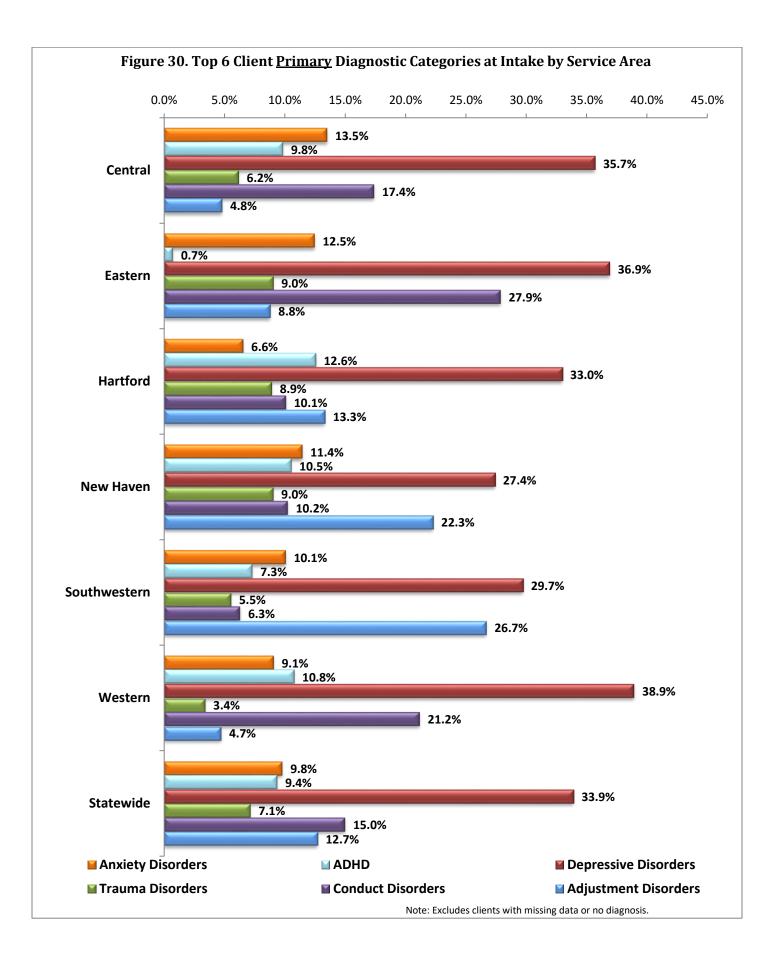


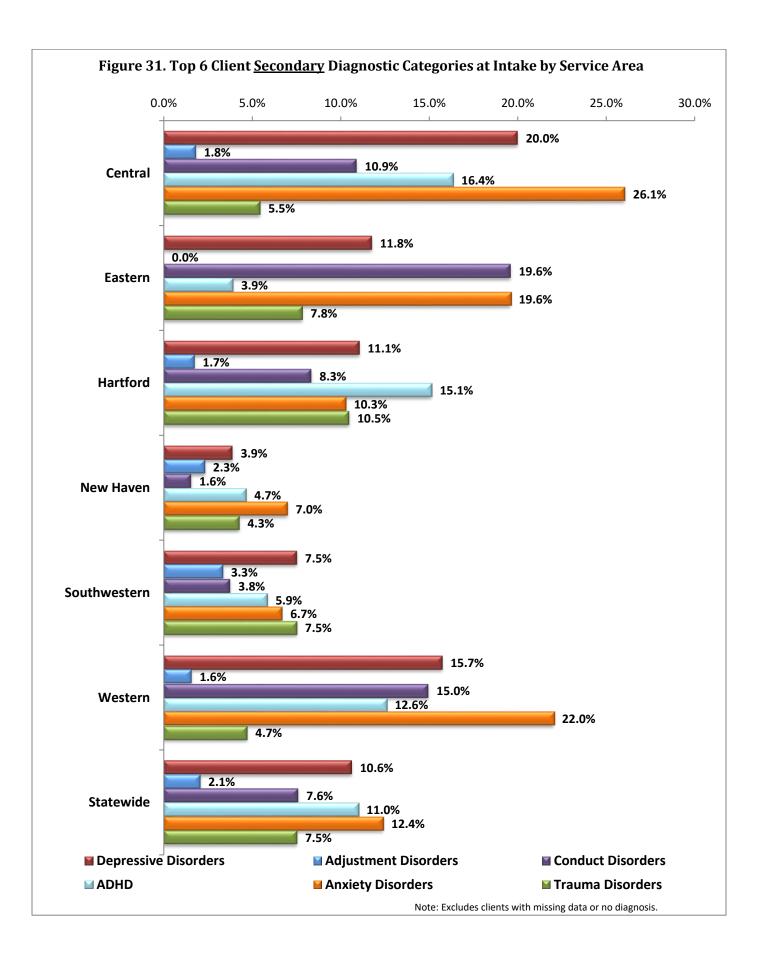
**Section V: Clinical Functioning** 

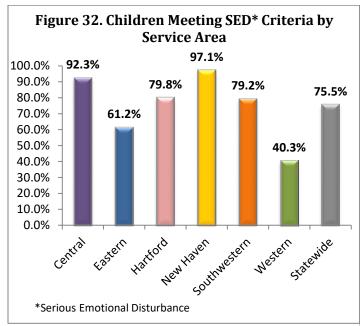


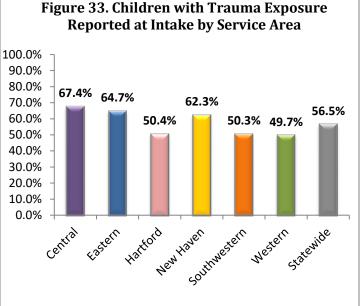


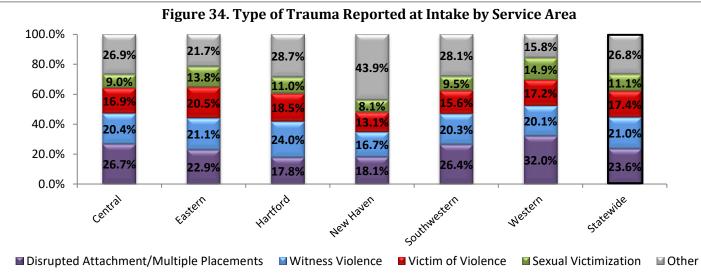












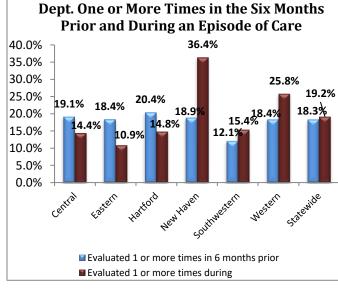
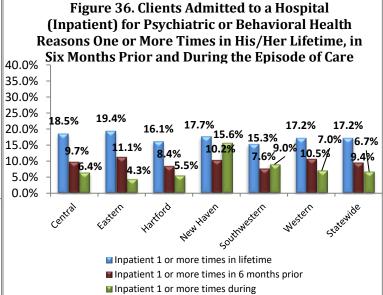


