



**EMERGENCY MOBILE
PSYCHIATRIC SERVICES**

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2-1-1



Emergency Mobile Psychiatric Services (EMPS) Performance Improvement Center (PIC)

Monthly Report: July 2011

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The Emergency Mobile Psychiatric Services Performance Improvement Center
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Executive Summary

Call and Episode Volume: In July 2011, **211 received 506 calls** including 390 calls (77%) routed to EMPS providers and 116 calls (23%) handled by 211 (e.g., calls for other information or resources, calls transferred to 911). The percent distribution of calls routed to EMPS providers and those handled by 211 remains fairly consistent from month to month. This month represents a slight decrease in call volume compared to July 2010 (572 calls).

Among the **390 episodes of care** generated this month (compared to 437 episodes in July 2010), episode volume ranged from 39 episodes (New Haven service area) to 121 episodes (Hartford service area). The statewide average service reach per 1,000 children this month was 0.46, with service area rates ranging from 0.31 (New Haven) to 0.74 (Hartford) relative to their specific child populations. 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 1.16 per 1,000 children in poverty, with service area rates ranging from 0.62 (New Haven) to 2.10 (Eastern).

Mobility: **Statewide mobility was 93.9% this month**, compared to 86.8% in July 2010. The lowest mobility percentage was 90.5% (New Haven) and the highest was 98.1% (Western). **All service areas had a mobility percentage above the 90% goal.**

Response Time: Statewide, this month **89% of mobile episodes received a Face-to-face response in 45 minutes or less**, which is 9% higher than it was a year ago in July of 2010 (80%). Performance on this indicator ranged from 79% (New Haven) to 95% (Eastern). In addition, the statewide median mobile response time this month was 28 minutes, with all six service areas demonstrating a median mobile response time of 31 minutes or less. These data strongly suggest that EMPS service providers are offering timely responses to crises in the community.

Length of Stay: Statewide, among discharged episodes, 12% (current month) and 9% (cumulative) of Phone Only episodes exceeded one day, 29% (current month) and 29% (cumulative) of Face-to-face episodes exceeded five days, and **10% (current month) and 10% (cumulative) of Plus Stabilization Follow-up episodes exceeded 45 days.**

Statewide, the median LOS for open episodes of care with a Crisis Response of Phone Only was 45 days (n=18) and ranged from 45 days (New Haven) to 78.5 days (Southwestern). Four service areas (Central, Eastern, Hartford and Western) had no open Phone Only episodes this month. Statewide, the median LOS for a Crisis Response of Face-to-face was 41.5 days (n=54) and ranged from 5 days (Western) to 152.5 days (New Haven). For the Plus Stabilization Follow-up Crisis Response, the statewide median LOS was 17 days (n=111) with a range from 8.5 days (Western) to 92 days (Southwestern). This tells us that families remain open for services beyond the benchmarks for some crisis response categories. 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.

Data Quality Monitoring: The Worker version of the Ohio Scales was completed more consistently than the Parent version. This month statewide completion rates for **intake** Ohio Scales were: Worker Problem Scale (94%), Parent Problem Scale (77%), Worker Functioning Scale (94%), and Parent Functioning Scale (75%). The statewide completion rate for **discharge** Ohio Scales this month were: Worker Problem Scale (89%), Parent Problem Scale (33%), Worker Functioning Scale (89%), and Parent Functioning Scale (31%). Completion of the Ohio Scales has been significantly lower the last few months and will be an area for improvement in the future.

Community Outreach: At the end of Q4 FY11, three of the fifteen EMPS providers were required to complete four outreaches per month; they had a service reach rate below 2.0 episodes per 1,000 children (CFG-C-Norwalk-formerly Mid-Fairfield Child Guidance, Child Guidance of Southern CT and Wellpath-Danbury). Two providers (CFG-C-Norwalk and Child Guidance of Southern CT) met the requirement this month.

Nine of twelve providers (Middlesex Hospital, CHR-Manchester, UCFS/CHR-Mansfield, UCFS-Norwich, Wheeler-Meriden, Wheeler-New Britain, CFG-C-Bridgeport, Wellpath-Torrington and Wellpath-Waterbury) met the

Section I: Primary EMPS Performance Indicators

Figure 1. Total Call Volume by Call Type

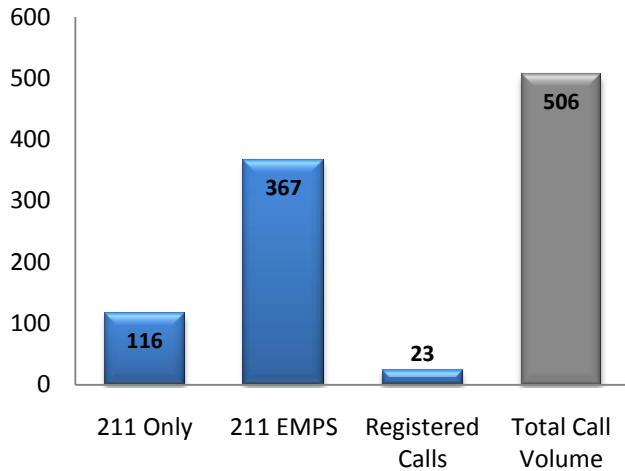


Figure 2. EMPS Episodes by Service Area
(Total Episodes=390)

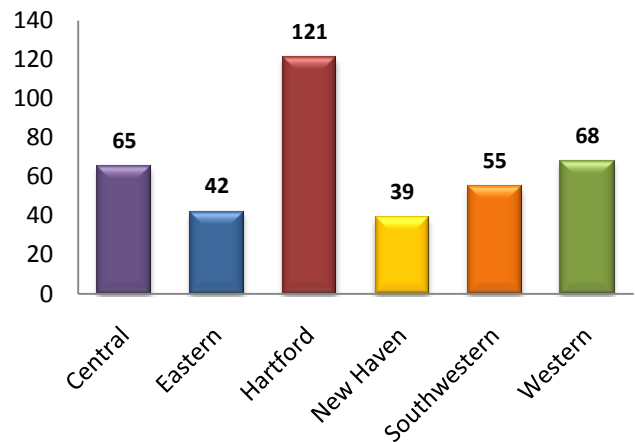


Figure 3. Number Served Per 1,000 Children

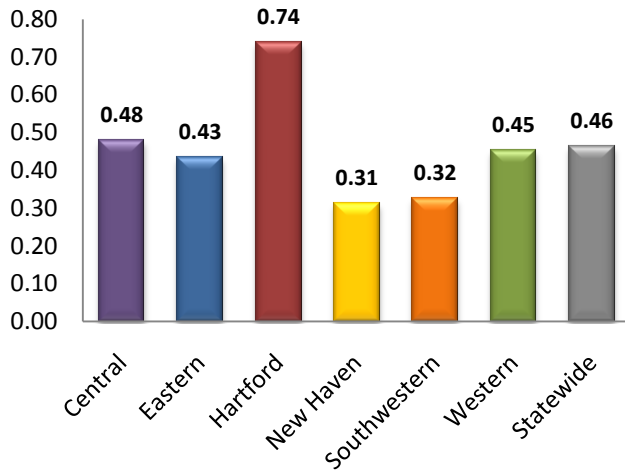


Figure 4. Number Served Per 1,000 Children in Poverty

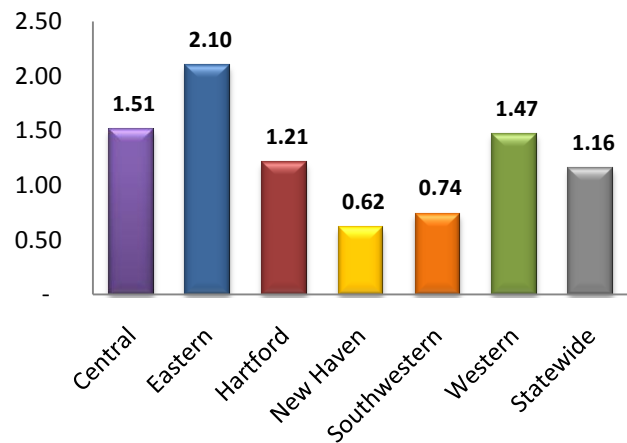


Figure 5. Mobile Response by Service Area

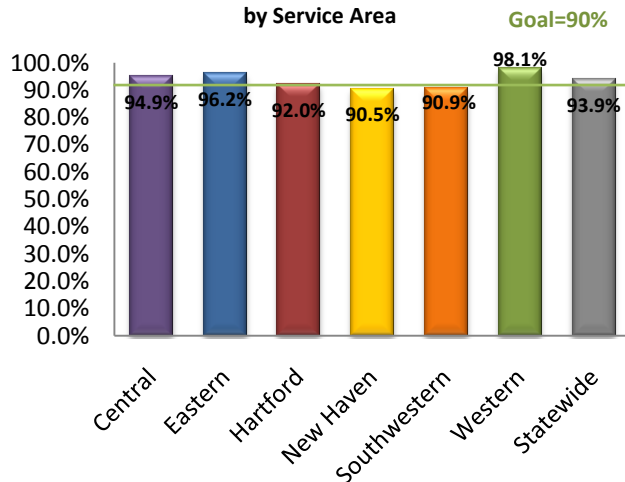
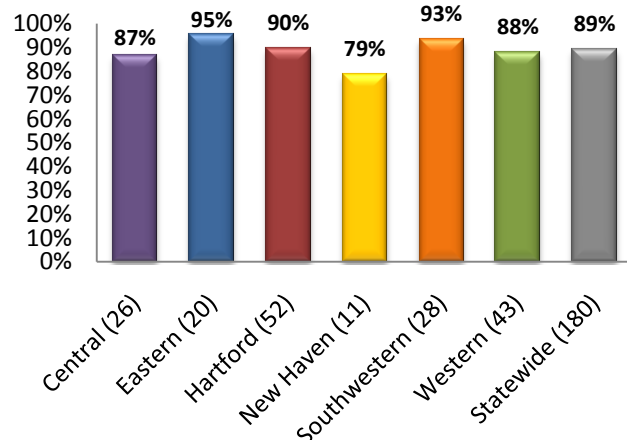


