



EMPS Crisis Intervention Services Performance Improvement Center (PIC)

Monthly Report: March 2012

This report was prepared by the Emergency Mobile Psychiatric Services (EMPS) Performance Improvement Center (PIC):

Jeffrey Vanderploeg, Ph.D., Director

Kristin Adomeit, B.S., Quality Improvement Coordinator

Lori Schon, Office Manager

Francisco Lopez, Ph.D., Research Assistant

Mark Plourd, MSW, Project Coordinator

The Emergency Mobile Psychiatric Services Performance Improvement Center is housed at the Child Health and Development Institute's

Connecticut Center for Effective Practice





Table of Contents

Executive Summary						
Section I: Primary EMPS P	erformance Indicators					
Figure 1. Total Call Volu	me by Call Type	4				
Figure 2. EMPS Episodes		4				
Figure 3. Number Serve		4				
Figure 4. Number Serve	d Per 1,000 Children in Poverty	4				
Figure 5. Mobile Respor	nse by Service Area	4				
Figure 6. Total Mobile E	pisodes with Response Time Under 45 Mins. by Service Area	4				
Section II: Episode Volume						
Figure 7. Total Call Volu	me by Call Type	5				
Figure 8. Statewide 211		5				
Figure 9. EMPS Respons		5				
	ed Per 1,000 Children by Provider	5				
	vention Types by Service Area	6				
Figure 12. Episode Inter	vention Types by Provider	6				
Section III: 211 Recommer	ndations and EMPS Response					
Figure 13. 211 Recomm	ended Initial Response by Provider	7				
_	EMPS Response by Provider	7				
	ended Mobile Episodes Where Actual EMPS Response	7				
	ile or Deferred Mobile					
	ended Non-Mobile Episodes Where Actual EMPS Response	8				
was Mobile or Figure 17. Mobile Respo	Deferred Mobile	0				
Figure 18. Mobile Respo		8				
Section IV: Response Time						
Figure 19. Total Mobile	Episodes with Response Time Under 45 Mins. by Service Area	9				
	Episodes with Response Time Under 45 Minutes by Provider	9				
Figure 21. Median Mobi	ile Response Time by Service Area in Minutes	9				
Figure 22. Median Mobi	ile Response Time by Provider in Minutes	9				
Figure 23. Median Defe	rred Mobile Response Time by Service Area in Hours	9				
Figure 24. Median Defe	rred Mobile Response Time by Provider in Hours	9				
Section V: Emergency Dep	artment Referral Type					
Figure 25. Type of Emer	gency Dept. Referral by Service Area	10				
Figure 26. Emergency D	ept. Referral by Service Area	10				
Figure 27. Type of Emer	gency Dept. Referral by Provider	10				
Figure 28. Emergency D	ept. Referral by Provider	10				
Section VI: Length of Stay						
Table 1. Length of Stay f	for Discharged Episodes of Care in Days	11				
Table 2. Number of Epis	odes for Discharged Episodes of Care	12				
Table 3. Length of Stay f	for Open Episodes of Care in Days	13				

Section V	'II: Data Quality Monitoring							
1	Figure 29. Ohio Scales Collected at Intake by Provider	14						
Figure 30. Ohio Scales Collected at Discharge by Provider								
Section V	III: Provider Community Outreach							
1	Figure 31. Number of Times Providers Performed Formal Outreach to the Community	15						
Appendix								

16

Appendix A: Description of Calculations

Executive Summary

<u>Call and Episode Volume</u>: In March 2012, **211 received 1,539 calls** including 1140 calls (74%) routed to EMPS providers and 399 calls (26%) handled by 211 (e.g., calls for other information or resources, calls transferred to 911). This month 211 received 181 more calls than in March 2011, a 13% increase. The percent distribution of calls routed to EMPS providers and those handled by 211 remains fairly consistent from month to month.

Among the **1140 episodes of care** generated this month, episode volume ranged from 148 episodes (Eastern and New Haven service areas) to 309 episodes (Hartford service area). The statewide average service reach per 1,000 children this month was 1.35, with service area rates ranging from 1.07 (Western) to 1.88 (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 3.14 per 1,000 children in poverty, with service area rates ranging from 2.12 (New Haven) to 5.32 (Eastern).

