



Mobile Crisis Intervention Services Performance Improvement Center (PIC)

Quarter 1 Report: Fiscal Year 2019

July 1 – September 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.

Call and Episode Volume: In the first quarter of FY2019, 2-1-1 received 3,061 calls including 2,200 calls (71.9%) handled by Mobile Crisis providers and 861 calls (28.1%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). Of the 2,199 episodes of care, 2,036 (92.6%) were received during regular hours, 163 (7.4%) were handled after hours. Additionally, there was 1 crisis-response follow-up call. This quarter saw a 6.6% decrease in total call volume compared to the same quarter in FY2018 (3,277), and the total episodes decreased by 4.3% compared to the same quarter in FY2018 (2,299).

Among the **2,199 episodes of care** generated in Q1 FY19, episode volume ranged from 268 episodes including After Hours calls (Southwestern service area) to 592 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 2.7, with service area rates ranging from 1.6 (Southwestern) to 3.8 (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 5.3 per 1,000 children in poverty, with service area rates ranging from 2.7 (Southwestern) to 7.6 (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, 8 of 14 sites met this benchmark.

<u>Demographics</u>: Statewide this quarter, 48.1% of children served were reported as female and 51.9% male. Youth ages 13-15 years old comprised the largest portion of children served (34.0%). Additionally, 27.4% were 9-12 years old, 22.7% were 16-18 years old, 10.7% were 6-8 years old, and 5.0% were five or younger. Almost one-third (29.7%) of youth served were of Hispanic ethnicity. Additionally, the majority of the children served were White (60.1%), and 21.6% were African-American or Black. The majority of youth were insured by Husky A (63.7%) and private insurance (27.7%). Finally, the majority of clients (80.7%) were not DCF-involved.

Clinical Functioning: The most commonly reported primary presenting problems for clients statewide included: Disruptive Behavior (28.7%), Harm/Risk of Harm to Self (25.5%), Depression (12.7%), Harm/Risk of Harm to Others (7.5%), Anxiety (7.3%), and Family Conflict (5.3%). The top client primary diagnoses at intake this quarter were: Depressive Disorders (27.3%), Conduct Disorders (18.2%), Adjustment Disorders (11.7%), Anxiety Disorders (10.1%), Trauma Disorders (8.3%), and Attention Deficit/Hyperactivity Disorders (8.0%). This quarter, 78.9% 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 65.0%**, with service areas ranging from 60.1% (Western) to 73.9% (Eastern). The most common types of trauma exposure reported at intake statewide were: Disrupted Attachment/Multiple Placements (26.0%), Witnessing Violence (21.2%), Victim of Violence (19.5%), and Sexual Victimization (13.9%).

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 27.5%, a decrease from 29.2% in the same quarter last fiscal year. Over twenty-three 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 14.5% statewide, which is consistent with the same quarter in FY2018, whereas the admission rate to an inpatient unit during a mobile crisis episode was 10.5%, which is 2.5 percentage points lower than the same quarter last fiscal year.

<u>Referral Sources</u>: Statewide, **46.8%** of referrals were received from parents, families and youth, and **29.4%** were received from schools. Emergency Departments (EDs) accounted for 12.7% of all Mobile Crisis referrals. The remaining 11.1% of referrals came from other sources.

ED utilization of Mobile Crisis varies widely among hospitals in Connecticut. This quarter, a total of **280 Mobile Crisis referrals were received from EDs**, including 142 referrals for inpatient diversion and 138 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 (28.3%) and the lowest was in the

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¹ Per question regarding "Sex Assigned at Birth".

Eastern service area (1.1%). Statewide, 12.7% of all Mobile Crisis episodes came from ED referrals this quarter, 1.2% higher when compared to Q1 FY2018.

<u>Mobility</u>: The average **statewide mobility this quarter was 93.3%,** approximately one percent higher than the rate in Q1 FY2018 (Police referrals are excluded from mobility calculations). Five of the six service areas met the benchmark of 90% this quarter. Mobility rates among service areas ranged from 89.0% (New Haven) to 96.5% (Western). The range in mobility percentages widened slightly more among individual providers, from 86.7% (Wheeler:Meriden) to 97.5% (Wellmore:Danbury). Among the providers, 12 of the 14 either reached or surpassed the 90% benchmark.