Figure 6. Total Mobile Episodes with a Response Time Under 45 Minutes



Note: Count of mobile episodes under 45 mins. are in parenthesis

Section II: Episode Volume

Figure 7. Total Call Volume by Call Type

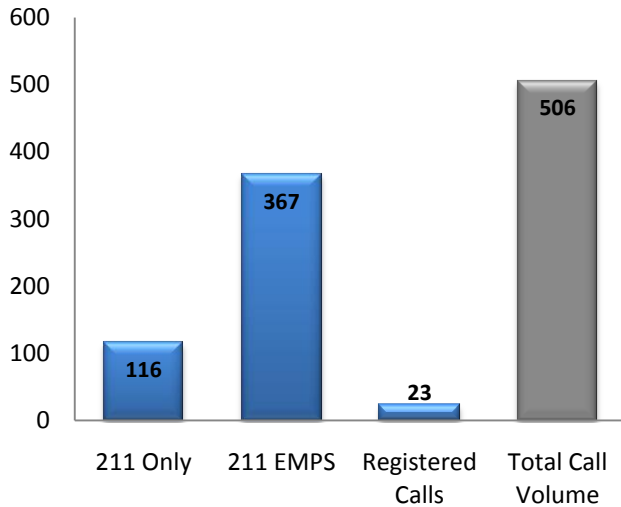
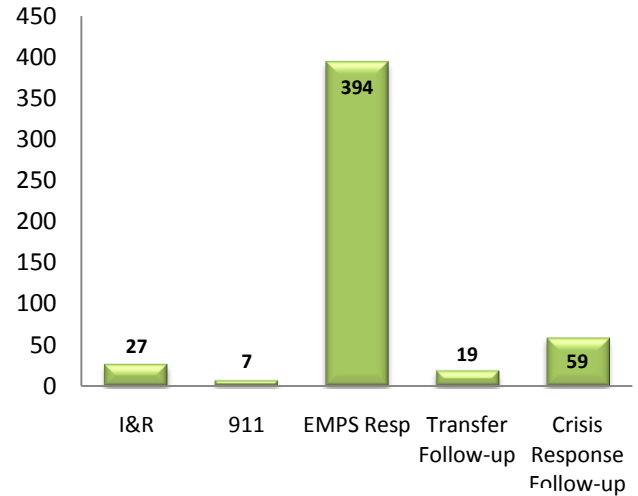


Figure 8. Statewide 211 Disposition Frequency



Note: EMPS Resp includes 4 with no designated provider

Figure 9. EMPS Response Episodes by Provider (Total Episodes=390)