Figure 35. Clients Evaluated in an Emergency







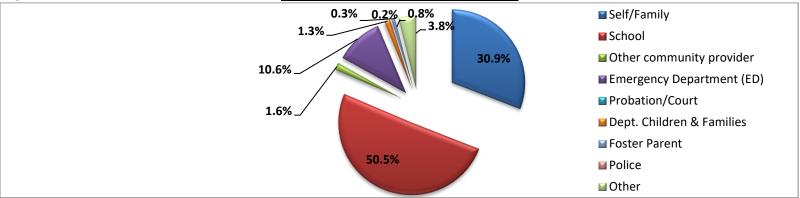
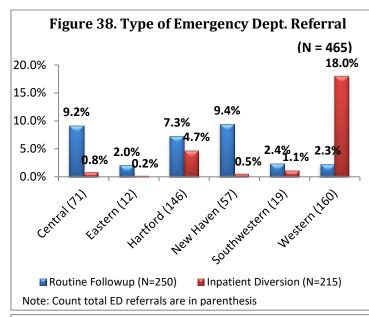
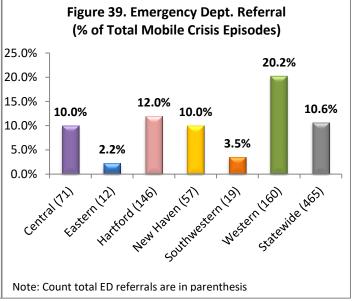
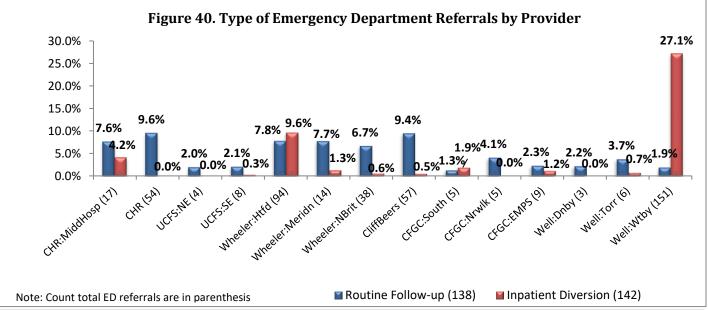


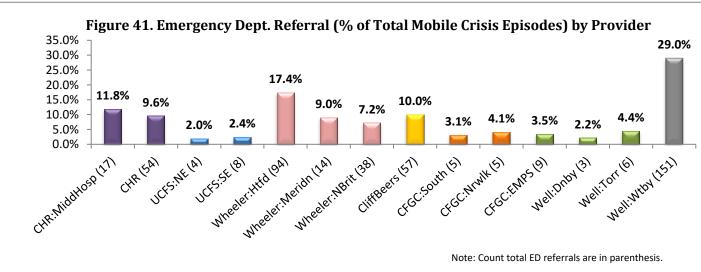
Table 1. Referral Sources (Q1 FY 2019)

Tuble 1. Neleriur bource				Info-	Other Prog.	Other	Emer	Prob.	Dept. of		Cong.				Comm.	Other
	Self/ Family	Family Adv.	School	Line (2-1-1)	w/in Agency	Comm. Provider	Dept. (ED)	or Court	Child & Families (DCF)	Psych Hospital	Care Facility	Foster Parent	Police	Phys.	Nat. Supp.	State Agency
STATEWIDE	30.9%	0.2%	50.5%	0.0%	1.1%	1.6%	10.6%	0.2%	1.3%	1.8%	0.3%	0.8%	0.3%	0.3%	0.1%	0.0%
CENTRAL	36.5%	0.0%	42.0%	0.0%	1.7%	2.7%	10.0%	0.0%	1.1%	3.5%	0.4%	0.6%	0.7%	0.7%	0.0%	0.0%
CHR:MiddHosp	43.1%	0.0%	34.0%	0.0%	1.4%	0.7%	11.8%	0.0%	1.4%	4.9%	0.7%	0.7%	0.0%	1.4%	0.0%	0.0%
CHR	34.9%	0.0%	44.1%	0.0%	1.8%	3.2%	9.6%	0.0%	1.1%	3.2%	0.4%	0.5%	0.9%	0.5%	0.0%	0.0%
EASTERN	35.6%	0.2%	52.1%	0.0%	1.5%	2.2%	2.2%	0.2%	0.7%	1.7%	0.9%	1.1%	0.2%	0.7%	0.4%	0.2%
UCFS:NE	39.7%	0.0%	48.0%	0.0%	1.0%	2.0%	2.0%	0.5%	1.5%	1.5%	0.0%	2.5%	0.0%	0.5%	1.0%	0.0%
UCFS:SE	33.1%	0.3%	54.6%	0.0%	1.8%	2.4%	2.4%	0.0%	0.3%	1.8%	1.5%	0.3%	0.3%	0.9%	0.0%	0.3%
HARTFORD	26.4%	0.2%	54.1%	0.0%	0.5%	1.6%	12.0%	0.2%	1.3%	2.9%	0.0%	0.8%	0.0%	0.0%	0.1%	0.0%
Wheeler:Htfd	19.1%	0.2%	55.5%	0.0%	0.9%	1.5%	17.4%	0.2%	0.6%	3.9%	0.0%	0.6%	0.0%	0.0%	0.2%	0.0%
Wheeler:Meridn	29.7%	0.0%	56.1%	0.0%	0.0%	0.6%	9.0%	0.0%	3.2%	1.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Wheeler:NBrit	33.0%	0.2%	52.2%	0.0%	0.2%	1.9%	7.2%	0.2%	1.5%	2.3%	0.0%	1.3%	0.0%	0.0%	0.0%	0.0%
NEW HAVEN	34.1%	0.2%	51.6%	0.0%	0.5%	1.2%	10.0%	0.0%	0.7%	0.2%	0.0%	1.0%	0.3%	0.2%	0.0%	0.0%
CliffBeers	34.1%	0.2%	51.6%	0.0%	0.5%	1.2%	10.0%	0.0%	0.7%	0.2%	0.0%	1.0%	0.3%	0.2%	0.0%	0.0%
SOUTHWESTERN	34.1%	0.6%	54.9%	0.0%	1.7%	0.4%	3.5%	0.0%	2.4%	0.7%	0.0%	0.9%	0.4%	0.6%	0.0%	0.0%
CFGC:South	33.1%	0.6%	55.0%	0.0%	3.8%	0.6%	3.1%	0.0%	2.5%	0.6%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%
CFGC:Nrwlk	35.8%	0.0%	57.7%	0.0%	0.0%	0.0%	4.1%	0.0%	1.6%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%
CFGC:EMPS	33.8%	0.8%	53.5%	0.0%	1.2%	0.4%	3.5%	0.0%	2.7%	1.2%	0.0%	1.9%	0.4%	0.8%	0.0%	0.0%
WESTERN	25.0%	0.4%	47.5%	0.0%	1.0%	1.6%	20.2%	0.8%	1.5%	0.8%	0.5%	0.3%	0.1%	0.0%	0.1%	0.1%
Well:Dnby	31.6%	0.7%	56.6%	0.0%	0.0%	5.9%	2.2%	0.7%	2.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Well:Torr	35.6%	0.0%	49.6%	0.0%	1.5%	0.7%	4.4%	0.0%	2.2%	3.0%	1.5%	0.7%	0.0%	0.0%	0.7%	0.0%
Well:Wtby	20.6%	0.4%	44.6%	0.0%	1.2%	0.8%	29.0%	1.0%	1.2%	0.4%	0.4%	0.2%	0.2%	0.0%	0.0%	0.2%