<u>Response Time</u>: Statewide this quarter, **88.1%** of mobile episodes received a face-to-face response in **45** minutes or less. Performance on this indicator ranged from 81.5% (New Haven) to 94.4% (Southwestern) with all of the six service areas above the 80% benchmark. Across the state, 12 of the 14 providers met the benchmark. In addition, the statewide median response time this quarter was 30 minutes, with four 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, 10.9% of Phone Only episodes exceeded one day, 24.7% of Face-to-Face episodes exceeded five days, and **3.2% 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, 3.0 days for Face-to-Face episodes, and 12.0 days for *Stabilization Plus*.

Statewide, the median Length of Stay (LOS) for open episodes of care with a Crisis Response of Phone Only was 73.5 days and ranged from 64.0 days (Central) to 114.0 days (New Haven). The statewide median LOS for Face-to-Face was 69.0 days and ranged from 63.5 days (Eastern) to 71.0 days (New Haven and Central). For *Stabilization Plus Follow-up*, the statewide median LOS was 69.0 days with a range from 64.0 days (Western) to 71.0 days (Eastern and New Haven). Across all crisis response categories during the first quarter of FY2019 100% of episodes remained open beyond the benchmarks (1 day for Phone Only, 5 days for Face-to-Face, and 45 days for *Stabilization Plus Follow-up*). 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 (93.9%). Statewide, the top three reasons for client discharge were: Met Treatment Goals (70.3%), Family Discontinued (16.8%), and Client Hospitalized: Psychiatrically (6.2%).

Statewide, clients were most likely to be **referred to Outpatient Services at discharge (33.8%)**. Other care referrals at discharge included: Intensive Outpatient Program (13.3%), Other Community Based Services (5.8%), Inpatient Hospital (5.2%), Partial Hospital Program (3.3%), Care Coordination (2.0%), and Intensive In-Home Services (1.7%). An additional 30.7% 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 0.13 and 1.76 respectively. Decreases in problem scores of 3.89 points on parent ratings and 3.28 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 scores increased by 6.3 percentage points and the Worker Problem Severity scores by 5.7 percentage points when compared to the same quarter in FY2018. The completion rate for Parent Problem and Functioning scores decreased by one percentage point each compared to FY2018 Q1.

<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 4.31 and 4.39, respectively. Among other referrers (e.g. schools, hospitals, DCF, etc.), the average ratings of 2-1-1 and Mobile Crisis were 4.15 and 4.20, respectively. Qualitative comments (see Section IX) varied from very satisfied to dissatisfied.

<u>Training Attendance</u>: The statewide percentage of all twelve trainings completed by all active staff as of September 30, 2018 is 14%. This percentage of staff completing all trainings is higher than Q1 FY2018 (3%).

Community Outreach: Outreach numbers ranged from 0 (UCFS:NE) to 8 (Wellmore: Wtby).

SFY 2019 Q1 RBA Report Card: Mobile Crisis Intervention Services

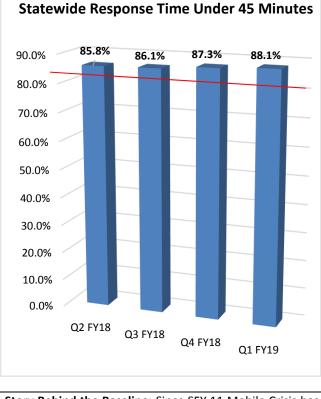
Quality of Life Result: Connecticut's children will live in stable environments, safe, healthy and ready to lead successful lives.

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.

