



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

**Monthly Report: October 2011** 

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

Connecticut Center for Effective Practice





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#### **Executive Summary**

<u>Call and Episode Volume</u>: In October 2011, **211 received 1211 calls** including 915 calls (76%) routed to EMPS providers and 296 calls (24%) handled by 211 (e.g., calls for other information or resources, calls transferred to 911). This month 211 received three more calls than October 2010 (1208 calls). The percent distribution of calls routed to EMPS providers and those handled by 211 remains fairly consistent from month to month.

Among the **915** episodes of care generated this month, episode volume ranged from 121 episodes (New Haven service area) to 254 episodes (Hartford service area). The statewide average service reach per 1,000 children this month was 1.09, with service area rates ranging from 0.88 (Southwestern) to 1.55 (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 2.92 per 1,000 children in poverty, with service area rates ranging from 2.24 (New Haven) to 5.67 (Eastern).

<u>Mobility</u>: **Statewide mobility was 94.2% this month**, compared to 90.6% in October 2010. All of the service areas were above the 90% benchmark this month, with performance ranging from 90.3% (Western) to 97.8% (Eastern).

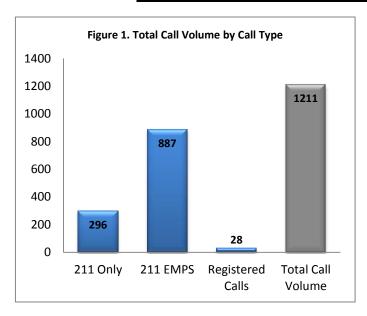
<u>Response Time</u>: Statewide, this month 83% of mobile episodes received a Face-to-face response in 45 minutes or less, which is 3% lower than October 2010 (86%). Five of the six service areas were above the 80% benchmark this month, with performance ranging from 74% (Western) to 93% (Eastern). In addition, the statewide median mobile response time was 29 minutes, with all six service areas demonstrating a median mobile response time of 30 minutes or less. These data strongly suggest that EMPS service providers are offering timely responses to crises in the community.

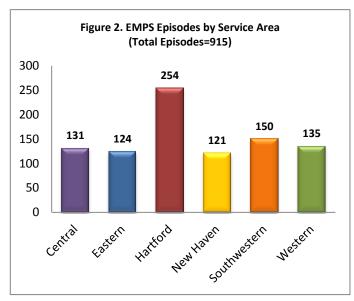
<u>Length of Stay</u>: Statewide, among discharged episodes, 17% (current month) and 9% (cumulative) of Phone Only episodes exceeded one day, 23% (current month) and 29% (cumulative) of Face-to-face episodes exceeded five days, and 1% (current month) and 9% (cumulative) of Plus Stabilization Follow-up episodes exceeded 45 days.

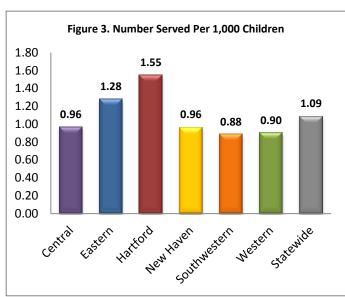
Statewide, the median LOS for open episodes of care with a Crisis Response of Phone Only was 108 days (n=19) and ranged from 39 days (Western) to 116 days (New Haven). Statewide, the median LOS for a Crisis Response of Face-to-face was 134 days (n=43) and ranged from 46 days (Southwestern) to 568 days (Central). For the Plus Stabilization Follow-up Crisis Response, the statewide median LOS was 102 days (n=41) with a range from 39 days (Western) to 181 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 increases, and can compromise accurate and timely data entry practices.