<u>Mobility</u>: **Statewide mobility was 93.6% this month**, compared to 92% in March 2011. Five of the six service areas were above the 90% benchmark this month, with performance ranging from 88.5% (Southwestern) to 97.2% (Eastern). Mobility for individual providers ranged from 72% (Child Guidance of Southern CT) to 100% (Bridges, CFGC-Norwalk and Wellmore-Danbury). Thirteen of the fifteen individual providers had mobility rates above the 90% benchmark.

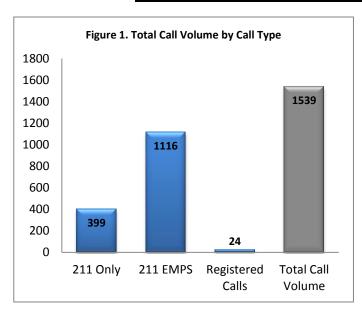
<u>Response Time</u>: Statewide, this month **85% of mobile episodes received a face-to-face response in 45 minutes or less**, which is comparable to March 2011 (86%). Five of the six service areas were above the 80% benchmark this month, with performance ranging from 71% (Western) to 93% (Eastern). In addition, the statewide median mobile response time was 28 minutes, with all six service areas demonstrating a median mobile response time of 32 minutes or less. These data strongly suggest that EMPS service providers are offering timely responses to crises in the community.

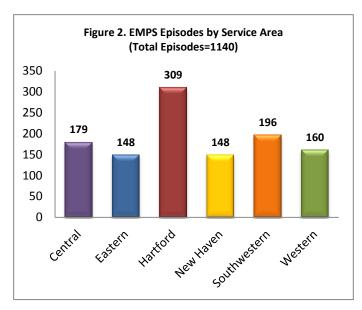
<u>Length of Stay</u>: Statewide, among discharged episodes, 6% (current month) and 9% (cumulative) of Phone Only episodes exceeded one day, 24% (current month) and 29% (cumulative) of Face-to-face episodes exceeded five days, and 6% (current month) and 9% (cumulative) of Plus Stabilization Follow-up episodes exceeded 45 days.

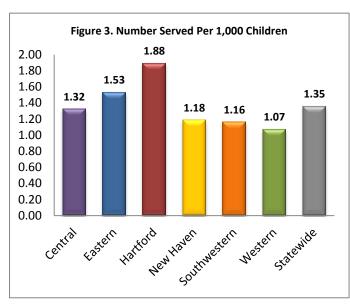
Statewide, the median LOS for open episodes of care with a Crisis Response of Phone Only was 90 days (n=21) and ranged from 33 days (Hartford) to 428 days (New Haven). Statewide, the median LOS for open episodes with a Crisis Response of Face-to-face was 19 days (n=173) and ranged from 6 days (Eastern) to 28.5 days (New Haven). Open episodes of care with a Plus Stabilization Follow-up Crisis Response had a statewide median LOS of 17 days (n=38) with a range from 11 days (Eastern) to 25 days (Southwestern). This tells us that families remain open for services beyond the benchmarks for all crisis response categories. Cases that remain open for services for long periods of time can impact responsiveness as call volume increases, and can compromise accurate and timely data entry practices.

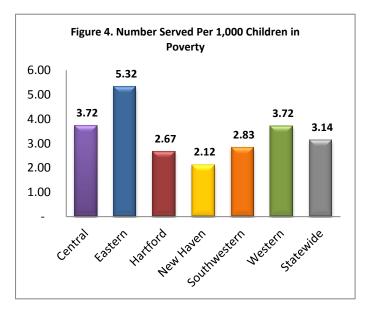
<u>Data Quality Monitoring</u>: The Worker version of the Ohio Scales was completed more consistently than the Parent version. This month statewide completion rates for **intake** Ohio Scales were: Worker Problem Scale (88%), Parent Problem Scale (60%), Worker Functioning Scale (88%), and Parent Functioning Scale (60%). The statewide completion rate for **discharge** Ohio Scales this month were: Worker Problem Scale (82%), Parent Problem Scale (19%), Worker Functioning Scale (82%), and Parent Functioning Scale (20%). Completion of the Ohio Scales, especially the parent versions at discharge, has been significantly lower the last few months and will be an area for improvement in the future.