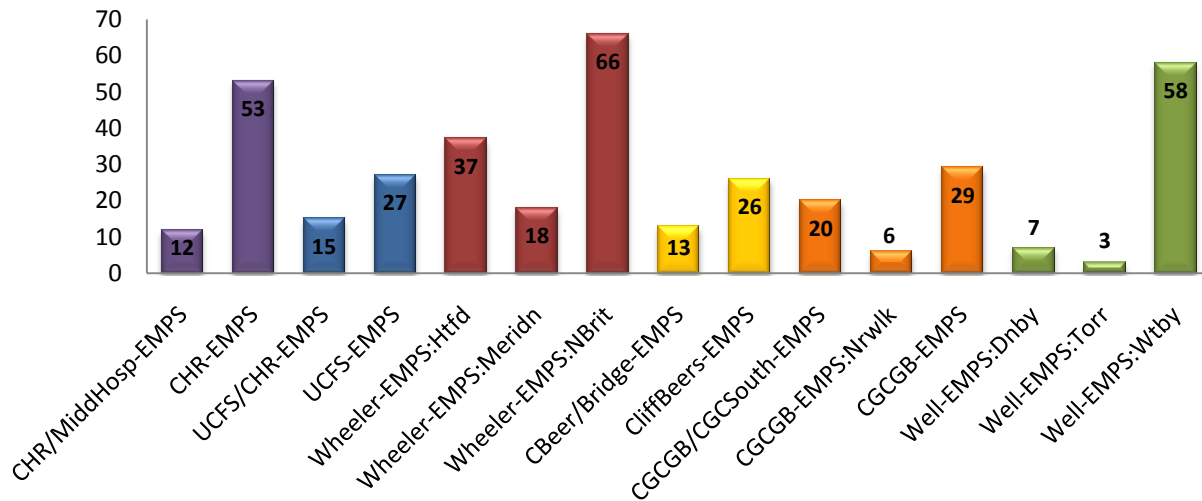


Figure 10. Number Served Per 1,000 Children by Provider

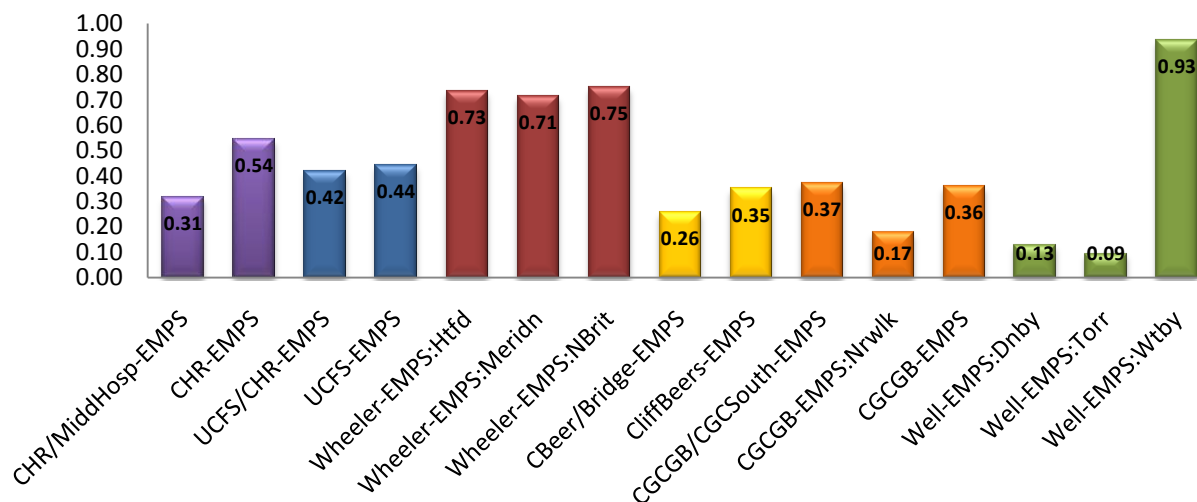


Figure 11. Episode Intervention Types by Service Area

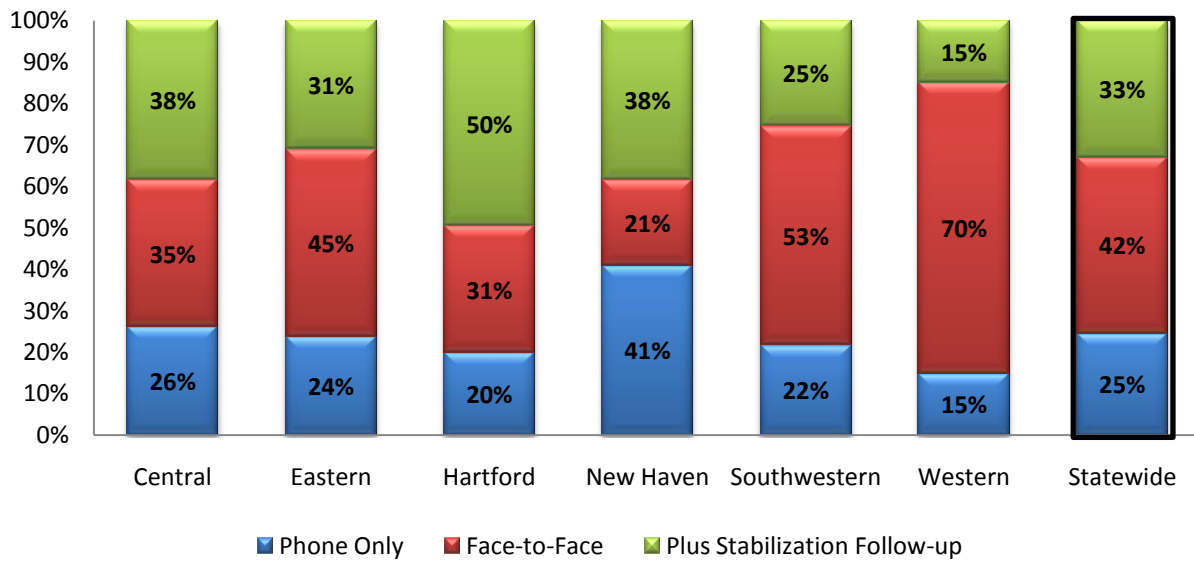
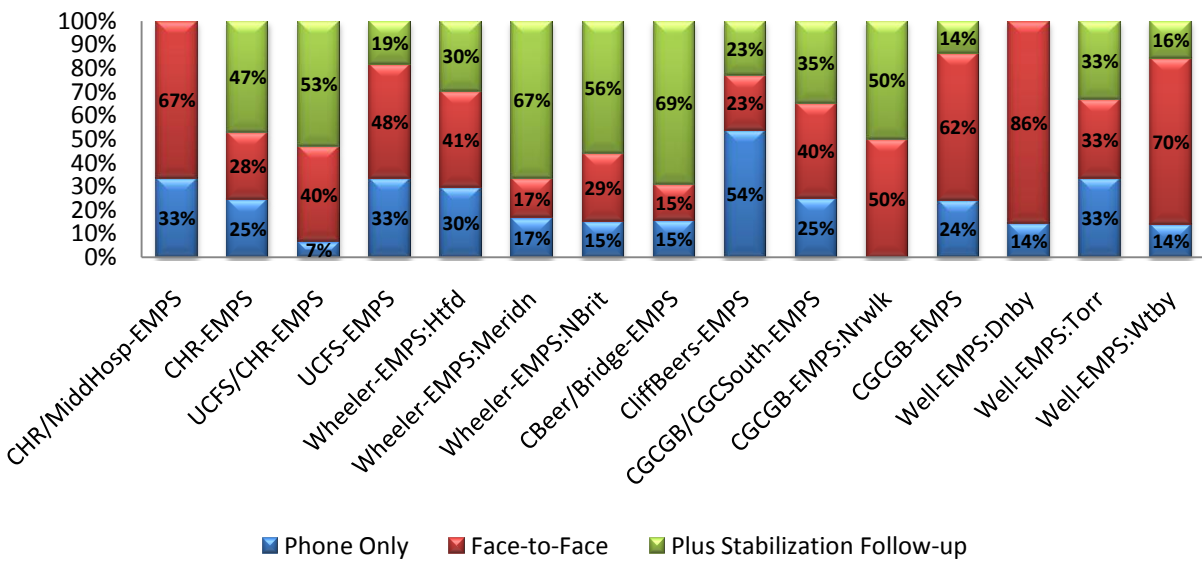
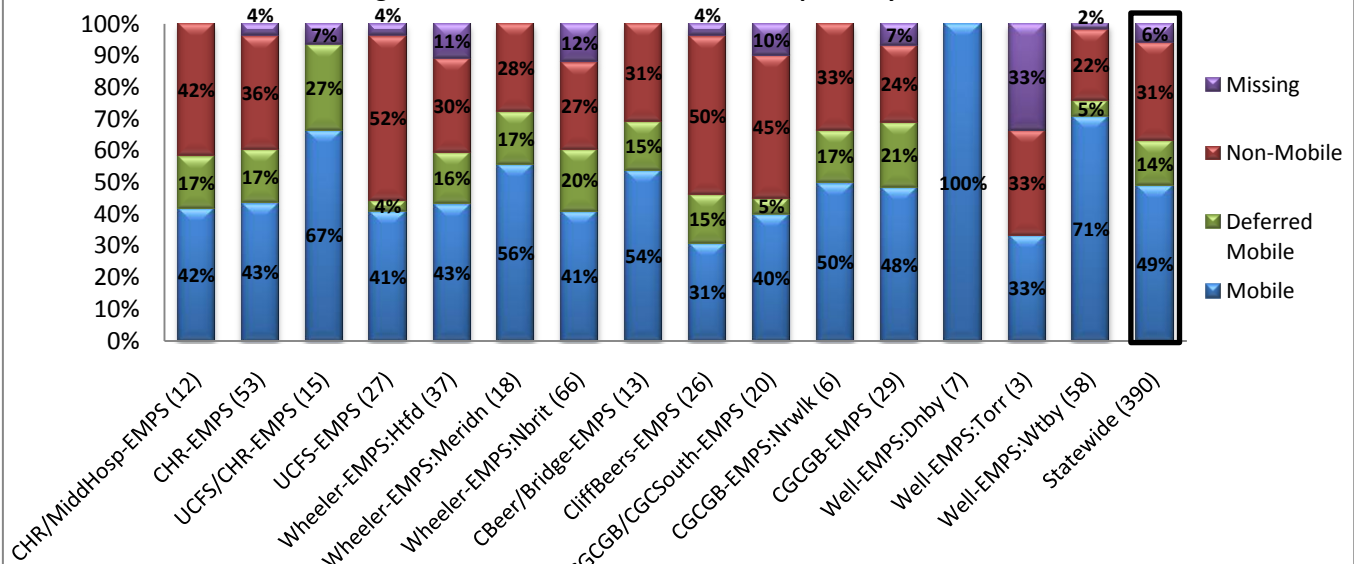


Figure 12. Episode Intervention Types by Provider



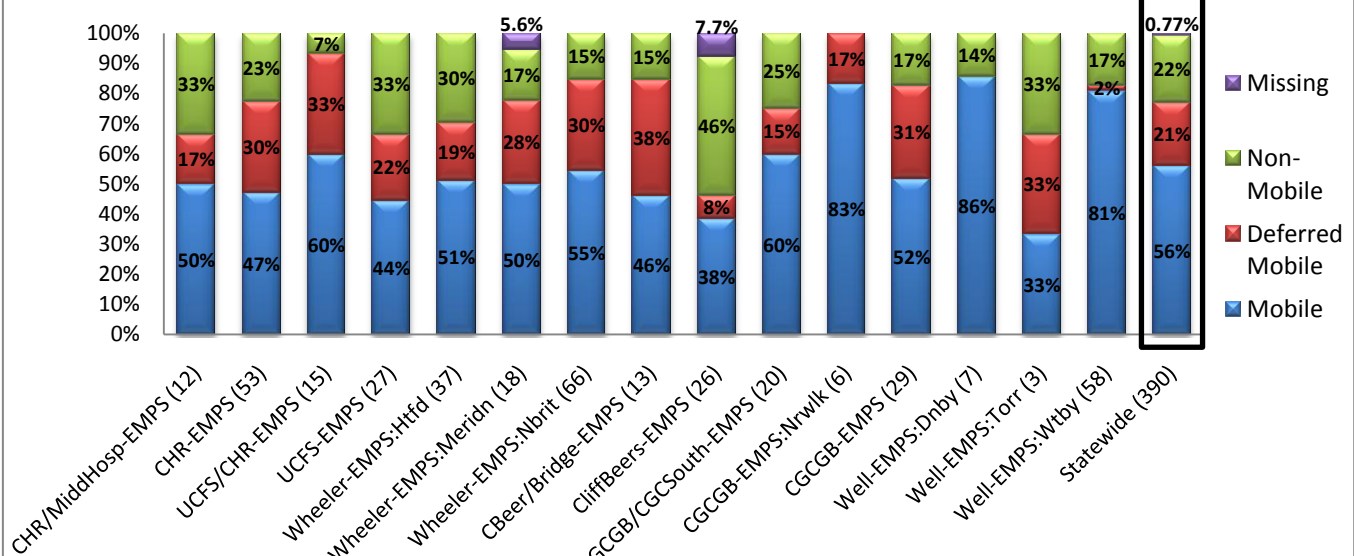
Section III: 211 Recommendations and EMPS Response

Figure 13. 211 Recommended Initial Response by Provider



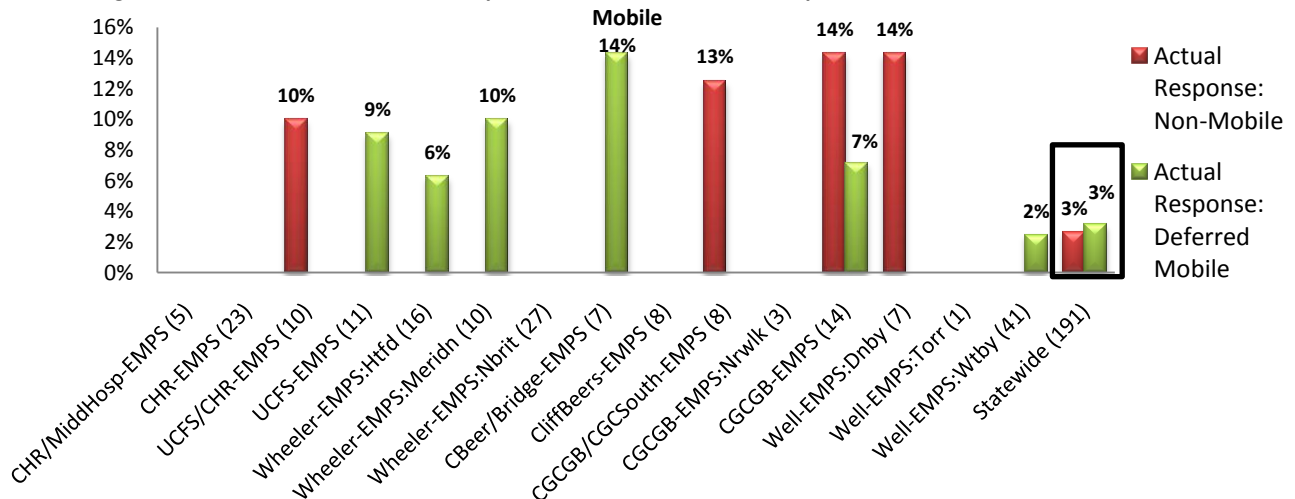
Note: Total count of EMPS response episodes are in parenthesis