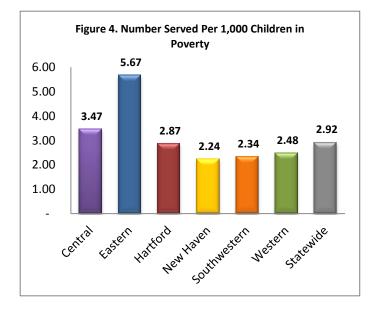
<u>Data Quality Monitoring</u>: The Worker version of the Ohio Scales was completed more consistently than the Parent version. This month statewide completion rates for **intake** Ohio Scales were: Worker Problem Scale (89%), Parent Problem Scale (63%), Worker Functioning Scale (89%), and Parent Functioning Scale (62%). The statewide completion rate for **discharge** Ohio Scales this month were: Worker Problem Scale (87%), Parent Problem Scale (23%), Worker Functioning Scale (87%), and Parent Functioning Scale (24%). 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.

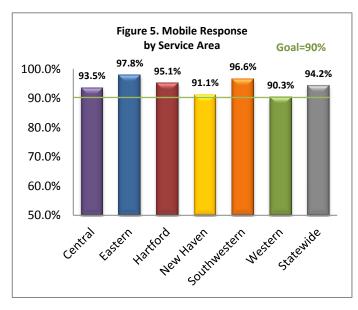
## **Section I: Primary EMPS Performance Indicators**