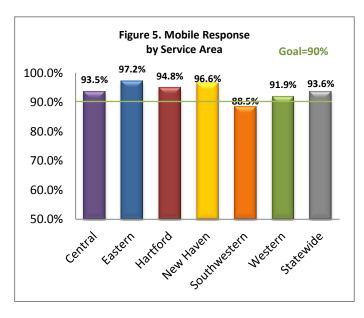
Section I: Primary EMPS Performance Indicators

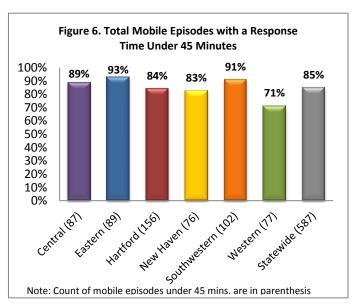




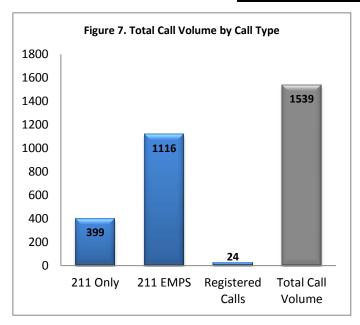


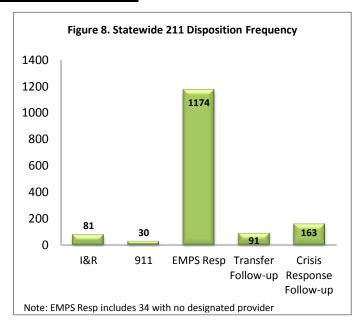


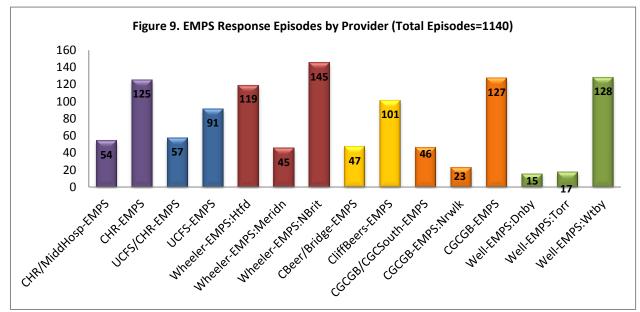


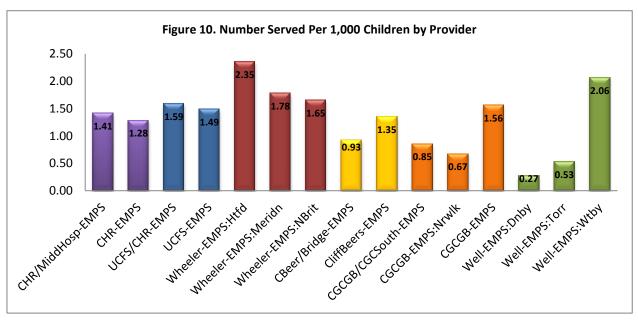


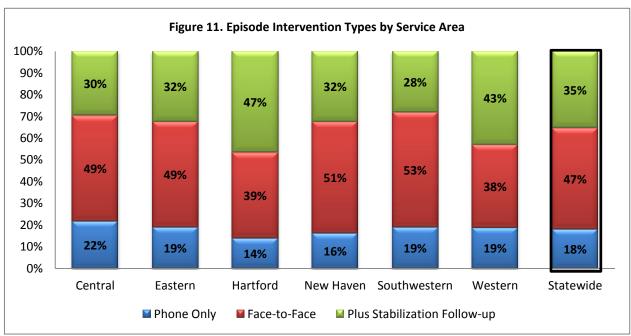