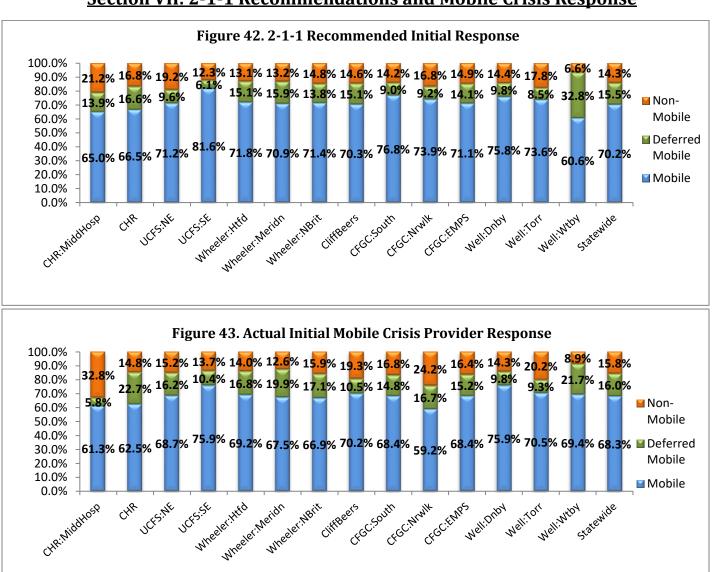


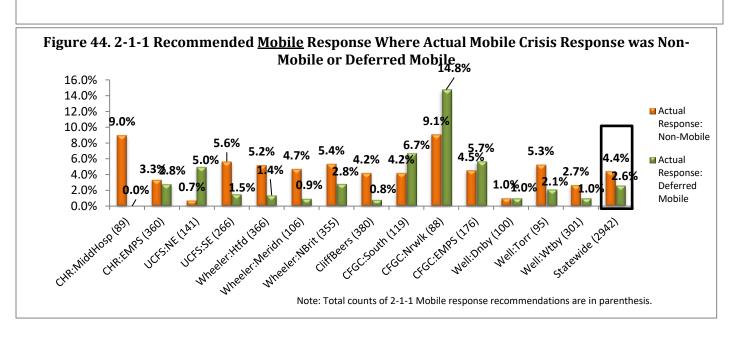


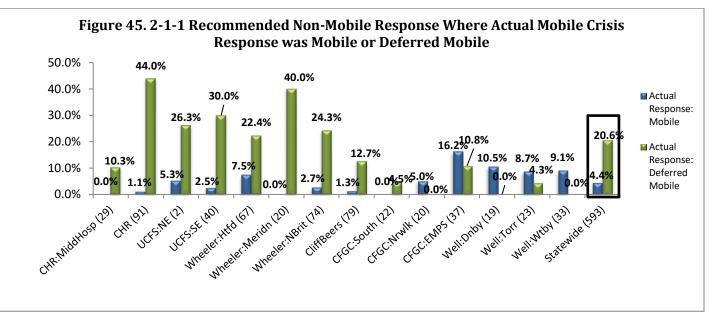


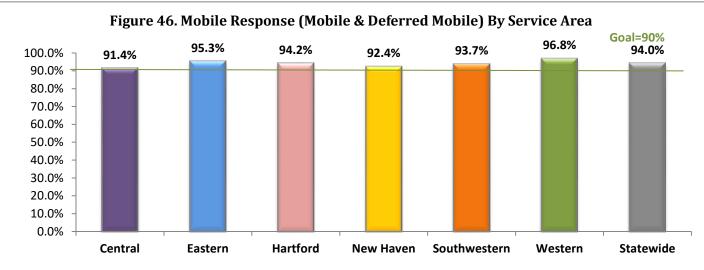


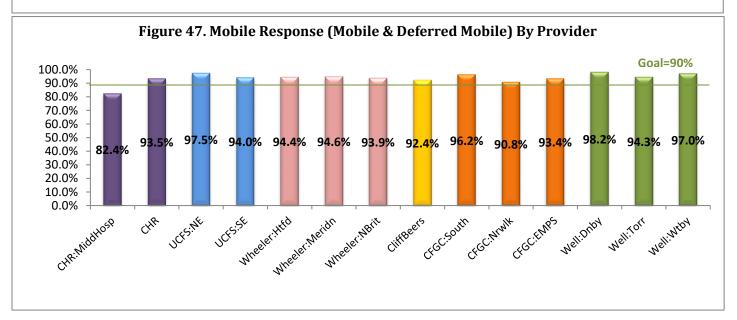
# Section VII: 2-1-1 Recommendations and Mobile Crisis Response