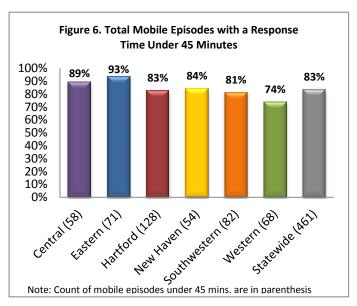




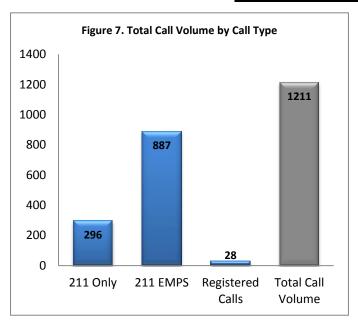


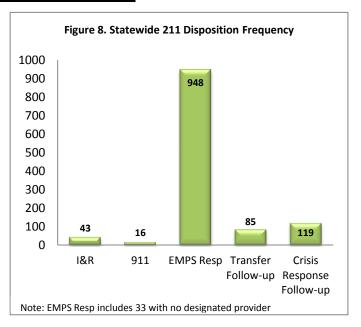


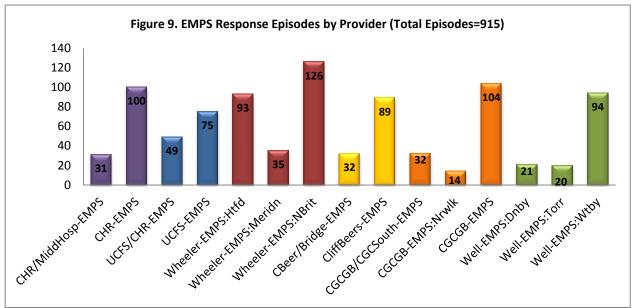


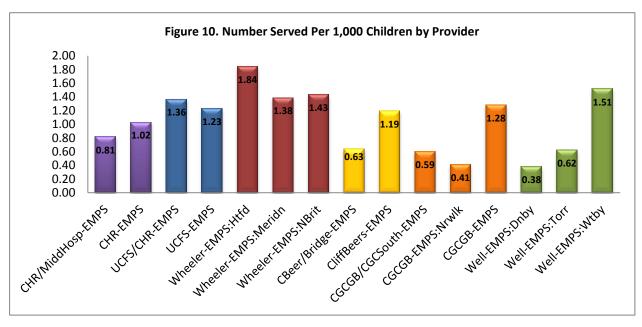


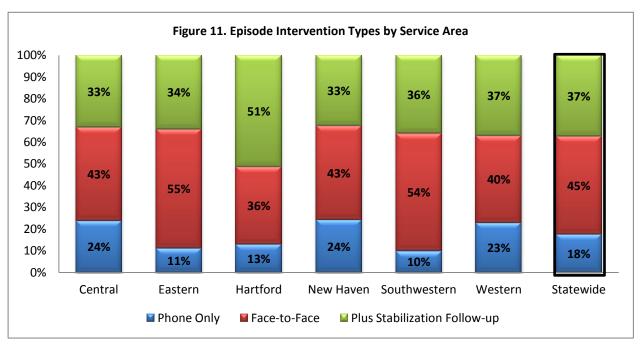
## **Section II: Episode Volume**

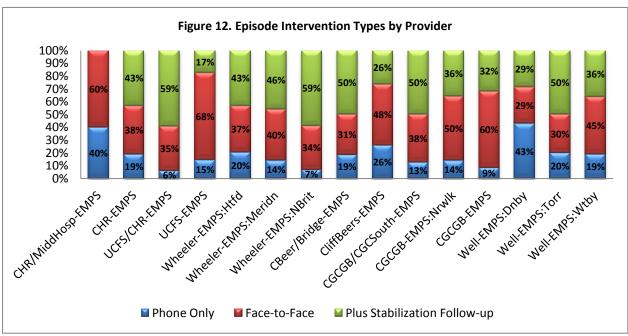