Section II: Episode Volume

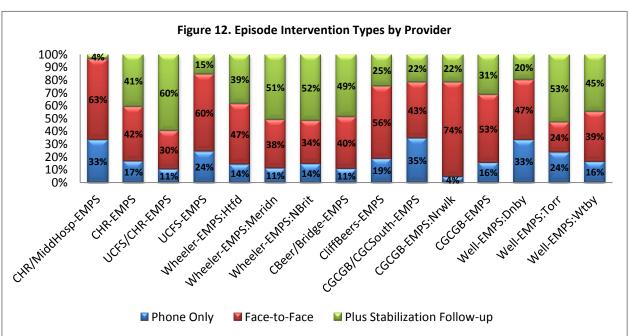




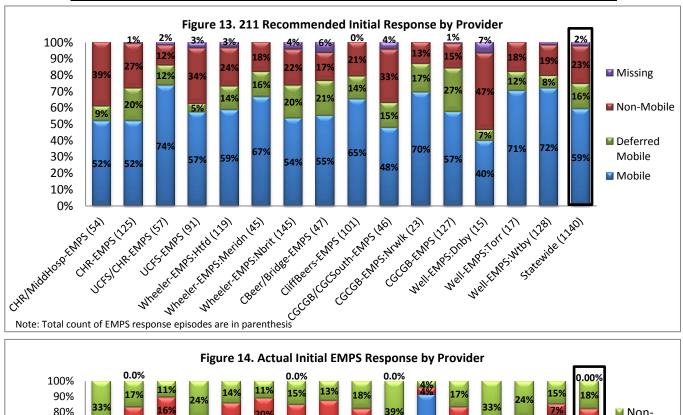


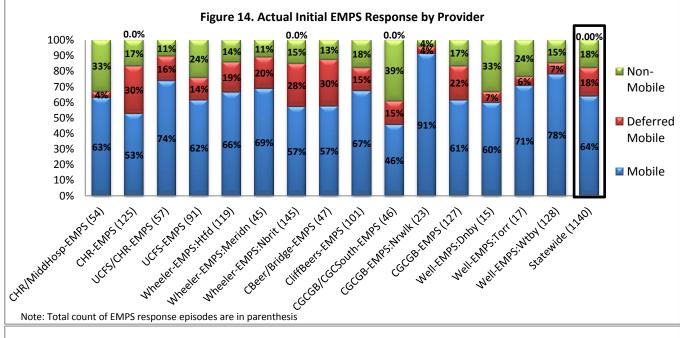


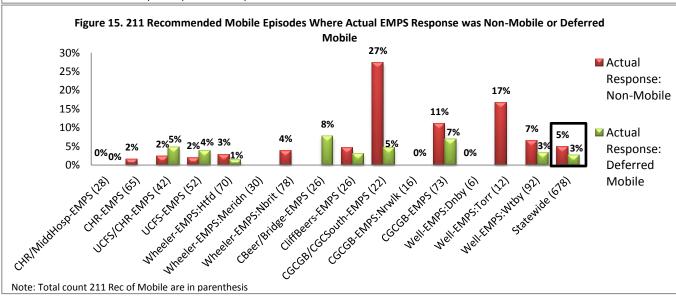


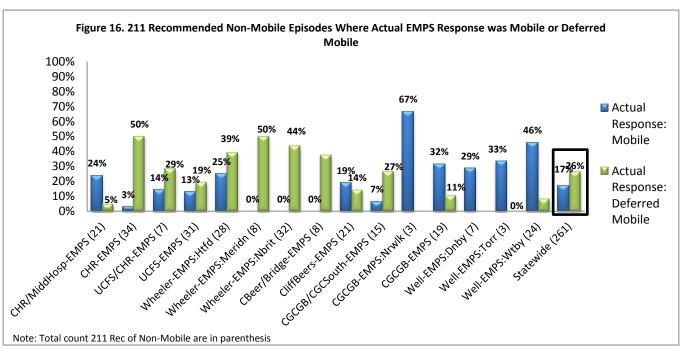


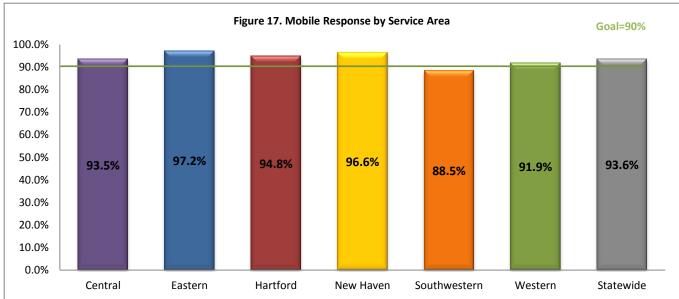
Section III: 211 Recommendations and EMPS Response