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

How	Much Did	We Do?				How Mud	ch Did We Do	?
	Tota	l Call and	d Episod	e Volume			Episod	es
100%	4%	6%	5 %	5% 4%	5.2% 3.5%		.	
90%	23%	3%	3/0	4/0	3.5%	Q2 FY18	DCF Child	ſ
80%	25%	30%	29%	29%	28.3%	1	305 (13.5%)	
70%	5%	30%				2	46 (19.7%)	
60%		5%	4%	4%	4.2%	3	11 (28.9%)	
50%						4 or More	4 (40.0%)	
40%	57%	40%	42%	41%	42.5%	Q3 FY18	DCF Child	ſ
30%		40%				1	312 (13.5%)	- 2
20%						2	42 (19.7%)	
10%	140/	16%	17%	18%	16.4%	3	4 (12.5%)	
0%	11%	20/0				4 or More	2 (20.0%)	
	CT Statewide					Q4 FY18	DCF Child	ſ
	Child Population	Episodes Q2 FY18	Episodes Q3 FY18	Episodes Q4 FY18	Episodes Q1 FY19	1	342 (14.8%)	1
= 11b1	(2015)	Q2 20		-	Q1.1.13	2	36 (17.4%)	
	e to report ' nic-Any Race		■ Multirad	on-Hispanic		3	10 (25.6%)	
	Non-Hispanic			African America	ın Non-Hispanic	4 or More	1 (12.5%)	
		Q2 FY18	Q3 FY18	Q4 FY18	Q1 FY19	Q1 FY19	DCF Child	ı
	obile Crisis Episode	4072	4149	4004	2200	1	182 (14.4%)	1
	-1-1 Only	1490	1492	1487	861	2	34 (38.2%)	
	•		-			3	9 (50.0%)	
	Total	5562	5641	5491	3061	4 or More	2 (22.2%)	

Episodes Per Child DCF Child Non-DCF Child **O2 FY18** Total 305 (13.5%) 1953 (86.5%) 2,258 46 (19.7%) 188 (80.3%) 234 38 11 (28.9%) 27 (71.1%) 4 or More 4 (40.0%) 6 (60.0%) 10 **DCF Child** Q3 FY18 Non-DCF Child Total 312 (13.5%) 2006 (86.5%) 2,318 2 171 (80.3%) 42 (19.7%) 213 3 4 (12.5%) 32 28 (87.5%) 4 or More 2 (20.0%) 8 (80.0%) 10 **DCF Child** Q4 FY18 Non-DCF Child **Total** 1 342 (14.8%) 2,306 1964 (85.2%) 36 (17.4%) 171 (82.6%) 207 10 (25.6%) 29 (74.4%) 39 1 (12.5%) 7 (87.5%) 8 4 or More Q1 FY19 **DCF Child** Non-DCF Child **Total** 182 (14.4%) 1083 (85.6%) 1,265 2 34 (38.2%) 89 55 (61.8%) 18 9 (50.0%) 9 (50.0%) 2 (22.2%) 4 or More 7 (77.8%)



How Well Did We Do?

Story Behind the Baseline: In SFY 19 Q1 there were 3,061 total calls to the 2-1-1 Call Center resulting in 2,199 mobile episodes plus one crisis response follow-up call. Compared to the same quarter in SFY 18 this represents a decrease in 2-1-1 calls of 6.6% (216 fewer calls) and decrease in mobile episodes of 4.5% (103 fewer episodes). The percentages of both Black and Hispanic children served is higher than the statewide population percentages. Compared to SFY 18 Q1 the racial composition percentages of children served are similar, with slight increases in Black and Multiracial children served, and slight decreases in Hispanic children served.

Trend: \rightarrow

Story Behind the Baseline: In SFY 19 Q1 of the 1,381* children served by Mobile Crisis, 91.6% (1,265) received only one episode of care, and 98.0% (1,354) received one or two episodes of care; compared to 91.1% (1,261) and 97.9% (1,355) respectively for SFY 18 Q1. The number of children with 4 or more episodes has remained about the same for 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.

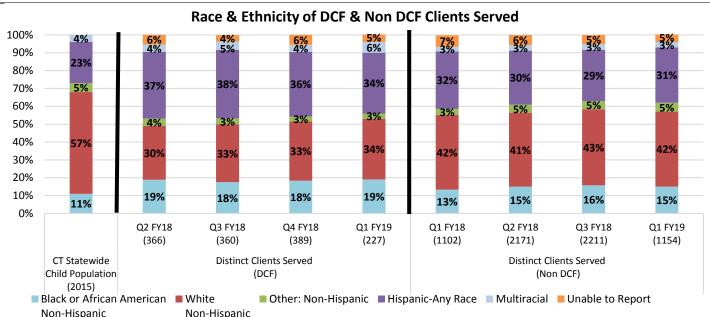
*Note: Only children with DCF/Non DCF status identified were included.