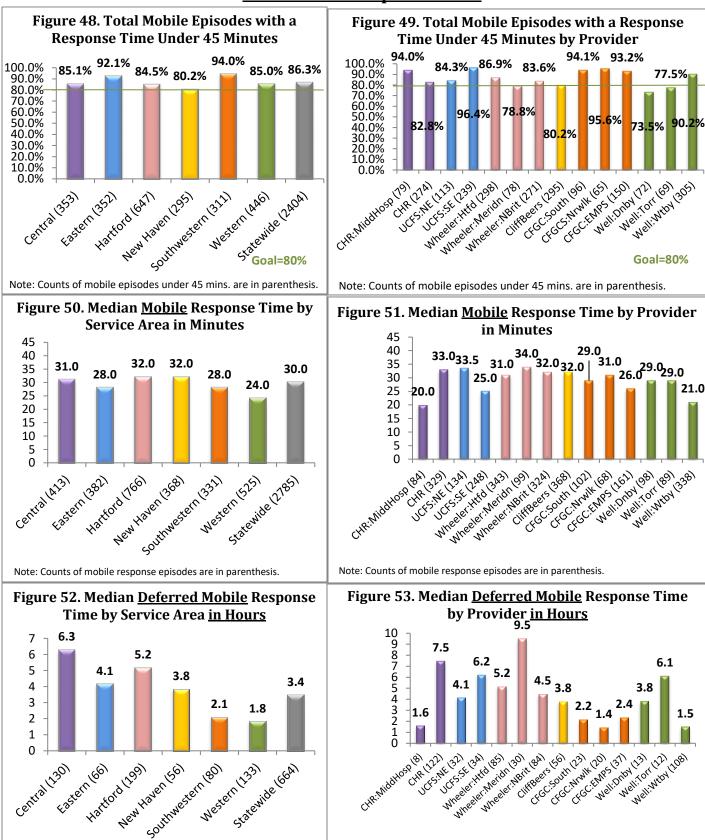








# **Section VIII: Response Time**



Note: Counts of mobile response episodes are in parenthesis.

Note: Counts of mobile response episodes are in parenthesis.

# **Section IX: Length of Stay and Discharge Information**

Table 2. Length of Stay for <u>Discharged Episodes</u> of Care in Days

	rubic 2. Length of btdy for	A	В	С	D	Е	Е	G	Н	- 1	- 1	К	1	М	N	0	D	Q	R
		A	l .	Ū	_		ont Bonor	-	l .	'	J	K	Cumu		<u> </u>	_	odoc*	Q	
				nargea E			ent Repor	ung Peric					Cumu			ged Epis			
			Mean	ı		Mediar	1		Percent			Mean	1		Mediar			Percent	
		LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone >	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45
1	STATEWIDE	1.2	6.9	18.5	0.0	4.0	15.0	14.2%	30.3%	3.9%	1.2	6.9	18.5	0.0	4.0	15.0	14.2%	30.3%	3.9%
2	Central	2.4	12.9	25.2	1.0	6.0	22.0	43.9%	52.7%	10.8%	2.4	12.9	25.2	1.0	6.0	22.0	43.9%	52.7%	10.8%
3	CHR:MiddHosp	4.0	2.7	12.1	3.0	2.0	11.0	66.0%	14.0%	0.0%	4.0	2.7	12.1	3.0	2.0	11.0	66.0%	14.0%	0.0%
4	CHR	1.6	16.1	29.4	0.0	14.0	27.0	32.6%	64.8%	14.3%	1.6	16.1	29.4	0.0	14.0	27.0	32.6%	64.8%	14.3%
5	Eastern	0.3	4.5	26.1	0.0	5.0	24.5	4.2%	9.6%	2.2%	0.3	4.5	26.1	0.0	5.0	24.5	4.2%	9.6%	2.2%
6	UCFS:NE	0.4	4.8	25.8	0.0	5.0	23.0	6.4%	12.8%	0.0%	0.4	4.8	25.8	0.0	5.0	23.0	6.4%	12.8%	0.0%
7	UCFS:SE	0.2	4.4	26.3	0.0	5.0	26.0	2.7%	7.8%	3.7%	0.2	4.4	26.3	0.0	5.0	26.0	2.7%	7.8%	3.7%
8	Hartford	1.9	6.0	14.7	0.0	2.0	13.0	15.4%	31.8%	1.4%	1.9	6.0	14.7	0.0	2.0	13.0	15.4%	31.8%	1.4%
9	Wheeler:Htfd	3.6	6.0	13.8	0.0	2.0	12.0	22.0%	33.5%	1.9%	3.6	6.0	13.8	0.0	2.0	12.0	22.0%	33.5%	1.9%
10	Wheeler:Meridn	0.5	6.1	16.9	0.0	4.0	13.0	13.0%	30.5%	3.4%	0.5	6.1	16.9	0.0	4.0	13.0	13.0%	30.5%	3.4%
11	Wheeler:NBrit	0.4	5.9	14.6	0.0	2.0	12.5	8.2%	30.2%	0.5%	0.4	5.9	14.6	0.0	2.0	12.5	8.2%	30.2%	0.5%
12	New Haven	0.3	7.5	28.2	0.0	4.0	23.0	6.7%	42.4%	26.1%	0.3	7.5	28.2	0.0	4.0	23.0	6.7%	42.4%	26.1%
13	CliffBeers	0.3	7.5	28.2	0.0	4.0	23.0	6.7%	42.4%	26.1%	0.3	7.5	28.2	0.0	4.0	23.0	6.7%	42.4%	26.1%
14	Southwestern	0.4	7.3	18.1	0.0	3.0	13.0	2.8%	30.8%	0.0%	0.4	7.3	18.1	0.0	3.0	13.0	2.8%	30.8%	0.0%
15	CFGC:South	1.0	1.8	17.1	0.0	0.0	13.0	3.6%	8.2%	0.0%	1.0	1.8	17.1	0.0	0.0	13.0	3.6%	8.2%	0.0%
16	CFGC:Nrwlk	0.1	9.2	19.0	0.0	4.0	19.0	0.0%	42.4%	0.0%	0.1	9.2	19.0	0.0	4.0	19.0	0.0%	42.4%	0.0%
17	CFGC:EMPS	0.2	8.1	23.0	0.0	4.0	23.0	4.0%	32.8%	0.0%	0.2	8.1	23.0	0.0	4.0	23.0	4.0%	32.8%	0.0%
18	Western	1.0	3.4	17.4	0.0	2.0	15.0	8.5%	7.0%	1.8%	1.0	3.4	17.4	0.0	2.0	15.0	8.5%	7.0%	1.8%
19	Well:Dnby	0.2	2.4	15.8	0.0	3.0	13.0	3.0%	0.0%	1.4%	0.2	2.4	15.8	0.0	3.0	13.0	3.0%	0.0%	1.4%
20	Well:Torr	0.9	3.2	14.4	0.0	2.0	11.5	10.5%	7.1%	0.0%	0.9	3.2	14.4	0.0	2.0	11.5	10.5%	7.1%	0.0%
21	Well:Wtby	1.3	3.7	18.5	0.0	2.0	16.0	9.4%	8.0%	2.3%	1.3	3.7	18.5	0.0	2.0	16.0	9.4%	8.0%	2.3%