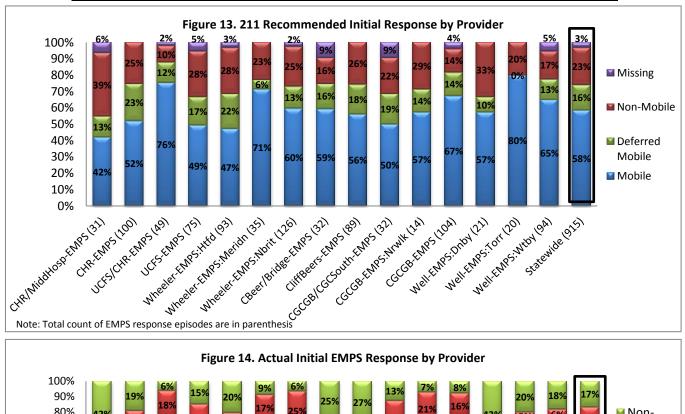


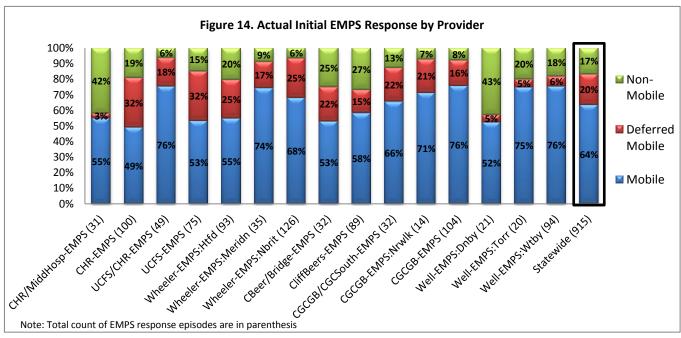


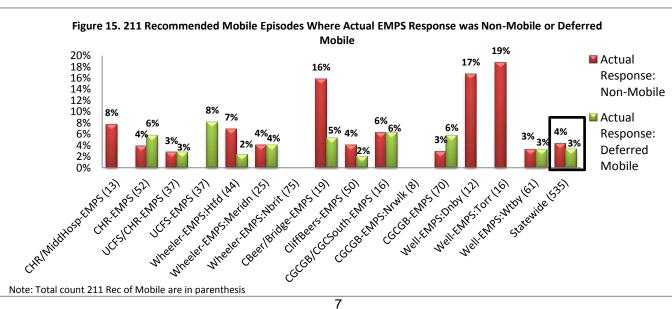


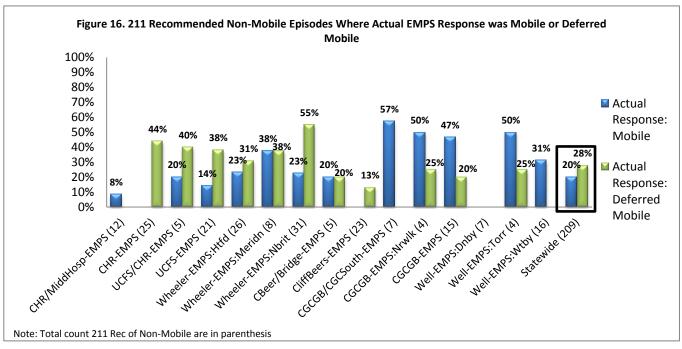


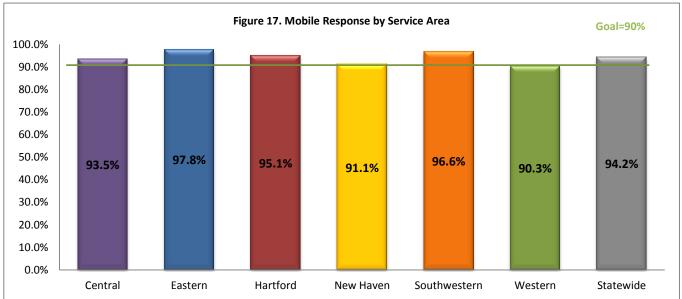
## Section III: 211 Recommendations and EMPS Response