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 Q1 88.1% of all mobile responses achieved the 45 minute mark compared to 86.3% for SFY 18 Q1. The median response time for SFY 19 Q1 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: 个

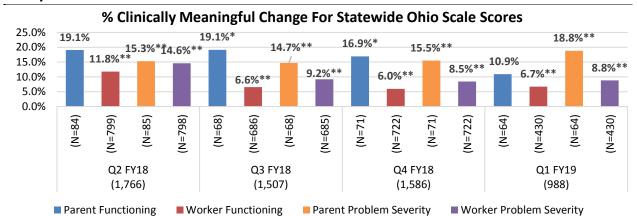
How Well Did We Do?



Story Behind the Baseline: In SFY 19 Q1 Hispanic and Black DCF and Non-DCF involved children^{1,2} 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 DCFinvolved children utilized Mobile Crisis at higher rates than Hispanic and Black Non-DCF involved children.

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

Is Anyone Better Off?



Story Behind the Baseline: The Ohio Scales have demonstrated clinically significant positive changes for children following a Mobile Crisis response. The parent problem severity scale saw an improvement of 3.5 percentage points in SFY 19 Q1 in comparison to SFY 18 Q1. The remaining scales showed a decrease in percentage of clinically meaningful change in comparison to SFY 18 Q1. 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: →

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

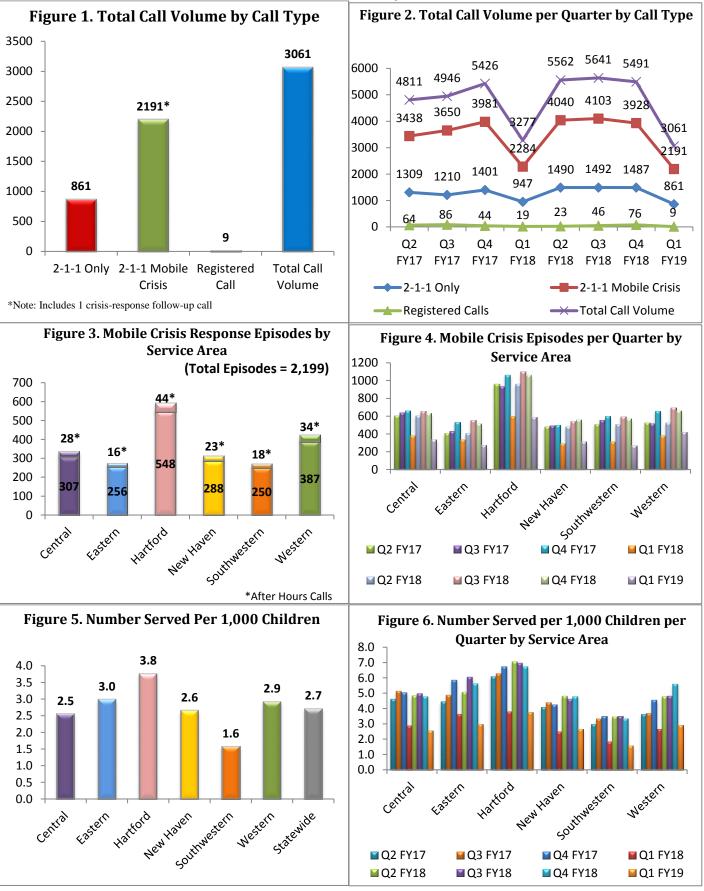
Proposed Actions to Turn the Curve:

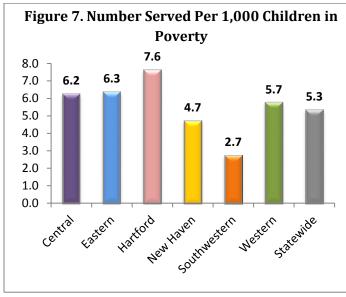
- Continue outreach to Emergency Departments and Police Departments to support their ongoing collaboration with Mobile Crisis.
- Continue outreach to schools in support of their ongoing collaboration with Mobile Crisis.
- Continue to increase the parent completion rates for the Ohio Scales.
- Review 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. The report cards also serve a quality assurance function for the provider and the department.