Figure 14. Actual Initial EMPS Response by Provider



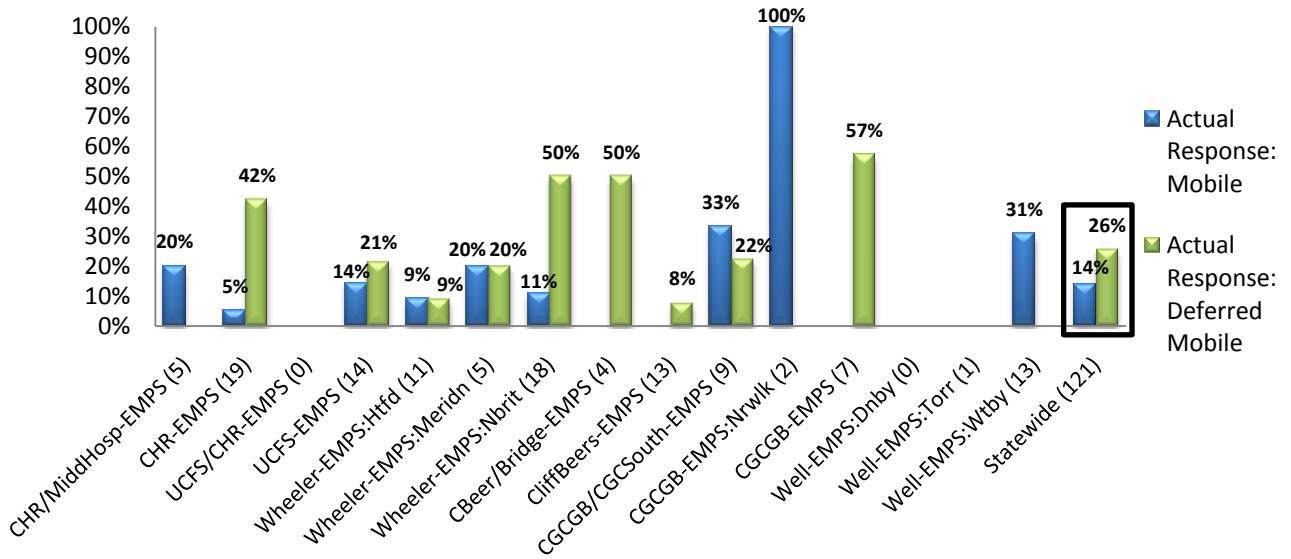
Note: Total count of EMPS response episodes are in parenthesis

Figure 15. 211 Recommended Mobile Episodes Where Actual EMPS Response was Non-Mobile or Deferred



Note: Total count 211 Rec of Mobile are in parenthesis

Figure 16. 211 Recommended Non-Mobile Episodes Where Actual EMPS Response was Mobile or Deferred



Note: Total count 211 Rec of Non-Mobile are in parenthesis

Figure 17. Mobile Response by Service Area

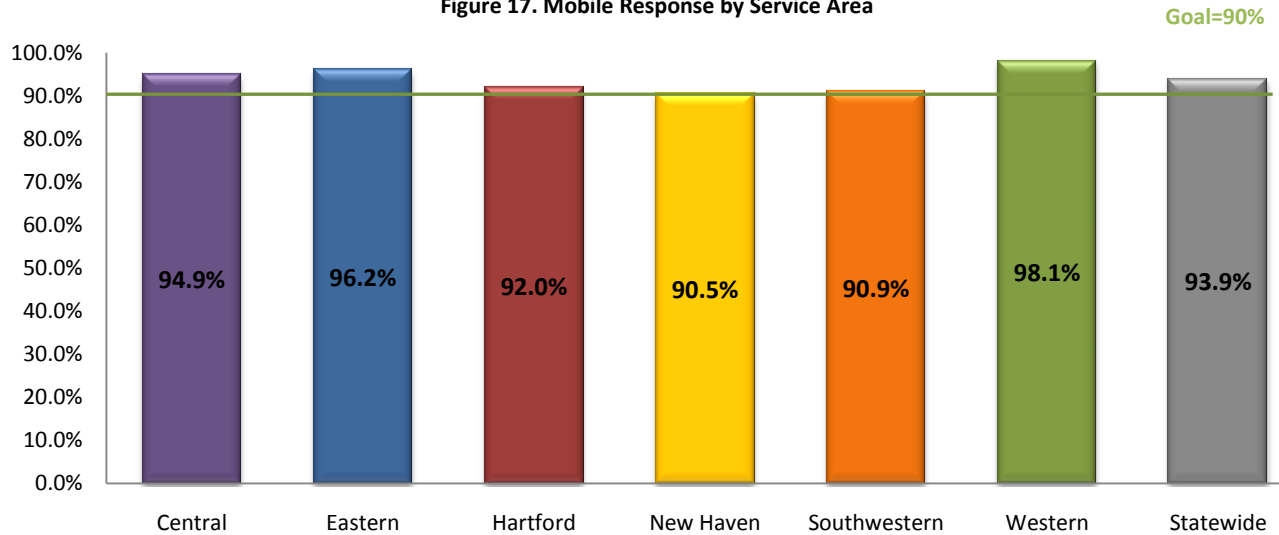
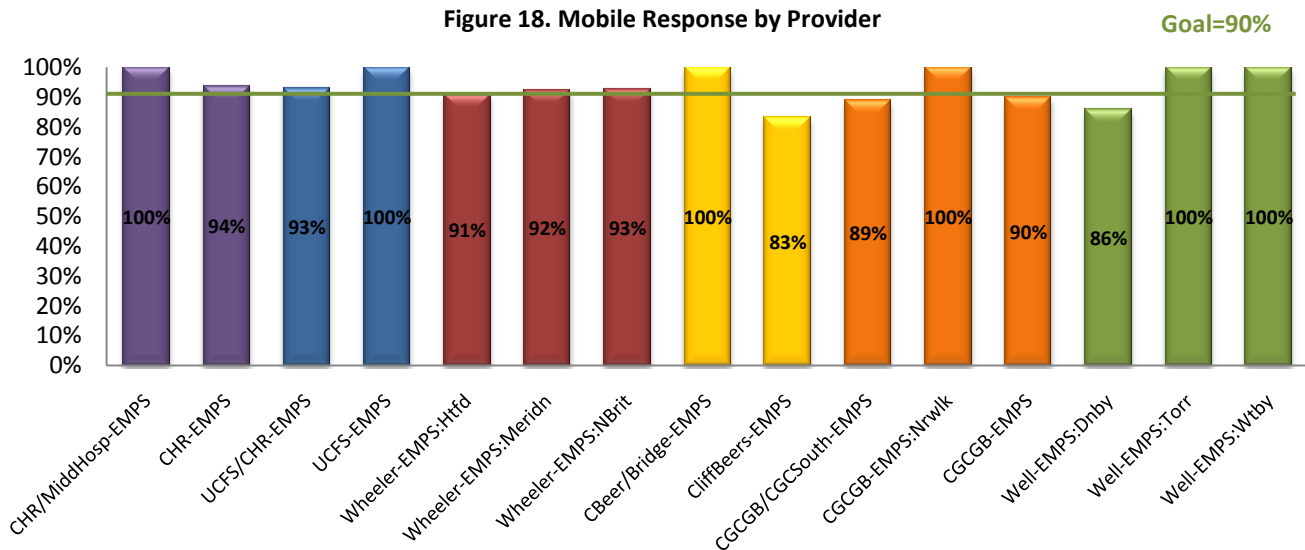
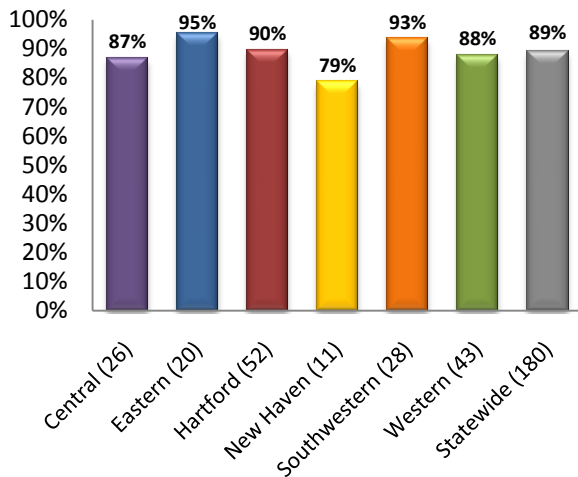