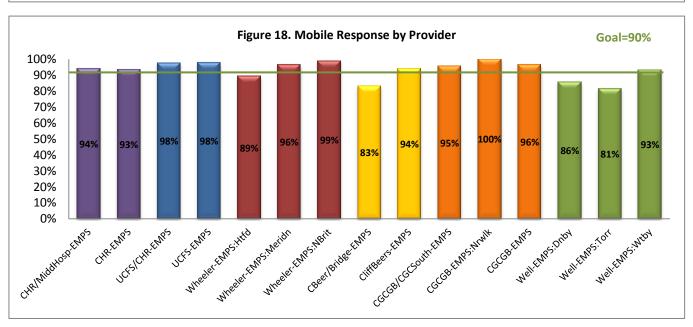




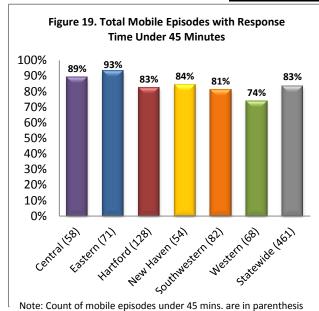


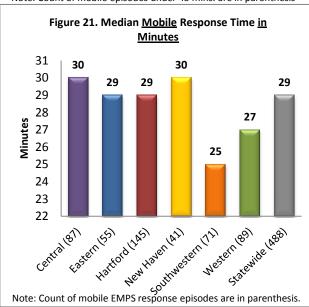


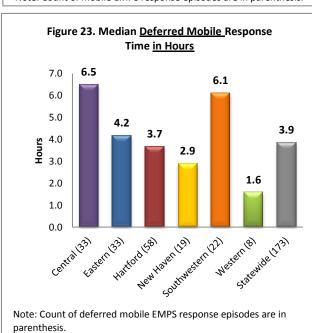


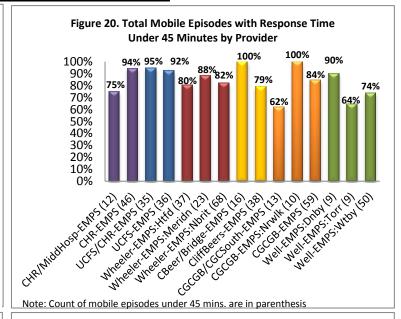


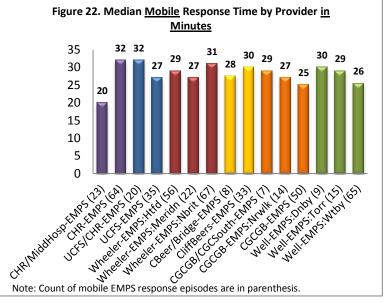
## **Section IV: Response Time**

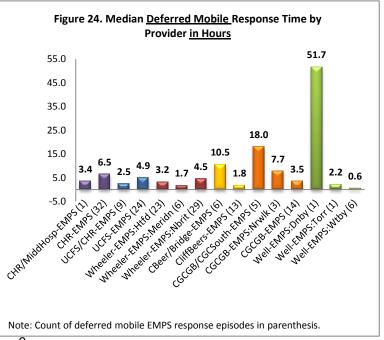




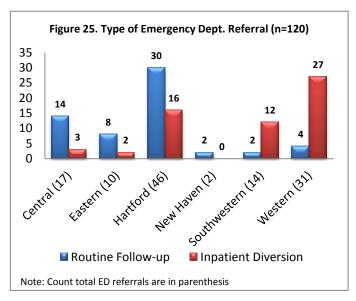


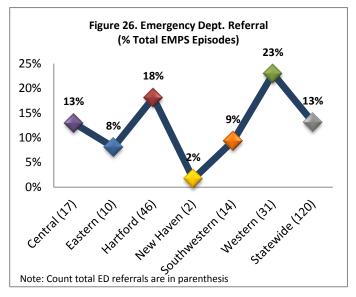


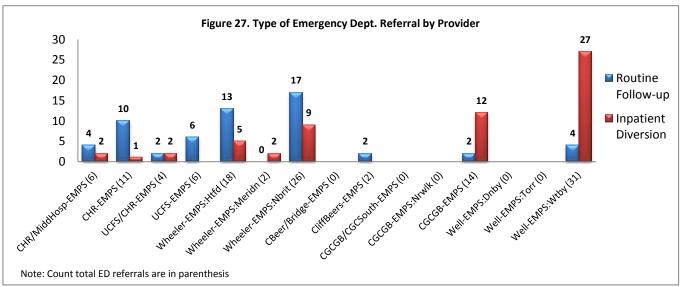


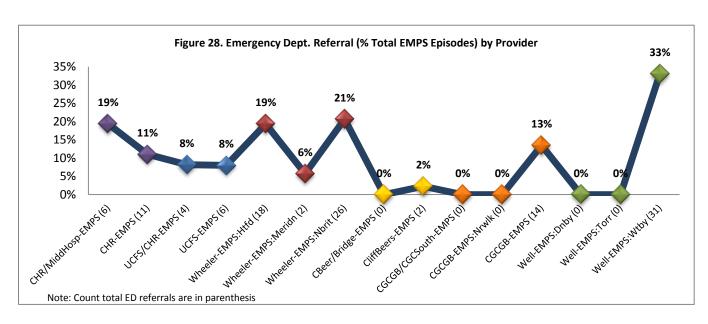


## **Section V: Emergency Department Referral Type**









## **Section VI: Length of Stay**

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

		Α	В	С	D	E	F	G	Н	I	J	K	L	M	N	0	Р	Q	R	
				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	1.3	4.9	20.6	0	2.0	17.5	17%	23%	1%	0.8	6.6	26.1	0	2.0	22.0	9%	29%	9%	
2	Central	1.9	6.2	27.2	0	2.0	27.5	11%	30%	7%	0.9	9.6	29.5	0	4.0	22.0	11%	43%	14%	
3	CHR/MiddHosp-EMPS		0.0	16.3	0		14.5	8%	18%	0%	1.4	_		7				-	_,-	
4	CHR-EMPS	3.1	7.0	28.1	0	2.5	28.0	13%	32%	8%	0.7	15.1	32.3	0	8.0	26.0	7%	64%	16%	
5	Eastern	0.2	4.8	15.5	0	1.5	13.0	0%	21%	0%	0.2	2.2	21.7	0	1.0	20.0	3%	3%	1%	
6	UCFS/CHR-EMPS	0.0	11.4	16.4	0	7.0	14.5	0%	56%	0%	0.2	2.1	21.4	0	0.0	19.0	3%	6%	2%	
7	UCFS-EMPS	0.3	1.6	14.3	0	1.0	11.5	0%	5%	0%	0.2	2.2	22.3	0	2.0	21.0	4%	2%	0%	