Data Development Agenda:

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

Section II: Mobile Crisis Statewide/Service Area Dashboard





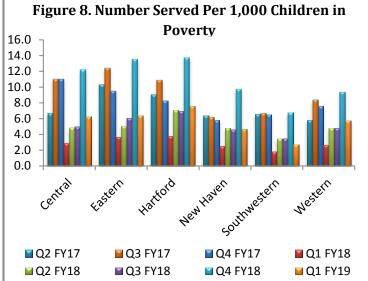
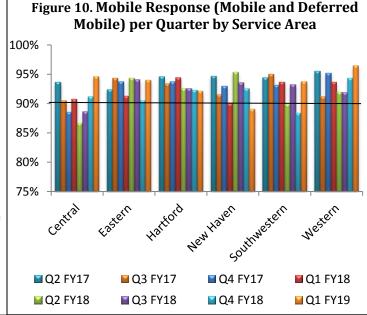
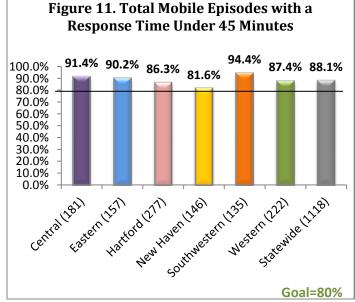
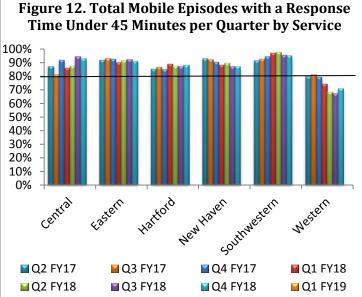
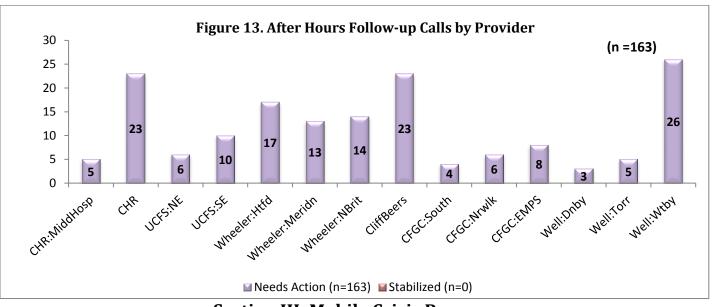


Figure 9. Mobile Response (Mobile and Deferred Mobile) by Service Area 94.6% 94.0% 92.1% _{89.0%} 93.8% ^{96.5%} 93.3% 100.0% 90.0% 80.0% 70.0% 60.0% 50.0% 40.0% 30.0% 20.0% 10.0% Haven Western Western 0.0% WenHaven Hartford sxatevide kastern Goal=90%