Figure 18. Mobile Response by Provider



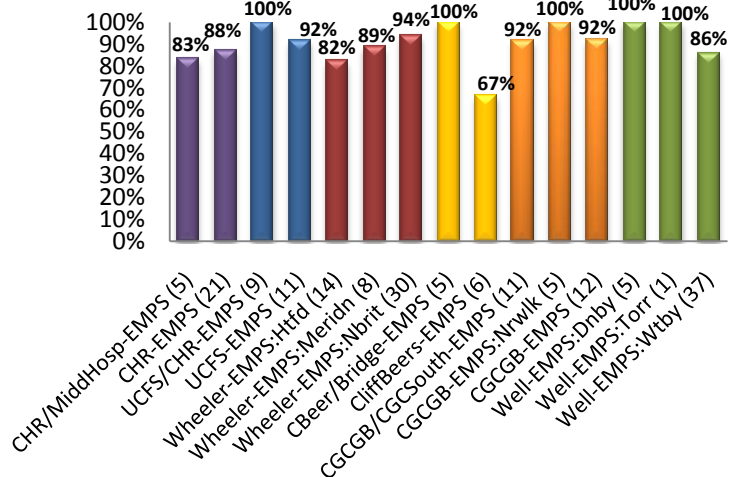
Section IV: Response Time

Figure 19. Total Mobile Episodes with Response Time Under 45 Minutes



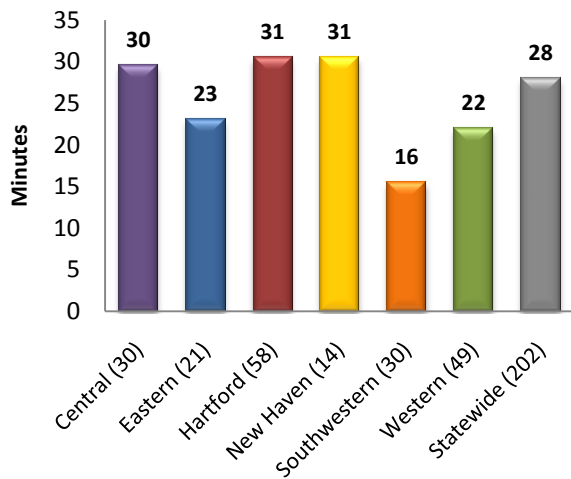
Note: Count of mobile episodes under 45 mins. are in parenthesis

Figure 20. Total Mobile Episodes with Response Time Under 45 Minutes by Provider



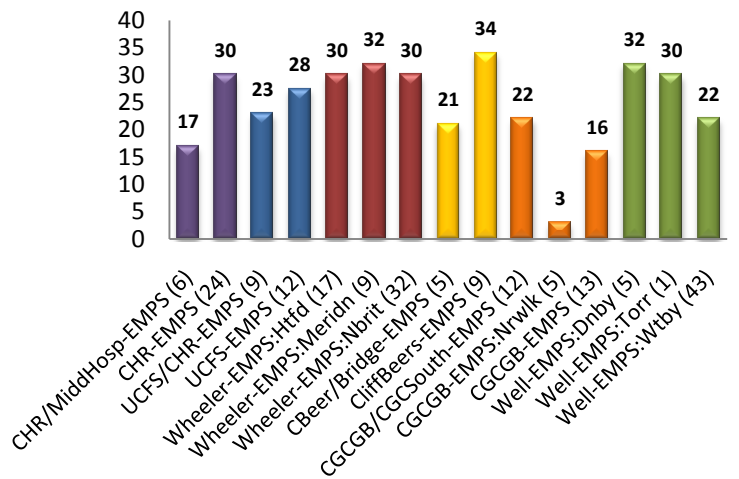
Note: Count of mobile episodes under 45 mins. are in parenthesis

Figure 21. Median Mobile Response Time in Minutes



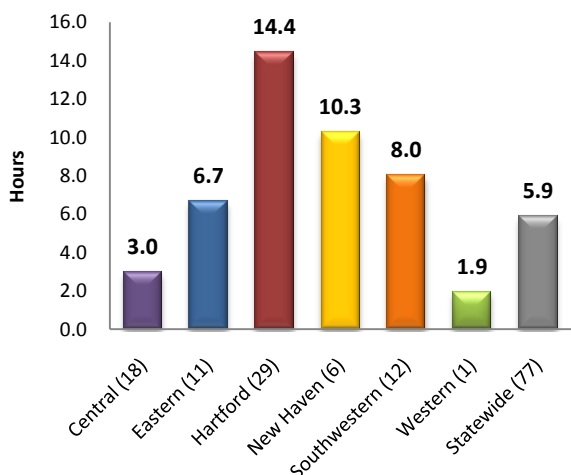
Note: Count of mobile EMPS response episodes are in parenthesis.

Figure 22. Median Mobile Response Time by Provider in Minutes



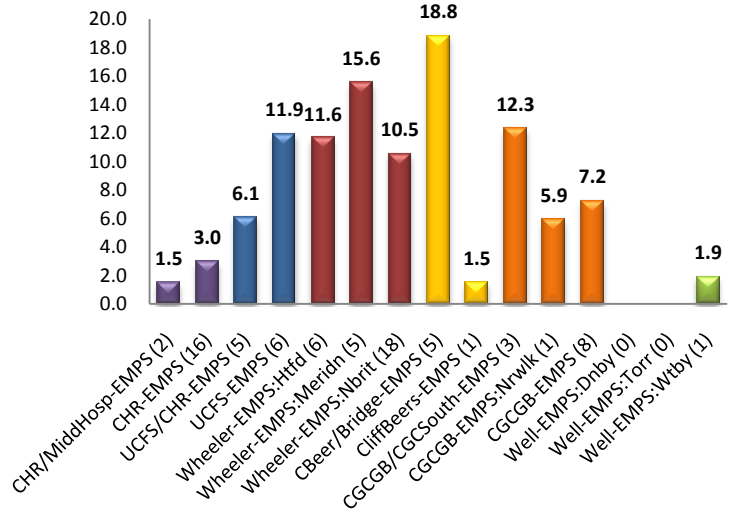
Note: Count of mobile EMPS response episodes are in parenthesis.

Figure 23. Median Deferred Mobile Response Time in Hours



Note: Count of deferred mobile EMPS response episodes are in parenthesis.

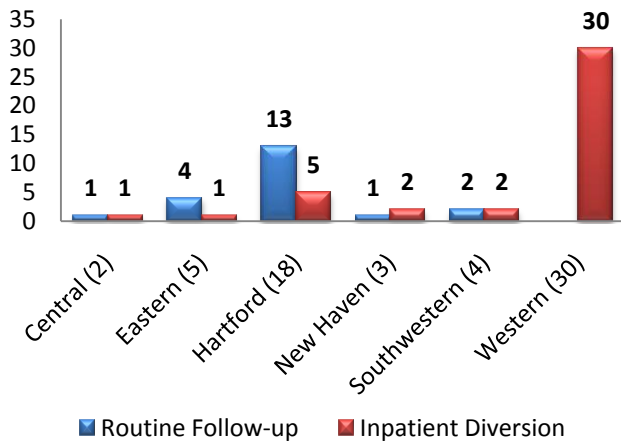
Figure 24. Median Deferred Mobile Response Time by Provider in Hours



Note: Count of deferred mobile EMPS response episodes in parenthesis.

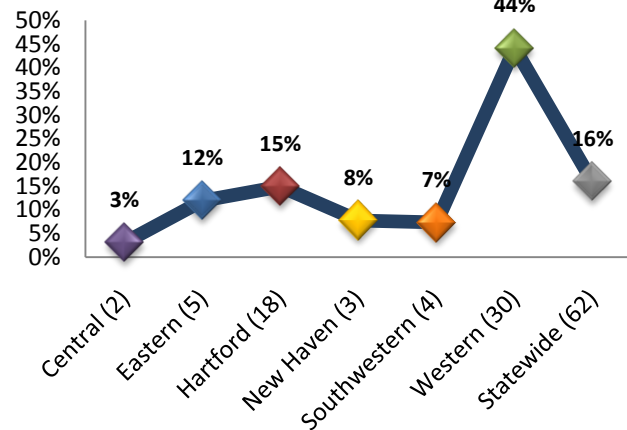
Section V: Emergency Department Referral Type

Figure 25. Type of Emergency Dept. Referral (n=62)