8	Hartford	1.8	6.3	20.4	0	2.0	21.0	24%	27%	0%	0.9	5.5	25.5	0	3.0	21.0	15%	26%	11%	
9	Wheeler-EMPS:Htfd	2.4	3.0	18.0	0	1.0	14.0	24%	13%	0%	1.3	5.6	25.5	0	3.0	22.0	19%	29%	9%	
10	Wheeler-EMPS:Meridn	2.7	10.4	27.1	1	5.0	27.0	33%	43%	0%	1.3	4.6	21.9		2.0	19.0	25%	25%	6%	
11	Wheeler-EMPS:NBrit	1.2	8.5	20.1	0	2.0	21.0	23%	36%	0%	0.4	5.6	26.6	0	3.0	22.0	7%	23%	13%	
12	New Haven	0.9	1.8	16.9	0	1.0	15.0	22%	10%	0%	1.1	8.3	27.2	0	3.0	27.0	8%	40%	8%	
13	CBeer/Bridge-EMPS	0.7	1.3	17.9	1	1.0	15.0	17%	0%	0%	2.4	4.2	25.7	0	0.10		14%	18%	2%	
14	CliffBeers-EMPS	1.0	2.0	16.2	0	1.0	14.5	25%	15%	0%	0.9	10.1	28.7	0	5.0	26.0	7%	50%	13%	
15	Southwestern	0.7	4.5	22.6	0	2.0	21.5	5%	22%	0%	0.9	9.1	30.8	0	2.0	31.0	10%	36%	12%	
16	CFGC/CGCSouth-EMPS	0.0	5.1	20.5	0	1.5	19.0	0%	21%	0%	0.5	5.4	39.8	0	0.0	40.0	4%	13%	33%	
17	CFGC-Nrwlk										1.7	6.4	23.5	_	5.5			50%	0%	
18	CFGC-Brdgprt	0.9	4.3	23.8	0	2.0	22.5	6%	22%	0%	1.3	10.3	26.7	0	4.0	28.0	14%	43%	2%	
19	Western	1.0	3.5	14.0	0	2.0	14.0	25%	18%	0%	0.5	5.4	20.7	0	0.0	20.0	5%	25%	4%	
20	Well-EMPS:Dnby	6.0	0.8	2.0	6	0.0	2.0	100%	0%	0%	0.5	5.2	16.3	0	0.0	14.0	4%	25%	1%	
21	Well-EMPS:Torr	0.0	5.0	14.0	0	5.0	11.0	0%	27%	0%	0.2	8.4	18.9		0.0				2%	
22	Well-EMPS:Wtby	0.9	3.6	14.8	0	2.0	15.0	25%	19%	0%	0.6	5.0	22.5	0	0.0	22.0	5%	21%	6%	