<sup>\*</sup> Discharged episodes with end dates from July 1, 2018 to the end of the current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

#### **Definitions:**

LOS: Phone Length of Stay in Days for Phone Only
LOS: FTF Length of Stay in Days for Face To Face Only

LOS: Stab. Length of Stay in Days for Plus Stabilization Follow-up Only

Phone > 1 Percent of episodes that are phone only that are greater than 1 day
FTF > 5 Percent of episodes that are face to face that are greater than 5 days

Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Table 3. Number of Episodes for <u>Discharged Episodes</u> of Care

	-	Α	В	С	D	Е	F	G	Н	I	J	K	L	
		Disc	charged	Episodes	for Cur	rent Rep	orting							
				Pe	riod			(	Cumulative	Dischar	ged Ep	isodes*		
		N used	l Mean/	Median	N us	sed for P	ercent	N use	d Mean/Me	edian	N used for Percent			
		LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	
1	STATEWIDE	872	1798	1086	124	544	42	872	1798	1086	124	544	42	
2	Central	139	239	158	61	126	17	139	239	158	61	126	17	
3	CHR:MiddHosp	47	57	39	31	8	0	47	57	39	31	8	0	
4	CHR	92	182	119	30	118	17	92	182	119	30	118	17	
5	Eastern	120	363	46	5	35	1	120	363	46	5	35	1	
6	UCFS:NE	47	133	19	3	17	0	47	133	19	3	17	0	
7	UCFS:SE	73	230	27	2	18	1	73	230	27	2	18	1	
8	Hartford	208	421	361	32	134	5	208	421	361	32	134	5	
9	Wheeler:Htfd	100	203	104	22	68	2	100	203	104	22	68	2	
10	Wheeler:Meridn	23	59	59	3	18	2	23	59	59	3	18	2	
11	Wheeler:NBrit	85	159	198	7	48	1	85	159	198	7	48	1	
12	New Haven	119	354	46	8	150	12	119	354	46	8	150	12	
13	CliffBeers	119	354	46	8	150	12	119	354	46	8	150	12	
14	Southwestern	109	292	79	3	90	0	109	292	79	3	90	0	
15	CFGC:South	28	49	65	1	4	0	28	49	65	1	4	0	
16	CFGC:Nrwlk	31	66	2	0	28	0	31	66	2	0	28	0	
17	CFGC:EMPS	50	177	12	2	58	0	50	177	12	2	58	0	
18	Western	177	129	396	15	9	7	177	129	396	15	9	7	
19	Well:Dnby	33	14	72	1	0	1	33	14	72	1	0	1	
20	Well:Torr	38	28	58	4	2	0	38	28	58	4	2	0	
21	Well:Wtby	106	87	266	10	7	6	106	87	266	10	7	6	

<sup>\*</sup> Discharged episodes with end dates from July 1, 2018 to the end of the current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

#### **Definitions:**

LOS: Phone Length of Stay in Days for Phone Only
LOS: FTF Length of Stay in Days for Face To Face Only

LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only

Phone > 1 Percent of episodes that are phone only that are greater than 1 day
FTF > 5 Percent of episodes that are face to face that are greater than 5 days

Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Table 4. Length of Stay for Open Episodes of Care in Days