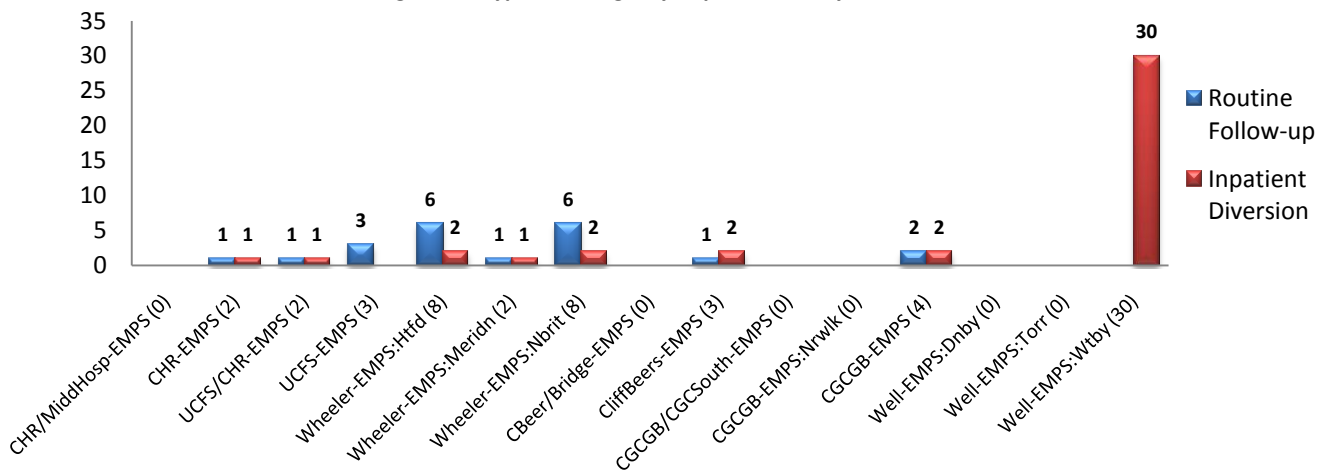
Note: Count total ED referrals are in parenthesis

Figure 26. Emergency Dept. Referral (% Total EMPS Episodes)



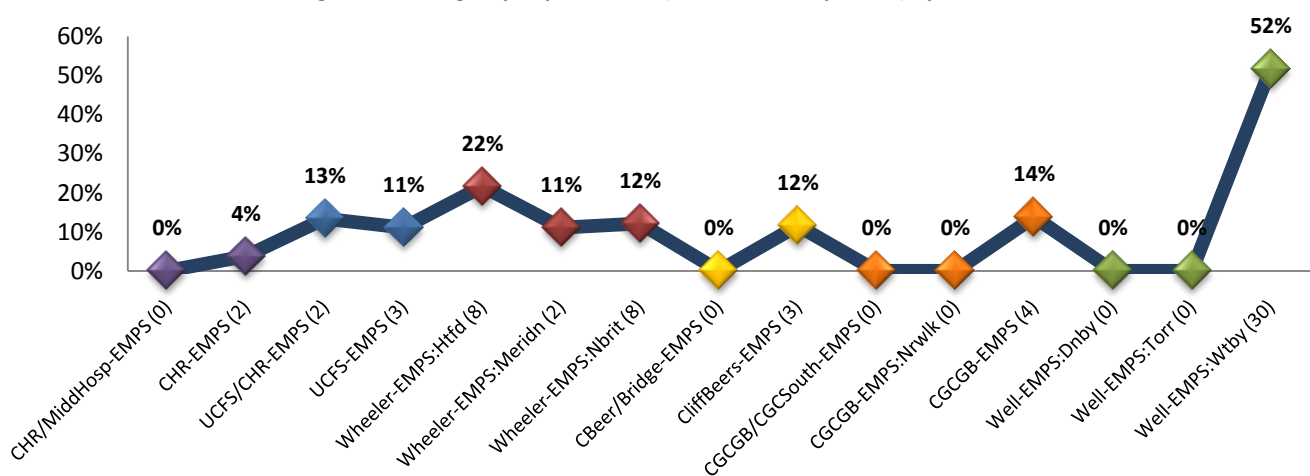
Note: Count total ED referrals are in parenthesis

Figure 27. Type of Emergency Dept. Referral by Provider



Note: Count total ED referrals are in parenthesis

Figure 28. Emergency Dept. Referral (% Total EMPS Episodes) by Provider



Note: Count total ED referrals are in parenthesis

Section VI: Length of Stay

Table 1. Length of Stay for Discharged Episodes of Care in Days

		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
		<i>Discharged Episodes for Current Reporting Period</i>									<i>Cumulative Discharged Episodes*</i>								
		Mean			Median			Percent			Mean			Median			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.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45
1	STATEWIDE	0.7	7.2	26.9	0	1.0	17.0	12%	29%	10%	0.8	6.8	26.8	0	2.0	23.0	9%	29%	10%
2	Central	0.5	12.8	35.5	0	4.0	32.5	8%	40%	19%	0.9	9.6	30.4	0	3.0	23.0	10%	40%	15%
3	CHR/MiddHosp-EMPS	0.0	0.0	27.5	0	0.5	27.5	0%	0%	0%	1.3	2.4	7.2	0	1.0	6.0	17%	13%	1%
4	CHR-EMPS	0.6	13.9	35.9	0	4.0	32.5	9%	43%	20%	0.6	15.7	33.6	0	8.0	28.0	6%	63%	17%
5	Eastern	0.1	2.0	18.7	0	0.5	19.0	0%	17%	0%	0.2	2.3	21.7	0	1.0	20.0	4%	4%	1%
6	UCFS/CHR-EMPS	0.5	1.3	22.6	1	0.0	20.0	0%	0%	0%	0.2	2.2	21.6	0	0.0	20.0	3%	7%	2%
7	UCFS-EMPS	0.0	3.5	14.8	0	3.5	10.0	0%	50%	0%	0.2	2.3	21.9	0	2.0	20.0	4%	2%	0%
8	Hartford	0.6	7.5	26.2	0	3.0	25.5	11%	36%	7%	1.0	5.8	26.2	0	3.0	22.0	15%	28%	12%
9	Wheeler-EMPS:Htfd	0.9	5.8	21.6	0	1.0	20.0	15%	29%	6%	1.4	5.8	25.6	0	3.0	22.0	19%	30%	9%
10	Wheeler-EMPS:Meridn	0.0	8.0	31.2	0	6.0	32.5	0%	56%	14%	1.4	5.0	22.9	0	3.0	20.0	26%	27%	7%
11	Wheeler-EMPS:NBrit	0.4	8.6	26.4	0	3.0	28.0	7%	33%	4%	0.3	6.0	27.6	0	3.0	23.0	7%	26%	14%
12	New Haven	0.8	4.7	23.3	0	1.0	20.5	17%	18%	8%	1.2	8.3	27.1	0	3.0	26.0	6%	41%	8%
13	CBeer/Bridge-EMPS		8.6	17.2		4.0	14.0		40%	0%	2.4	4.3	25.9	0	0.0	27.0	13%	18%	3%
14	CliffBeers-EMPS	0.8	3.6	29.5	0	1.0	25.0	17%	12%	17%	1.0	10.1	28.3	0	6.0	25.0	5%	51%	15%
15	Southwestern	0.5	8.6	26.0	0	4.0	22.0	13%	25%	12%	0.9	9.4	31.2	0	2.0	32.0	9%	36%	12%
16	CGCGB/CGCSouth-EMPS	0.7	8.1	28.4	0	4.0	21.0	14%	29%	20%	0.4	5.6	40.3	0	0.0	41.0	4%	13%	34%
17	CGCGB/MidFfd-EMPS											4.0	16.0		4.0	16.0		50%	0%
18	CGCGB-EMPS	0.3	8.8	24.5	0	3.0	22.0	11%	24%	7%	1.4	10.6	27.0	0	4.0	29.0	16%	43%	3%
19	Western	1.8	3.9	18.4	0	0.0	11.0	25%	23%	5%	0.5	5.8	22.3	0	1.0	21.0	4%	27%	5%
20	Well-EMPS:Dnby		0.0			0.0			0%		0.5	5.5	17.0	0	0.0	14.0	4%	26%	1%
21	Well-EMPS:Torr	0.0	3.6	8.7	0	3.0	10.0	0%	20%	0%	0.2	9.0	20.0	0	6.0	20.5	4%	50%	2%
22	Well-EMPS:Wtby	2.3	4.7	20.2	1	0.5	15.5	33%	27%	6%	0.6	5.4	24.8	0	0.0	24.5	5%	23%	7%

* Includes discharged episodes from January 1, 2010 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 2. Number of Episodes for Discharged Episodes of Care

		A	B	C	D	E	F	G	H	I	J	K	L
		<i>Discharged Episodes for Current Reporting Period</i>						<i>Cumulative Discharged Episodes*</i>					
		N used Mean/Median			N used for Percent			N used Mean/Median			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	78	155	184	9	45	18	2771	6005	5082	242	1765	522
2	Central	13	25	42	1	10	8	534	757	860	53	304	130
3	CHR/MiddHosp-EMPS	2	2	2	0	0	0	173	346	103	30	46	1
4	CHR-EMPS	11	23	40	1	10	8	361	411	757	23	258	129
5	Eastern	7	6	10	0	1	0	331	726	545	12	27	7
6	UCFS/CHR-EMPS	2	4	5	0	0	0	96	253	316	3	17	6
7	UCFS-EMPS	5	2	5	0	1	0	235	473	229	9	10	1
8	Hartford	28	47	76	3	17	5	668	1345	2102	99	376	244
9	Wheeler-EMPS:Htfd	13	17	17	2	5	1	291	658	626	54	198	59
10	Wheeler-EMPS:Meridn	1	9	14	0	5	2	104	146	356	27	40	24
11	Wheeler-EMPS:NBrit	14	21	45	1	7	2	273	541	1120	18	138	161
12	New Haven	6	22	12	1	4	1	452	743	585	29	303	49
13	CBeer/Bridge-EMPS	0	5	6	0	2	0	64	234	303	8	42	8
14	CliffBeers-EMPS	6	17	6	1	2	1	388	509	282	21	261	41
15	Southwestern	16	24	25	2	6	3	274	1115	577	26	405	72
16	CGCGB/CGCSouth-EMPS	7	7	10	1	2	2	141	262	182	5	35	62
17	CGCGB/MidFfd-EMPS	0	0	0	0	0	0	0	2	1	0	1	0
18	CGCGB-EMPS	9	17	15	1	4	1	133	851	394	21	369	10
19	Western	8	31	19	2	7	1	512	1319	413	23	350	20
20	Well-EMPS:Dnby	0	4	0	0	0	0	104	165	69	4	43	1
21	Well-EMPS:Torr	2	5	3	0	1	0	108	141	102	4	71	2
22	Well-EMPS:Wtby	6	22	16	2	6	1	300	1013	242	15	236	17