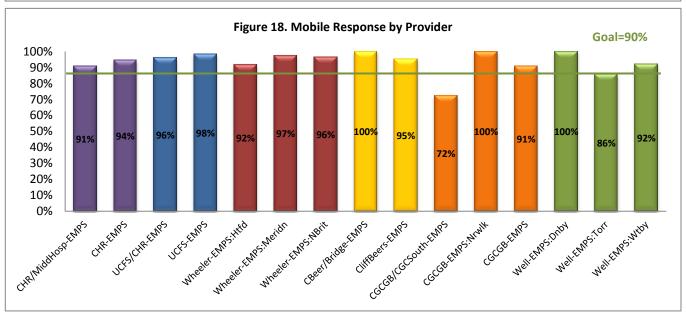




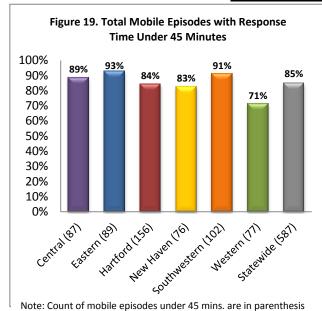


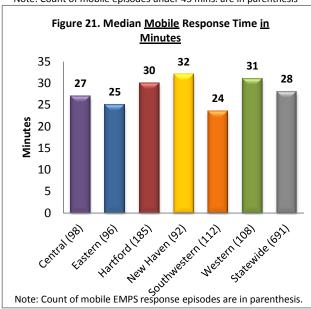


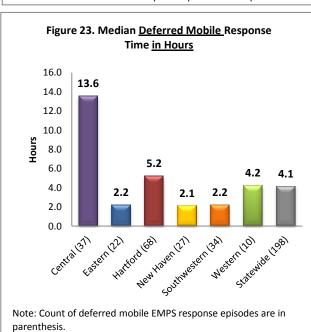


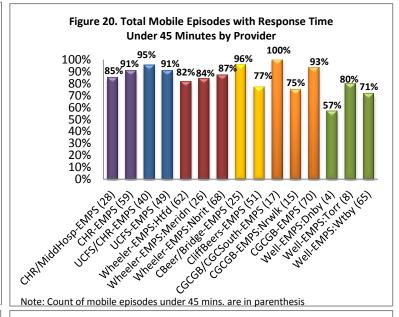


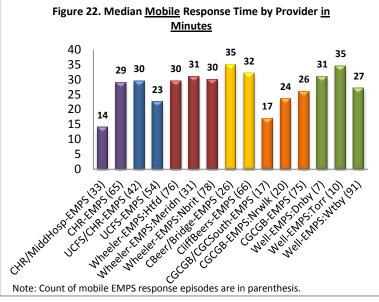
Section IV: Response Time

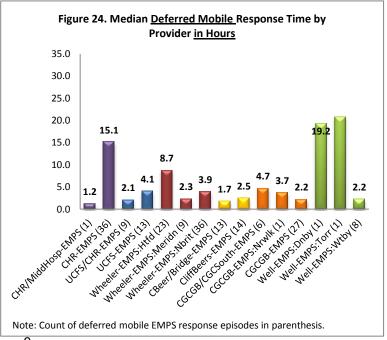




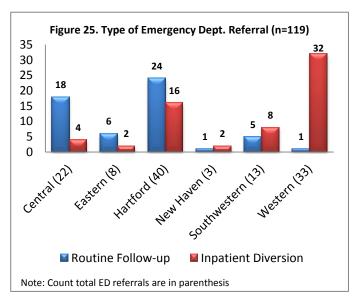


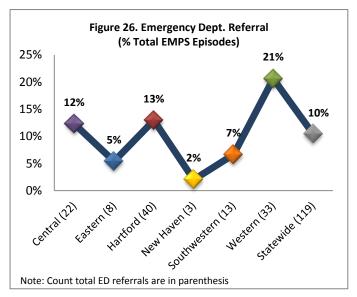


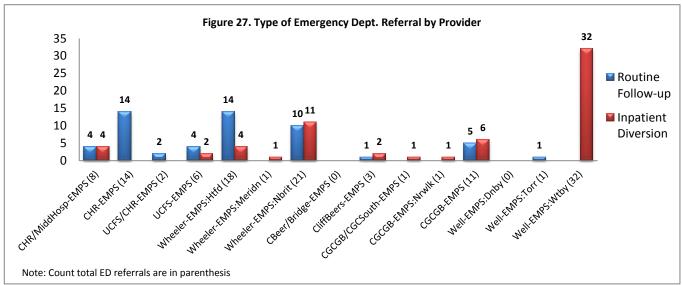


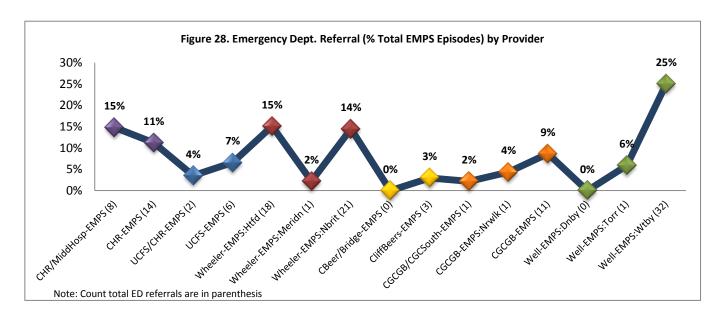


Section V: Emergency Department Referral Type









Section VI: Length of Stay

Table 1. Length of Stay for <u>Discharged Episodes</u> of Care in Days

		Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	
			Disc	harged l	Episodes	for Cur	rent Rep	orting F	Period		Cumulative Discharged Episodes*									
			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	0.5	6.2	22.6	0	1.0	17.0	6%	24%	6%	0.8	6.8	25.9	0	2.0	22.0	9%	29%	9%	
2	Central	0.6	9.2	27.7	0	1.0	28.0	8%	34%	12%	0.9	9.6	28.3	0	4.0	22.0	12%	44%	12%	
3	CHR/MiddHosp-EMPS		0.0	15.4	0	1.0	12.0	22%	17%	0%	1.6			0	2.0	6.0	23%	18%	1%	
4	CHR-EMPS	0.1	11.7	29.2	0	1.0	29.0	0%	40%	13%	0.6	14.6	30.7	0	7.0	25.0	7%	63%	14%	
5	Eastern	0.3	4.5	18.9	0	1.0	16.5	0%	21%	4%	0.2	2.1	22.4	0	1.0	21.0	3%	3%	1%	
6	UCFS/CHR-EMPS		4.7	22.7	0	1.0	19.5	0%	23%	7%	0.1	2.0		0	0.0	20.0	2%	5%	-	