<sup>\*</sup> 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

		Α	В	С	D	Е	F	G	Н	ı	J	K	L			
		Disch	arged Ep	osodes j	or Curre	nt Repo	orting									
				Per	iod			Cumulative Discharged Episodes*								
			Mean/N	Median	N use	d for Pe	ercent		d Mean/N	⁄ledian	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	149	353	273	26	80	4	3187	6800	5748	293	1953	544			
2	Central	27	61	54	3	18	4	616	898	951	69	387	133			
3	CHR/MiddHosp-EMPS	12	11	4	1	2	0	197	403	108	41	68	1			
4	CHR-EMPS	15	50	50	2	16	4	419	495	843	28	319	132			
5	Eastern	9	28	14	0	6	0	378	855	619	13	27	7			
6	UCFS/CHR-EMPS	2	9	8	0	5	0	107	287	369	3	17	6			
7	UCFS-EMPS	7	19	6	0	1	0	271	568	250	10	10	1			
8	Hartford	49	108	102	12	29	0	763	1517	2369	112	397	254			
9	Wheeler-EMPS:Htfd	17	47	33	4	6	0	339	724	692	63	210	64			
10	Wheeler-EMPS:Meridn	6	14	14	2	6	0	112	165	412	28	41	25			
11	Wheeler-EMPS:NBrit	26	47	55	6	17	0	312	628	1265	21	146	165			
12	New Haven	18	39	29	4	4	0	514	817	647	40	327	51			
13	CBeer/Bridge-EMPS	6	12	11	1	0	0	72	254	327	10	46	8			
14	CliffBeers-EMPS	12	27	18	3	4	0	442	563	320	30	281	43			
15	Southwestern	22	51	38	1	11	0	323	1266	634	31	458	77			
16	CFGC/CGCSouth-EMPS	5	14	14	0	3	0	156	288	201	6	38	67			
17	CFGC-Nrwlk	0	0	0	0	0	0	6	26	8	2	13	0			
18	CFGC-Brdgprt	17	37	24	1	8	0	161	952	425	23	407	10			
19	Western	24	66	36	6	12	0	593	1447	528	28	357	22			
20	Well-EMPS:Dnby	1	8	2	1	0	0	118	178	83	5	44	1			
21	Well-EMPS:Torr	3	11	5	0	3	0	124	156	132	5	74	3			
22	Well-EMPS:Wtby	20	47	29	5	9	0	351	1113	313	18	239	18			

<sup>\*</sup> 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	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	165.4	185.3	159.8	108.0	134.0	102.0	100%	100%	77%	19	43	53	19	43	41			
2	Central		568.0	42.5		568.0	42.5		100%	50%	0	1	2	0	1	1			
3	CHR/MiddHosp-EMPS		568.0			568.0			100%		0	1	0	0	1	0			
4	CHR-EMPS			42.5			42.5			50%	0	0	2	0	0	1			
5	Eastern										0	0	0	0	0	0			
6	UCFS/CHR-EMPS										0	0	0	0	0	0			
7	UCFS-EMPS										0	0	0	0	0	0			
8	Hartford		161.0	73.0		161.0	48.0		100%	71%	0	1	7	0	1	5			
9	Wheeler-EMPS:Htfd			44.5			45.5			50%	0	0	4	0	0	2			
10	Wheeler-EMPS:Meridn										0	0	0	0	0	0			
11	Wheeler-EMPS:NBrit		161.0	111.0		161.0	112.0		100%	100%	0	1	3	0	1	3			
12	New Haven	201.2	265.4	184.7	116.0	291.5	96.0	100%	100%	69%	13	20	13	13	20	9			
13	CBeer/Bridge-EMPS	319.2	367.5	312.8	276.0	354.0	318.0	100%	100%	100%	6	12	5	6	12	5			
14	CliffBeers-EMPS	100.0	112.3	104.6	107.0	65.5	58.0	100%	100%	50%	7	8	8	7	8	4			
15	Southwestern	96.8	92.0	181.1	68.0	46.0	181.0	100%	100%	87%	5	21	30	5	21	26			
16	CFGC/CGCSouth-EMPS	224.0	186.3	202.6	224.0	199.0	189.5	100%	100%	96%	1	7	26	1	7	25			
17	CFGC-Nrwlk										0	0	0	0	0	0			
18	CFGC-Brdgprt	65.0	44.8	41.5	64.5	39.5	39.5	100%	100%	25%	4	14	4	4	14	1			
19	Western	43.0		39.0	43.0		39.0	100%		0%	1	0	1	1	0	0			
20	Well-EMPS:Dnby										0	0	0	0	0	0			
21	Well-EMPS:Torr	43.0			43.0			100%			1	0	0	1	0	0			
22	Well-EMPS:Wtby			39.0			39.0			0%	0	0	1	0	0	0			