* Includes discharged episodes from January 1, 2010 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 3. Length of Stay for Open Episodes of Care in Days

		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
		<i>Episodes Still in Care*</i>									<i>N of Episodes Still in Care*</i>					
		Mean			Median			Percent			N used Mean/Median			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	110.9	105.7	61.6	45.0	41.5	17.0	100%	87%	33%	18	54	111	18	47	37
2	Central		108.6	16.4		23.0	12.0		80%	7%	0	5	15	0	4	1
3	CHR/MiddHosp-EMPS		476.0			476.0			100%		0	1	0	0	1	0
4	CHR-EMPS		16.8	16.4		17.0	12.0		75%	7%	0	4	15	0	3	1
5	Eastern		13.0	10.0		13.0	10.0		100%	0%	0	1	4	0	1	0
6	UCFS/CHR-EMPS			10.0			10.0			0%	0	0	2	0	0	0
7	UCFS-EMPS		13.0	10.0		13.0	10.0		100%	0%	0	1	2	0	1	0
8	Hartford		21.5	21.4		8.5	13.0		50%	12%	0	4	26	0	2	3
9	Wheeler-EMPS:Htfd		8.5	23.3		8.5	18.0		50%	14%	0	2	7	0	1	1
10	Wheeler-EMPS:Meridn			31.2			9.0			20%	0	0	5	0	0	1
11	Wheeler-EMPS:NBrit		34.5	17.0		34.5	13.0		50%	7%	0	2	14	0	1	1
12	New Haven	114.4	184.5	84.4	45.0	152.5	25.0	100%	100%	35%	14	22	20	14	22	7
13	CBeer/Bridge-EMPS	227.2	258.2	105.5	184.0	240.0	26.0	100%	100%	45%	6	13	11	6	13	5
14	CliffBeers-EMPS	29.9	78.0	58.6	24.0	42.0	24.0	100%	100%	22%	8	9	9	8	9	2
15	Southwestern	98.8	54.8	105.8	78.5	25.5	92.0	100%	94%	65%	4	18	40	4	17	26
16	CGCGB/CGCSouth-EMPS	182.0	98.6	126.7	182.0	95.0	104.5	100%	100%	81%	2	8	32	2	8	26
17	CGCGB/MidFfd-EMPS			16.0			16.0			0%	0	0	1	0	0	0
18	CGCGB-EMPS	15.5	19.7	23.0	15.5	21.5	16.0	100%	90%	0%	2	10	7	2	9	0
19	Western		5.8	12.5		5.0	8.5		25%	0%	0	4	6	0	1	0
20	Well-EMPS:Dnby										0	0	0	0	0	0
21	Well-EMPS:Torr			20.5			20.5			0%	0	0	2	0	0	0
22	Well-EMPS:Wtby			8.5		5.0	8.5		25%	0%	0	4	4	0	1	0

* Includes episodes still in care from January 1, 2010 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

Section XI: Data Quality Monitoring

Figure 29. Ohio Scales Collected at Intake by Provider

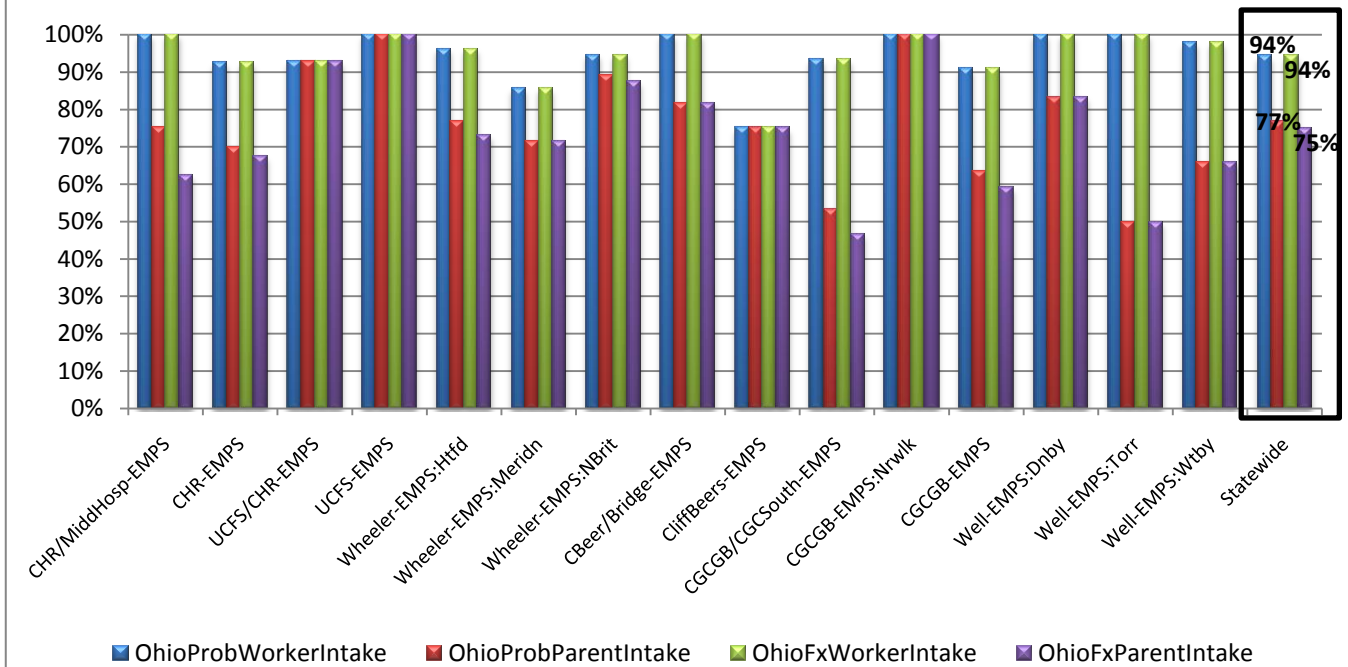
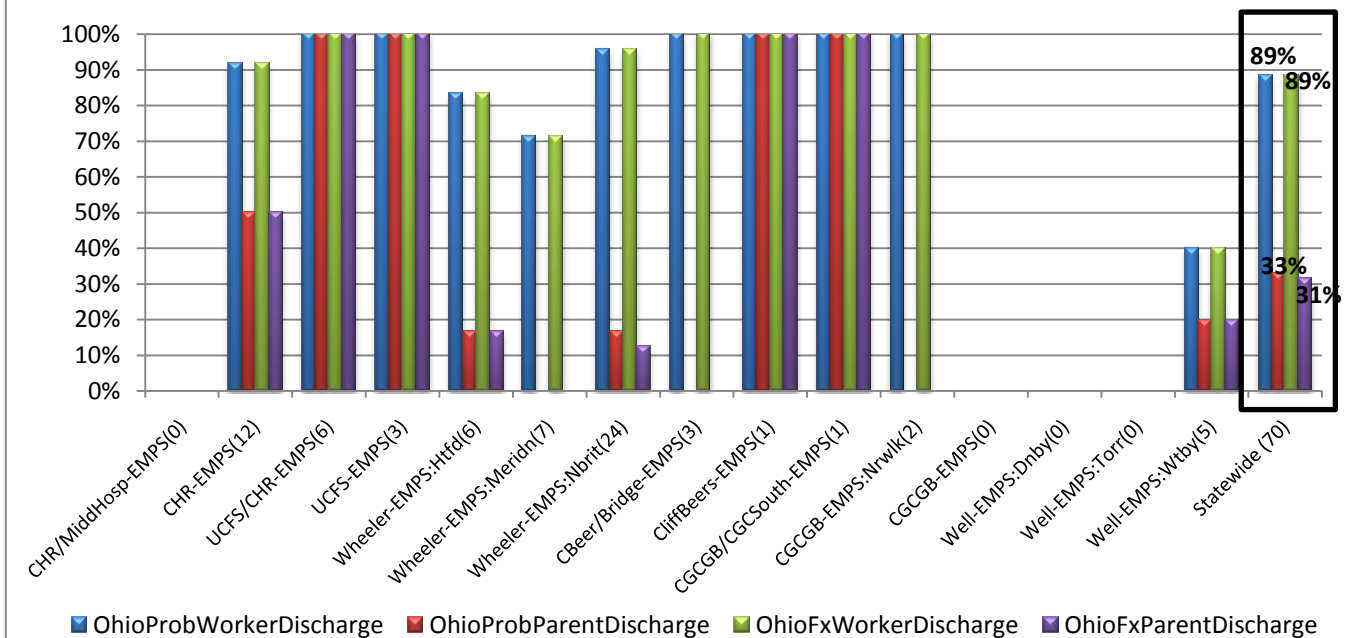
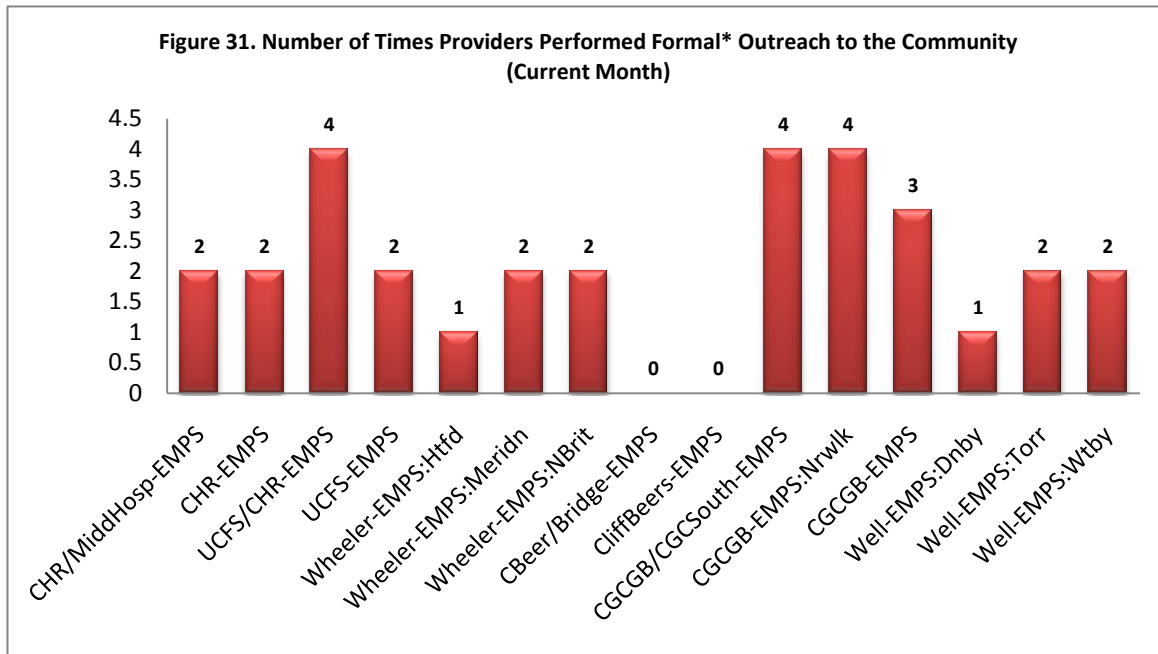