7	UCFS-EMPS	0.4	4.4	15.1	0	1.0	14.0	0%	19%	0%	0.2	2.1	22.8	0	2.0	21.0	3%	2%	1%	
8	Hartford	0.5	8.3	22.4	0	1.0	21.0	5%	29%	4%	1.0	5.5	25.2	0	3.0	21.0	14%	26%	10%	
9	Wheeler-EMPS:Htfd	1.1	5.4	20.6	0	2.0	19.0	8%	24%	2%	1.5	5.9	25.9	0	3.0	23.0	19%	31%	10%	
10	Wheeler-EMPS:Meridn	0.0	10.8	23.2	0	0.0	24.0	0%	29%	0%	1.3	4.8	21.5	0	2.0		25%	23%	6%	
11	Wheeler-EMPS:NBrit	0.1	10.3	23.4	0	2.0	20.0	4%	34%	6%	0.3	5.2	25.9	0	3.0	21.0	6%	21%	12%	
12	New Haven	0.7	4.4	21.5	0	1.0	19.0	14%	19%	3%	1.1	9.0	28.2	0	3.0	27.0	8%	41%	10%	
13	CBeer/Bridge-EMPS		3.8	19.4	0	1.0	18.0	11%	14%	0%	2.0	-	25.5	0	0.0		12%	18%	3%	
14	CliffBeers-EMPS	0.9	4.7	22.7	0	1.0	20.5	15%	21%	5%	1.0	11.1	30.6	0	6.0	28.0	7%	51%	16%	
15	Southwestern	0.7	4.5	22.3	0	1.0	22.0	3%	21%	3%	1.0	9.5	31.2	0	2.0	31.0	10%	38%	12%	
16	CFGC/CGCSouth-EMPS	0.1	5.1	25.7	0	1.0	29.0	0%	20%	5%	0.4		40.6	0	0.0	41.0	3%	12%	32%	
17	CFGC-Nrwlk										1.4	7.1	21.9	1	5.0		27%	44%	5%	
18	CFGC-Brdgprt	0.9	4.2	20.7	0	1.0	19.0	4%	22%	2%	1.4	10.9	27.4	0	4.0	29.0	15%	45%	2%	
19	Western	0.2	3.4	18.1	0	1.0	17.0	3%	16%	6%	0.6	5.1	20.2	0	0.0	20.0	5%	23%	5%	
20	Well-EMPS:Dnby			14.6	0	0.0		0%	11%	0%	0.5			0	0.0	14.0	4%	24%	2%	
21	Well-EMPS:Torr			21.3	0	2.0		17%	10%	0%	0.2			0	0.0		4%	45%	4%	
22	Well-EMPS:Wtby	0.1	3.5	17.9	0	1.0	16.0	0%	18%	8%	0.7	4.7	21.1	0	0.0	20.0	5%	20%	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 <u>Discharged Episodes</u> of Care