<sup>\*</sup> 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:**

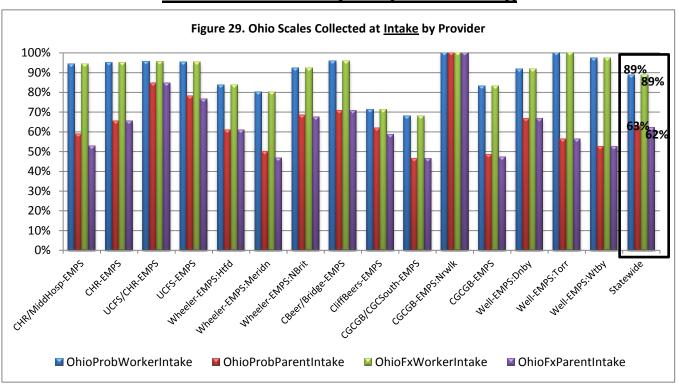
LOS: Phone Length of Stay in Days for Phone Only
LOS: FTF Length of Stay in Days for Face To Face Only

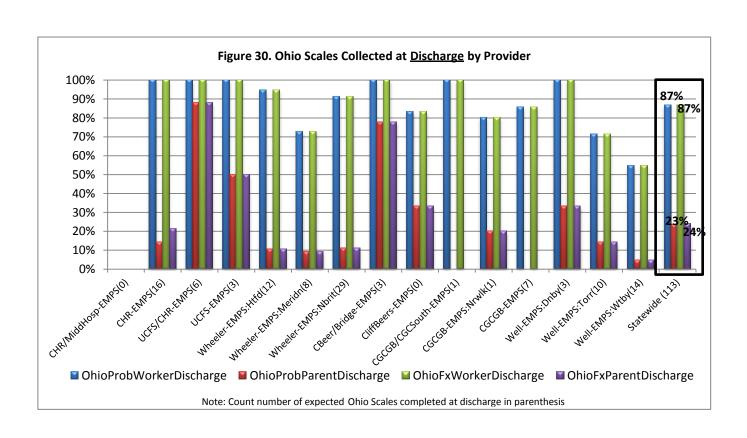
LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only

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

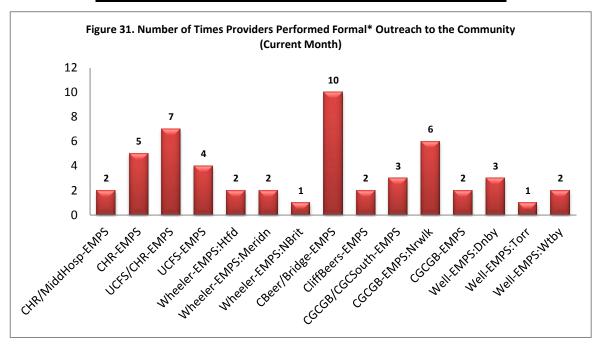
Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

## **Section XI: Data Quality Monitoring**





## **Section VIII: Community Outreach Efforts**



<sup>\*</sup> 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 lunch<sup>1</sup>. 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 lunch<sup>1</sup> 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.
- <sup>1</sup> United States Department of Agriculture, Food and Nutrition Service, "*Eligibility Manual for School Meals, January 2008*", <a href="http://www.fns.usda.gov/cnd/Lunch/">http://www.fns.usda.gov/cnd/Lunch/</a>.

### 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.