Figure 30. Ohio Scales Collected at Discharge by Provider



Note: Count number of expected Ohio Scales completed at discharge in parenthesis

Section VIII: Community Outreach Efforts



* 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.

Appendix A: Description of Calculations

Section I: Primary EMPS Performance Indicators

- Figure 1 tabulates the total number of calls by service area by 211-only, 211-EMPS, or registered calls.
- Figure 2 calculates the total number of EMPS episodes for the specified time frame for the designated service area.
- Figure 3 shows the number of children served by EMPS per 1,000 children. This is calculated by summing the total number of episodes for the specified service area multiplied by 1,000; this result is then divided by the total number of youth in that particular service area as reported by U.S. Census data.
- Figure 4 determines the number of children served by EMPS that are TANF eligible out of the total number of children in that service area that are eligible for free or reduced lunch¹. This is calculated by selecting only those episodes that are coded as face-to-face or crisis response stabilization plus follow-up divided by the total number of youth receiving free or reduced lunch¹ in that service area.
- Figure 5 isolates the total number of episodes that 211 recommended as mobile or deferred mobile. This number of episodes is then divided by the total number of episodes where the actual EMPS response was either mobile or deferred mobile. Multiply that result by 100 to get the percentage.
- Figure 6 isolates the total number of episodes with an actual EMPS response of mobile and a response time less than 45 minutes divided by the total number of episodes with an actual EMPS response of mobile (response time is calculated by subtracting the First Contact Date Time from the Call Date Time. In this calculation, 10 minutes is subtracted from the original response time to account for the average 211 call).

Section II: Episode Volume

- Figure 7 tabulates the total number of calls by service area by 211-Only, 211-EMPS or Registered Calls.
- Figure 8 shows the 211 disposition of all calls received.
- Figure 9 shows the 211 disposition of EMPS response categorized by provider.
- Figure 10 shows the number served per 1,000 children by provider, calculated the same as Figure 3.
- Figure 11 is a stacked bar chart that represents the percent of episodes that are coded as either a phone only, face-to-face, or plus stabilization follow-up crisis response. Each percentage is calculated by counting the number of episodes in the respective category (i.e., phone only) divided by the total number of episodes coded for crisis response for that specified service area.
- Figure 12 calculates the same percentage as Figure 11 and is shown by provider.

Section III: 211 Recommendations and EMPS Response

- Figure 13 shows the percentage of the 211 recommended responses (i.e. mobile, deferred mobile, non-mobile) for all EMPS Responses by provider. Calculated by taking the count of the 211 Recommended Response Mode (i.e. mobile, deferred mobile, non-mobile) divided by the total count of episodes with a 211 disposition of EMPS Response then multiply that by 100 to get the percentage.
- Figure 14 shows a percentage of the actual EMPS response mode (i.e., mobile, deferred mobile, non-mobile) for the total EMPS Response episodes by provider. Calculated by taking the count of the actual EMPS Response Mode (i.e. mobile, deferred mobile, non-mobile) divided by the total count of episodes with a 211 disposition of EMPS Response then multiply that by 100 to get the percentage.
- Calculation for Figure 15: Count 211 recommended mobile where actual response was non-mobile (separately for deferred mobile) divided by total count of 211 recommended mobile, multiply that number by 100 to get the percentage.
- Calculation for Figure 16: Count 211 recommended non-mobile where actual response was mobile (separately for deferred mobile) divided by total count of 211 recommended non-mobile, multiply that number by 100 to get the percentage.
- Figure 17 is the same graph as Figure 5.
- Figure 18 uses the same calculation as Figure 5.

¹ United States Department of Agriculture, Food and Nutrition Service, "Eligibility Manual for School Meals, January 2008", <http://www.fns.usda.gov/cnd/Lunch/>.

Section IV: Response Time

- Figure 19 is the same graph as shown in Figure 6.
- Figure 20 uses the same calculation as Figures 6 & 19 and is shown by provider.
- Figure 21 arranges response times for episodes coded as EMPS response mode-mobile in ascending order by service area and shows the response time in the middle.
- Figure 22 uses the same calculation as Figure 21 and is categorized by provider.
- Figure 23 arranges response times for episodes coded as EMPS response mode-deferred mobile in ascending order by service area and shows the response time in the middle.
- Figure 24 uses the same calculation as Figure 23 and is categorized by provider.

Section V: Emergency Department Referral Type

- Figure 25 shows the number of ED referrals (i.e. routine follow-up or in-patient diversion) by service area.
- Figure 26 is calculated by taking the count of ED referrals for the specified service area divided by total number of EMPS response episodes for that service area and multiplying that number by 100 to get the percentage.
- Figures 27 and 28 use the same calculations as Figures 25 and 26 respectively, and are shown by provider.

Section VI: Length of Stay

- Table 1 shows the mean, median, and percentage of episodes exceeding the LOS benchmarks, statewide, by service area, and by provider. Discharged episodes are broken into the various Crisis Response categories (Phone Only, Face-to-face and Plus Stabilization Follow-up) for two separate periods of time: 1) the current reporting period and 2) cumulatively since January 1, 2010.
- Table 2 shows the total number of episodes used to calculate the mean, median and percent in Table 1.
- Table 3 shows the same Crisis Response categories for episodes still in care as of January 1, 2010 to the end of current reporting period. To calculate length of stay data, an episode end date is needed. The episodes still in care do not have episode end dates at the time the data is download. Therefore, an episode end date equal to the last day of the current reporting period was used to calculate length of stay.

Section VII: Data Quality Monitoring

- Figure 29 calculates the percent of Ohio intake scales by dividing actual over expected. The numerator is calculated by counting the number of Ohio intake scales for those episodes coded as crisis response face-to-face OR plus stabilization follow-up AND an actual EMPS response of mobile OR deferred mobile. This is divided by the total number of expected Ohio intake scales which is calculated by counting the total number of episodes coded as crisis response face-to-face OR plus stabilization follow-up AND episodes coded with an actual EMPS response of mobile OR deferred mobile.
- Figure 30 calculates the percent of Ohio discharge scales by dividing actual over expected. The numerator is calculated by counting the number of Ohio discharge scales for those episodes coded as crisis response plus stabilization follow-up AND an actual EMPS response mode of mobile OR deferred mobile AND has an episode end date. This is divided by the total number of expected Ohio discharge scales which is calculated by counting the total number of episodes that are coded as crisis response plus stabilization follow-up AND

Section VIII: Provider Community Outreach

- Figure 31 shows a count of the number of times a provider performed formal community outreach during the current month.