		A	В	С	D	E	F	G	н	I 1	J	К	L		
			_	oisoaes j	_	_	-		<u>''</u>	<u> </u>					
			,	Per		•	J	Cumulative Discharged Episodes*							
			Mean/I	Median	N use	ed for Pe	ercent		d Mean/N	⁄ledian	N us	ed for Pe	ercent		
		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	191	442	390	11	108	22	3895	8374	7272	361	2452	66		
2	Central	24	68	86	2	23	10	764	1173	1129	92	514	138		
3	CHR/MiddHosp-EMPS	9	18	9	2	3	0	236	507	120	54	92	:		
4	CHR-EMPS	15	50	77	0	20	10	528	666	1009	38	422	137		
5	Eastern	14	34	28	0	7	1	484	1040	782	13	28	8		
6	UCFS/CHR-EMPS	6	13	14	0	3	1	129	336	488	3	17	(
7	UCFS-EMPS	8	21	14	0	4	0	355	704	294	10	11	2		
8	Hartford	60	140	129	3	41	5	933	1856	2908	135	482	299		
9	Wheeler-EMPS:Htfd	24	58	46	2	14	1	411	885	888	78	271	93		
10	Wheeler-EMPS:Meridn	8	21	18	0	6	0	127	208	489	32	47	27		
11	Wheeler-EMPS:NBrit	28	61	65	1	21	4	395	763	1531	25	164	179		
12	New Haven	29	63	31	4	12	1	603	1060	799	48	434	7		
13	CBeer/Bridge-EMPS	9	21	11	1	3	0	86	316	384	10	56	10		
14	CliffBeers-EMPS	20	42	20	3	9	1	517	744	415	38	378	67		
15	Southwestern	31	52	63	1	11	2	413	1638	877	40	618	10:		
16	CFGC/CGCSouth-EMPS	8	15	20	0	3	1	189	356	272	6	44	8		
17	CFGC-Nrwlk	0	0	0	0	0	0	11	71	41	3	31	2		
18	CFGC-Brdgprt	23	37	43	1	8	1	213	1211	564	31	543	12		
19	Western	33	85	53	1	14	3	698	1607	777	33	376	42		
20	Well-EMPS:Dnby	3	9	5	0	1	0	143	192	118	6	47			
21	Well-EMPS:Torr	6	10	8	1	1	0	148	175	170	6	79	7		
22	Well-EMPS:Wtby	24	66	40	0	12	3	407	1240	489	21	250	33		

^{*} 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

		Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0			
		Episodes Still in Care*										N of Episodes Still in Care*							
			Mean			Median			Percent		N used	d Mean/	Median	N used for Percent					
		LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone LOS: FTF LOS: Stab. Ph		Phone > 1 FTF > 5		Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45				
1	STATEWIDE	194.7	70.0	42.8	90.0	19.0	17.0	100%	81%	17%	21	173	315	21	140	53			
2	Central	66.7	20.4	18.0	0.0	17.0	15.0	100%	81%	5%	3	31	42	3	25	2			
3	CHR/MiddHosp-EMPS										0	0	0	0	0	0			
4	CHR-EMPS	66.7	20.4	18.0	76.0	17.0	15.0	100%	81%	5%	3	31	42	3	25	2			
5	Eastern		6.0	13.2		6.0	11.0		50%	0%	0	2	29	0	1	0			
6	UCFS/CHR-EMPS		6.0	14.6		6.0	16.0		50%	0%	0	2		0	1	0			
7	UCFS-EMPS			9.5			6.0			0%	0	0	8	0	0	0			
8	Hartford	28.6	19.9	16.1	33.0	17.0	14.0	100%	80%	2%	5	41	84	5	33	2			
9	Wheeler-EMPS:Htfd	28.0	20.2	19.4	33.0	17.0	17.0	100%	83%	0%	3	29	37	3	24	0			
10	Wheeler-EMPS:Meridn		29.7	9.9		37.0	8.0		100%	0%	0	3	11	0	3	0			
11	Wheeler-EMPS:NBrit	29.5	15.4	14.7	29.5	15.0	10.0	100%	67%	6%	2	9	36	2	6	2			
12	New Haven	471.2	157.4	77.2	428.0	28.5	22.0	100%	85%	30%	6	52	67	6	44	20			
13	CBeer/Bridge-EMPS	471.2	227.6	100.5	428.0	116.5	37.0	100%	84%	44%	6	32		6	27	18			
14	CliffBeers-EMPS		45.2	40.5		17.5	16.5		85%	8%	0	20	26	0	17	2			
15	Southwestern	133.0	55.4	81.9	69.0	15.0	25.0	100%	77%	39%	4	43	64	4	33	25			
16	CFGC/CGCSouth-EMPS	244.0	132.7	138.3	244.0	37.0	86.0	100%	80%	71%	2	15	35	2	12	25			
17	CFGC-Nrwlk		4.8	8.8		3.5	5.0		25%	0%	0	4	5	0	1	0			
18	CFGC-Brdgprt	22.0	15.6	14.9	22.0	15.0	13.5	100%	83%	0%	2	24	24	2	20	0			
19	Western	129.0	19.5	19.9	145.0	23.5	16.0	100%	100%	14%	3	4	29	3	4	4			
20	Well-EMPS:Dnby	47.0		19.3	47.0		16.0	100%		0%	1	0	3	1	0	0			
21	Well-EMPS:Torr	195.0	23.0	25.0	195.0		25.0	100%	100%	0%	1	1	3	1	1	0			
22	Well-EMPS:Wtby	145.0	145.0	19.3	145.0	24.0	12.0	100%	100%	17%	1	3	23	1	3	4			