	,	_	В	C	D	Е	E	G	Н			1/			N	0	
		A B C D E F G H I J  Episodes Still in Care*										K		M	N	0	
				1	Epis	oaes St	III in Care*	1					oisoaes :	Still in Care*			
										N used							
			Mean			Media	n		Percent			ean/Med		N used for Percent			
		LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	
1	STATEWIDE	71.6	58.5	60.4	78.0	51.0	53.0	100.0%	100.0%	63.7%	22	204	380	22	204	242	
2	Central	NA	57.7	66.8	NA	52.0	65.0	NA	100.0%	75.2%	0	55	113	0	55	85	
3	CHR:MiddHosp	NA	59.0	NA	NA	59.0	NA	NA	100.0%	NA	0	1	0	0	1	0	
4	CHR	NA	57.7	66.8	NA	52.0	65.0	NA	100.0%	75.2%	0	54	113	0	54	85	
5	Eastern	NA	27.0	49.8	NA	27.0	44.5	NA	100.0%	37.5%	0	1	8	0	1	3	
6	UCFS:NE	NA	27.0	45.8	NA	27.0	47.5	NA	100.0%	50.0%	0	1	4	0	1	2	
7	UCFS:SE	NA	NA	53.8	NA	NA	43.5	NA	NA	25.0%	0	0	4	0	0	1	
8	Hartford	79.4	68.5	63.0	79.0	71.0	56.5	100.0%	100.0%	61.7%	12	55	162	12	55	100	
9	Wheeler:Htfd	76.8	69.8	65.6	78.0	74.0	58.0	100.0%	100.0%	68.3%	11	39	82	11	39	56	
10	Wheeler:Meridn	NA	61.0	45.8	NA	49.0	39.0	NA	100.0%	27.3%	0	3	11	0	3	3	
11	Wheeler:NBrit	108.0	66.1	62.6	108.0	67.0	56.0	100.0%	100.0%	59.4%	1	13	69	1	13	41	
12	New Haven	NA	52.8	65.3	NA	49.0	58.5	NA	100.0%	91.7%	0	39	12	0	39	11	
13	CliffBeers	NA	52.8	65.3	NA	49.0	58.5	NA	100.0%	91.7%	0	39	12	0	39	11	
14	Southwestern	77.3	55.6	45.4	88.0	49.5	49.0	100.0%	100.0%	55.6%	3	40	18	3	40	10	
15	CFGC:South	NA	35.3	45.6	NA	38.0	49.0	NA	100.0%	60.0%	0	3	15	0	3	9	
16	CFGC:Nrwlk	77.3	66.7	60.0	88.0	66.0	60.0	100.0%	100.0%	100.0%	3	19	1	3	19	1	
17	CFGC	NA	47.1	36.5	NA	42.0	36.5	NA	100.0%	0.0%	0	18	2	0	18	0	
18	Western	55.7	49.6	48.2	52.0	41.0	44.0	100.0%	100.0%	49.3%	7	14	67	7	14	33	
19	Well:Dnby	108.0	43.0	46.1	108.0	43.0	43.0	100.0%	100.0%	46.7%	1	1	15	1	1	7	
20	Well:Torr	70.0	76.5	49.9	70.0	76.5	43.0	100.0%	100.0%	28.6%	2	2	7	2	2	2	
21	Well:Wtby	35.5	45.3	48.6	31.0	39.0	47.0	100.0%	100.0%	53.3%	4	11	45	4	11	24	
	* Data includes enisodes still in care with referral dates from July 1, 2018 to end of current reporting period																

<sup>\*</sup> Data includes episodes still in care with referral dates from July 1, 2018 to end of current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

#### **Definitions:**

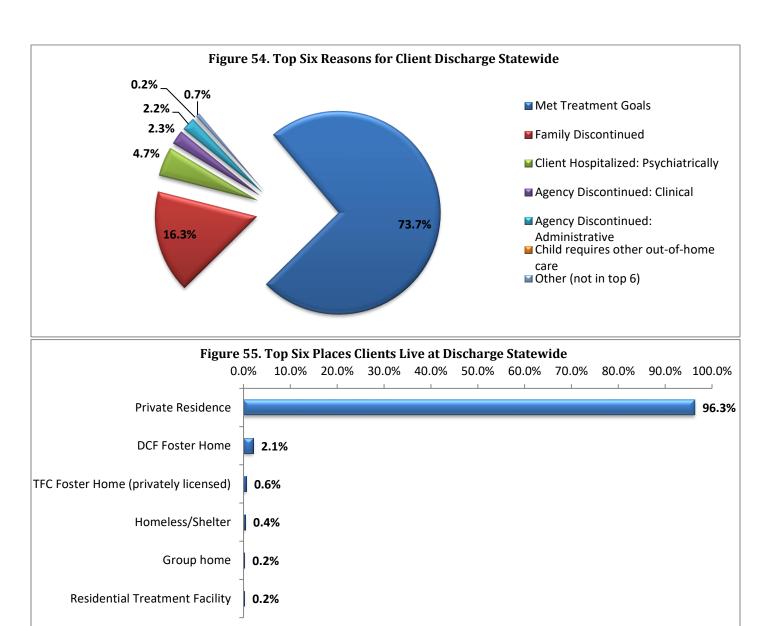
LOS: Phone Length of Stay in Days for Phone Only
LOS: FTF Length of Stay in Days for Face To Face Only

LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only

Phone > 1 Percent of episodes that are phone only that are greater than 1 day

FTF > 5 Percent of episodes that are face to face that are greater than 5 days

Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days



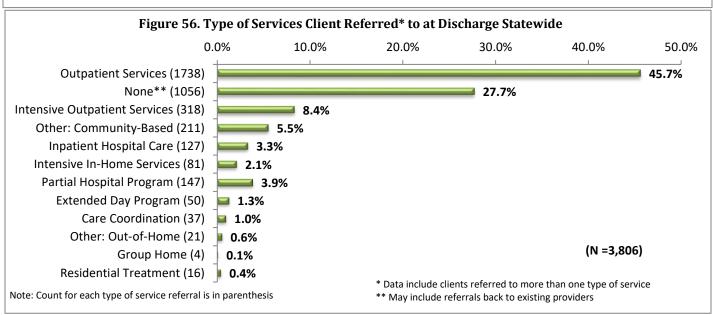


Table 5. Ohio Scales Scores by Service Area

Table 5. Onto Scales Scotes by	1			1			
Samira Area	N (paired intake &	Mean (paired	Mean (paired	Mean Difference (paired		Ci	† .0510 * P < .05 **P < .01
Service Area STATEWIDE	discharge)	intake)	discharge)	cases)	t-score	Sig.	
	104	47.14	48.94	1.80	2.30	0.023	*
Parent Functioning Score		45.22	47.29				**
Worker Functioning Score Parent Problem Score	905			2.08	10.84	0.000	*
	107	26.06	24.16	-1.90	-2.07	0.041	**
Worker Problem Score	905	25.71	23.03	-2.68	-12.42	0.000	4.4
Central	26	47.40	47.40	0.00	0.00	4 000	
Parent Functioning Score	36	47.42	47.42	0.00	0.00	1.000	**
Worker Functioning Score	105	45.36	48.62	3.26	5.66	0.000	* *
Parent Problem Score	37	25.16	24.65	-0.51	-1.01	0.320	ale ale
Worker Problem Score	105	29.47	24.52	-4.94	-5.22	0.000	**
Eastern							
Parent Functioning Score	6	43.67	43.83	0.17	0.08	0.938	
Worker Functioning Score	38	40.66	45.61	4.95	2.67	0.011	*
Parent Problem Score	8	30.25	30.63	0.38	0.16	0.876	
Worker Problem Score	38	30.87	24.95	-5.92	-2.90	0.006	**
Hartford							
Parent Functioning Score	16	37.88	42.94	5.06	1.76	0.098	†
Worker Functioning Score	285	44.75	45.60	0.86	2.86	0.005	**
Parent Problem Score	16	26.81	25.25	-1.56	-0.37	0.716	
Worker Problem Score	285	23.16	21.57	-1.59	-4.68	0.000	**
New Haven							
Parent Functioning Score	5	51.80	52.20	0.40	0.22	0.840	
Worker Functioning Score	35	43.03	43.60	0.57	0.58	0.569	
Parent Problem Score	5	21.60	19.40	-2.20	-0.61	0.572	
Worker Problem Score	35	27.83	26.83	-1.00	-1.05	0.301	
Southwestern							
Parent Functioning Score	18	46.06	47.94	1.89	0.66	0.516	
Worker Functioning Score	48	46.90	49.65	2.75	2.03	0.048	*
Parent Problem Score	18	31.11	27.72	-3.39	-0.97	0.345	
Worker Problem Score	48	22.65	19.40	-3.25	-2.29	0.027	*
Western							
Parent Functioning Score	23	53.91	56.91	3.00	2.60	0.017	*
Worker Functioning Score	394	45.94	48.36	2.42	10.67	0.000	**
Parent Problem Score	23	22.52	18.61	-3.91	-4.31	0.000	**
Worker Problem Score	394	26.25	23.62	-2.63	-13.29	0.000	**

paired = Number of cases with both intake and discharge scores

<sup>†.05-.10,</sup> 

<sup>\*</sup> P < .05,

<sup>\*\*</sup>P < .01

# Section X: Client & Referral Source Satisfaction

Table 6. Client and Referrer Satisfaction for 211 and EMPS\*

2-1-1 Items	Clients (n=60)	Referrers (n=60)
The 2-1-1 staff answered my call in a timely manner	4.43	4.35
The 2-1-1 staff was courteous	4.57	4.40
The 2-1-1 staff was knowledgeable	4.53	4.37
My phone call was quickly transferred to the EMPS provider	4.52	4.37
Sub-Total Mean: 2-1-1	4.51	4.37
Mobile Crisis Items		
Mobile Crisis responded to the crisis in a timely manner	4.31	4.33
The Mobile Crisis staff was respectful	4.50	4.43
The Mobile Crisis staff was knowledgeable	4.47	4.42
The Mobile Crisis staff spoke to me in a way that I understood	4.47	Х
Mobile Crisis helped my child/family get the services needed or made contact with my current service provider (if you had one at the time you called Mobile Crisis)	4.00	х
The services or resources my child and/or family received were right for us	4.05	Х
The child/family I referred to Mobile Crisis was connected with appropriate services or resources upon discharge from Mobile Crisis	Х	4.12
Overall, I am very satisfied with the way that Mobile Crisis responded to the crisis	4.22	4.38
Sub-Total Mean: Mobile Crisis	4.29	4.34
Overall Mean Score	4.37	4.38

<sup>\*</sup> All items collected by 2-1-1, in collaboration with the PIC and DCF; measured on a scale of 5 (Strongly Agree) to 1 (Strongly Disagree)

#### **Client Comments:**

- "Everything was good I got a lot of help and support"
- Guardian reports finding the service to be a relief when in need of help and not feeling like there is anywhere else to turn.
- Mother reports she hit a small snag in terms of her child's behavior however the family has been utilizing the safety plan that mobile crisis clinician provided. Mother reports a huge improvement since MCI.
- Mother reports CFGC did a great job. She reports services that the family was initially referred to was unsuccessful due to insurance issues. Mother reported, clinician was made aware and worked to identify a provider that would work with the families insurance.
- Caller reports she found the service somewhat helpful but they did not check in as often as they said they would after the initial assessment was completed.
- Mother reported referral was made however she continues to try to connect with recommended therapist. Clinician was reportedly helpful and respectful. Parent reported feeling like she needed additional support beyond the crisis.

#### **Referrer Comments:**

- Clinician reported MCI Clinician was "amazing and went above and beyond and felt out everything quickly and appropriately." "Phenomenal work by clinician"
- "We never have any problems getting through and their response time is quick...everything is going great, especially this year."
- "Mobile Crisis is awesome. They were here today and they are awesome."
- Teacher reported 211 MCI is a great resource. Teacher reported clinician was a great help and connected the school with appropriate resource for youth. MCI clinician also completed classroom observation of youth.
- Issue because MCI clinician was not Spanish speaking but client was. It took a while for team to arrive as they were waiting for interpreter which they were unable to get. MCI clinician was helpful and provided education and appropriate resources to client.
- Caller reports she felt when she called on second shift to make referral she had to wait on hold for what felt to her like 3-5
  minutes.
- Secretary reported it took the MCI team "a while" to come out to the school.