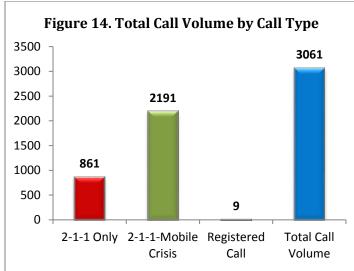


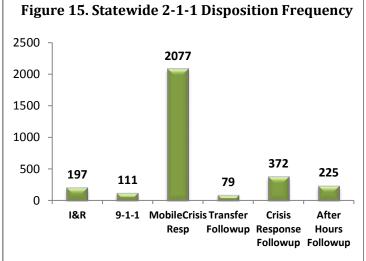


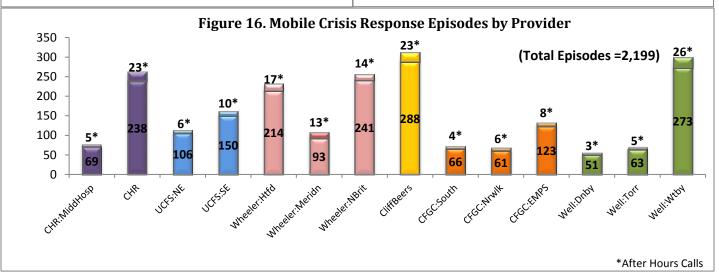


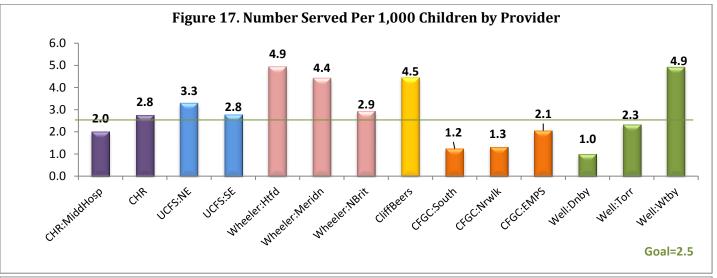


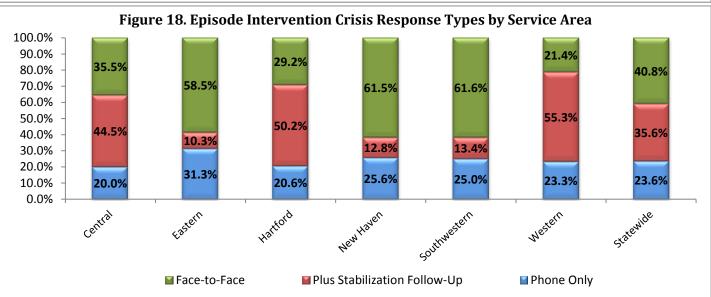
Section III: Mobile Crisis Response

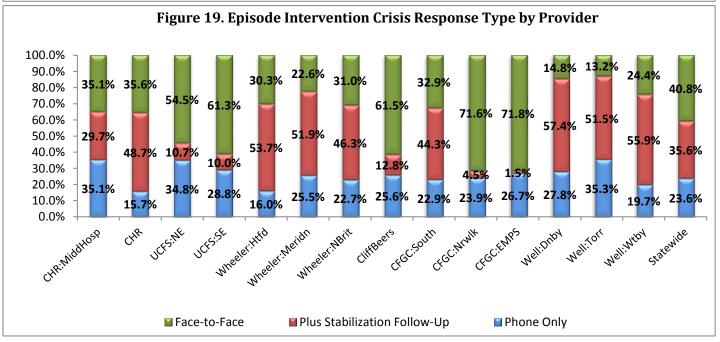




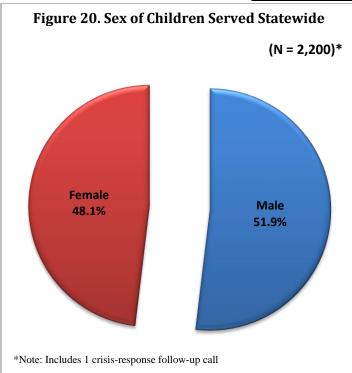


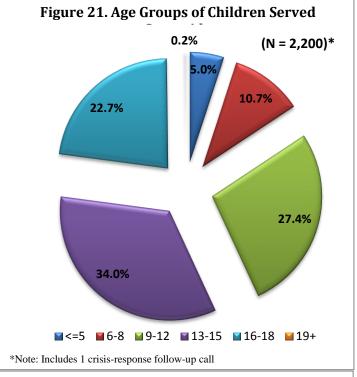


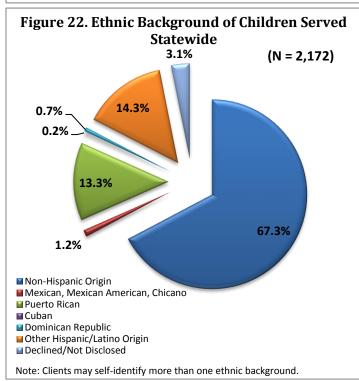


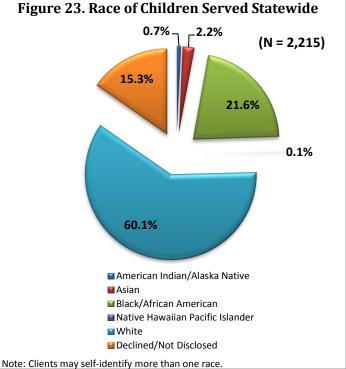


Section IV: Demographics

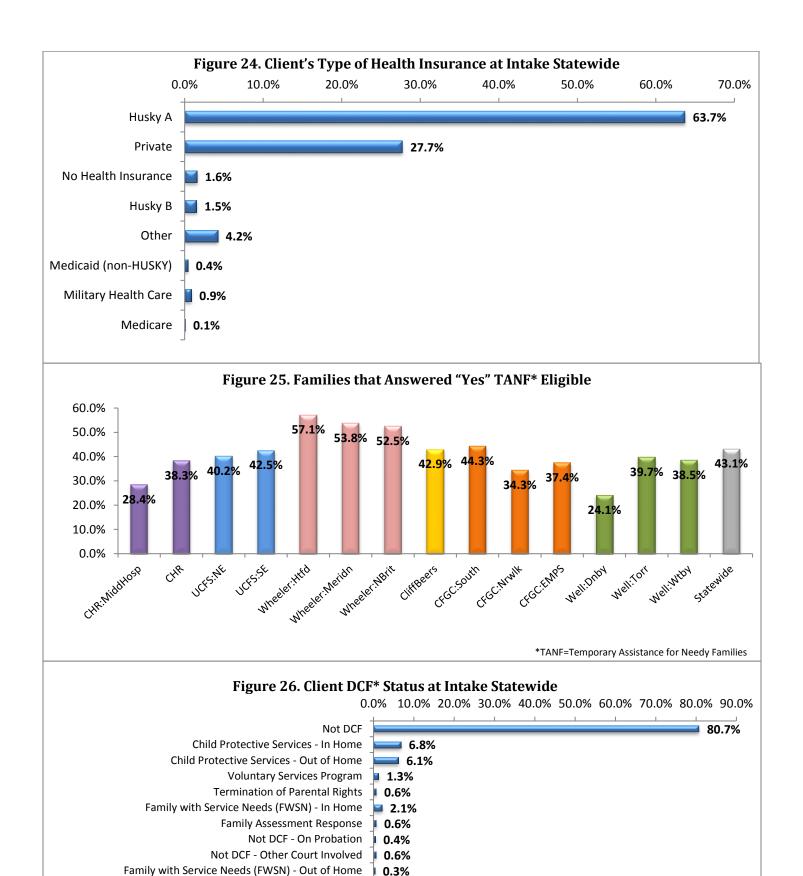