^{*} 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:

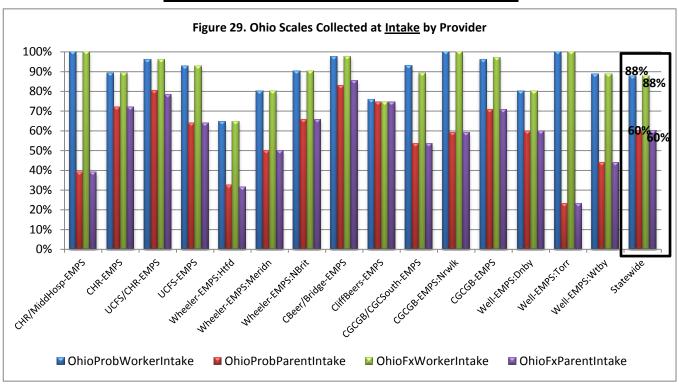
LOS: Phone Length of Stay in Days for Phone Only
LOS: FTF Length of Stay in Days for Face To Face Only

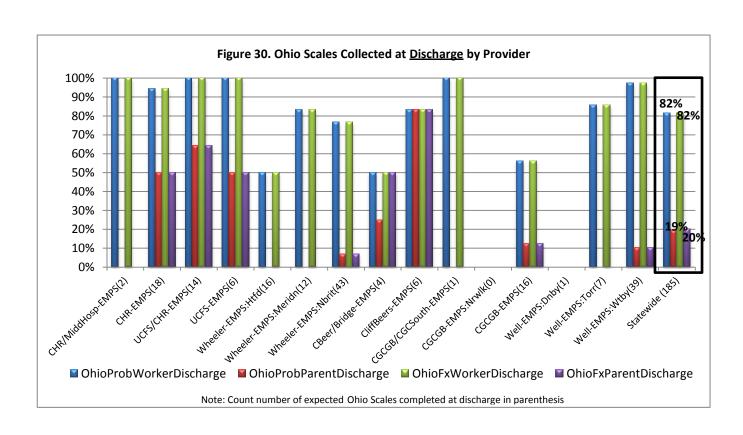
LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only

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

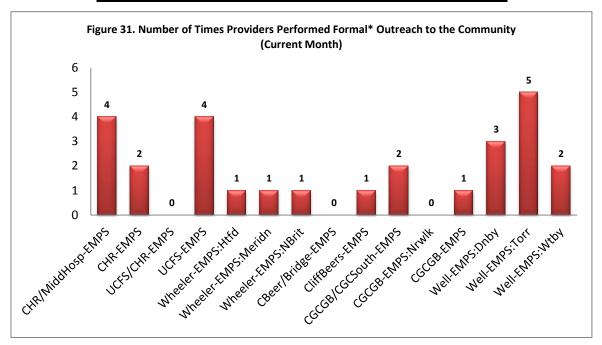
Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Section XI: Data Quality Monitoring





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.

¹United 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 <u>intake</u> scales by dividing actual over expected. The numerator is calculated by counting the number of Ohio <u>intake</u> 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 <u>intake</u> 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 <u>discharge</u> scales by dividing actual over expected. The numerator is calculated by counting the number of Ohio <u>discharge</u> 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 <u>discharge</u> 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.