# **Section XI: Training Attendance**

**Table 7. Trainings Completed for All Active\* Staff** 

Table 7. Trainings	DBHRN	Crisis API	DDS	CCSRS	Trauma	Violence	CRC	Str. Based	Emerg. Certificate	QPR	A-SBIRT	ASD	All 12 Trainings Completed	All 12 Completed for Full-Time Staff Only
Statewide (145)*	69%	72%	59%	48%	71%	72%	64%	66%	70%	44%	52%	47%	18%	25%
CHR:MiddHosp (10)*	80%	70%	40%	90%	90%	80%	60%	90%	70%	100%	80%	60%	30%	33%
CHR (12)*	75%	83%	83%	100%	92%	92%	75%	67%	83%	83%	50%	17%	17%	18%
UCFS:NE (4)*	50%	75%	25%	100%	25%	50%	75%	25%	75%	100%	100%	75%	25%	25%
UCFS:SE (11)*	64%	55%	45%	64%	55%	64%	55%	55%	45%	91%	91%	45%	0%	0%
Wheeler:Htfd (16)*^	50%	63%	56%	13%	81%	69%	44%	56%	56%	19%	13%	50%	0%	0%
Wheeler:Meridn (8)*	50%	75%	38%	50%	63%	50%	38%	50%	50%	25%	13%	63%	13%	100%
Wheeler:NBrit (20)*	60%	65%	40%	35%	55%	65%	55%	60%	65%	0%	25%	45%	0%	0%
CliffBeers (23)*	91%	100%	87%	65%	91%	96%	91%	91%	100%	87%	91%	83%	65%	83%
CFGC:South (9)*^	56%	33%	56%	33%	56%	44%	67%	44%	44%	0%	56%	44%	0%	0%
CFGC:Nrwlk (2)*	100%	100%	50%	50%	100%	100%	100%	100%	100%	0%	50%	0%	0%	0%
CFGC:EMPS (6)*	100%	100%	100%	67%	100%	100%	100%	100%	100%	50%	67%	50%	50%	40%
Well:Dnby (10)*^	40%	30%	40%	0%	30%	30%	30%	30%	30%	0%	20%	10%	0%	0%
Well:Torr (3)*	100%	100%	100%	0%	33%	67%	67%	100%	67%	0%	0%	0%	0%	0%
Well:Wtby (11)*	82%	82%	64%	9%	82%	82%	73%	73%	91%	18%	64%	27%	9%	0%
Full-Time Staff Only (89)	75%	76%	67%	60%	75%	79%	72%	71%	75%	54%	64%	51%	25%	1

Note: Count of active staff for each provider or category is in parenthesis.

#### **Training Title Abbreviations:**

DBHRN=Disaster Behavioral Health Response Network

QPR= Question, Persuade and Refer

Crisis API = Crisis Assessment, Planning and Intervention

A-SBIRT= Adolescent Screening, Brief Intervention and Referral to Treatment

DDS=An Overview of Intellectual Developmental Disabilities and Positive Behavioral

Supports

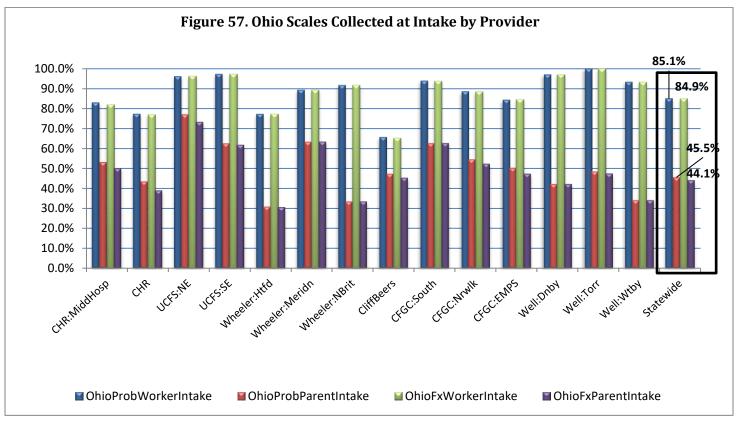
ASD = Autism Spectrum Disorder

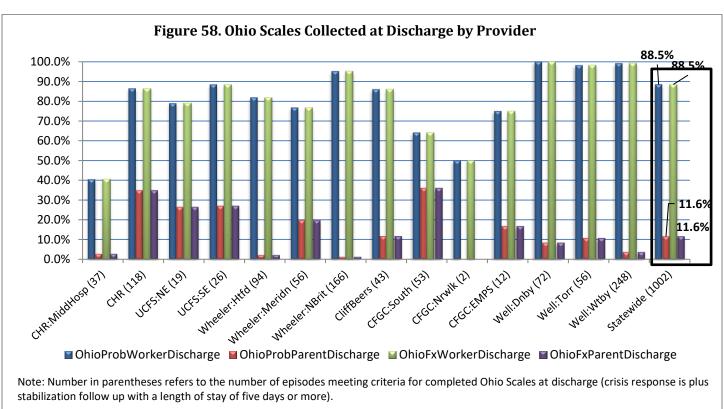
CSSRS=Columbia Suicide Severity Rating Scale
Trauma = Traumatic Stress and Trauma Informed Care
Violence = Violence Assessment and Prevention
Str Based = Strengths-Based Crisis Planning
CRC = 21st Century Culturally Responsive Mental Health Care
Emerg. Certificate= Emergency Certificate

<sup>\*</sup> Includes all active full-time, part-time and per diem staff as of Dec. 31, 2018.

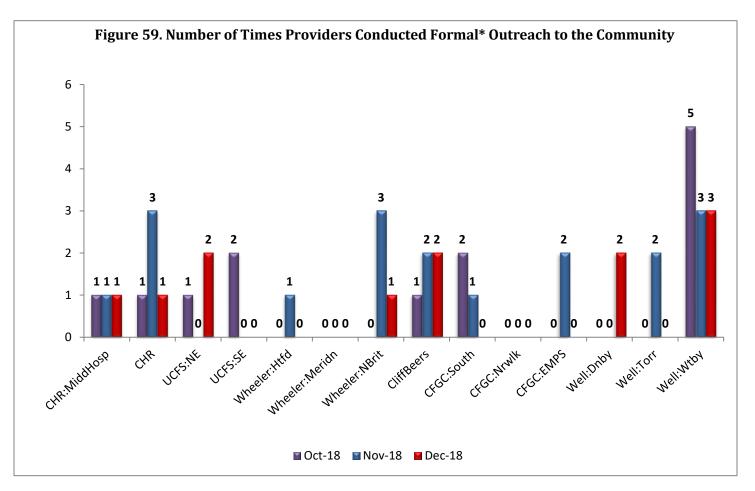
<sup>^</sup>Includes staff who did not have an assigned site reported and/or support multiple sites.

# **Section XII: Data Quality Monitoring**





# **Section XIII: Provider Community Outreach**



\*Formal outreach refers to: 1) In person presentations lasting 30 minutes, preferably more, using the EMPS PowerPoint slides and including distribution to attendees of marketing materials and other EMPS resources; 2) Outreach presentations that are in person that include workshops, conferences, or similar gatherings in which EMPS is discussed for at least an hour or more; 3) Outreach presentations that are not in person which may include workshops, conferences, or similar gatherings in which the EMPS marketing video, banner, and table skirt are set up for at least 2 hours with marketing materials made available to those who would like them; 4) The EMPS PIC considers other outreaches for inclusion on a case-by-case basis, as requested by EMPS providers.