Note: According to the U.S. Census Bureau, "[P]eople who identify their origin as Spanish, Hispanic, or Latino may be of any race...[R]ace is considered a separate concept from Hispanic origin (ethnicity) and, wherever possible, separate questions should be asked on each concept."



*DCF=Department of Children and Families

0.2%

0.1%

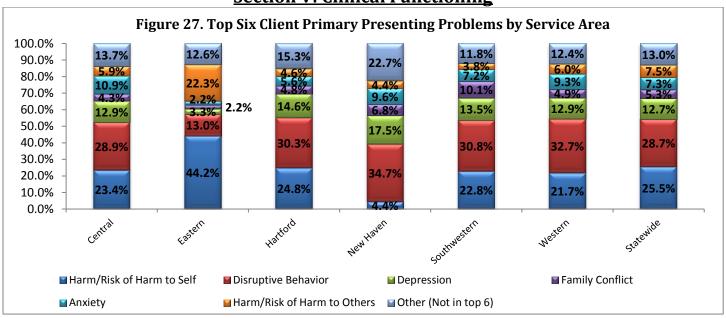
0.1%

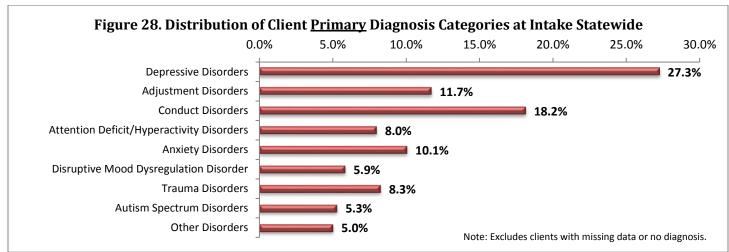
Probate

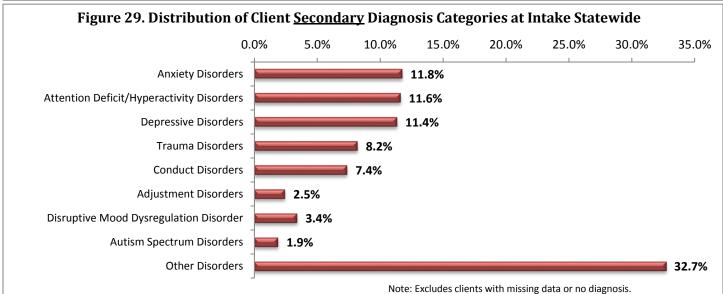
Juvenile Justice (delinquency) commitment

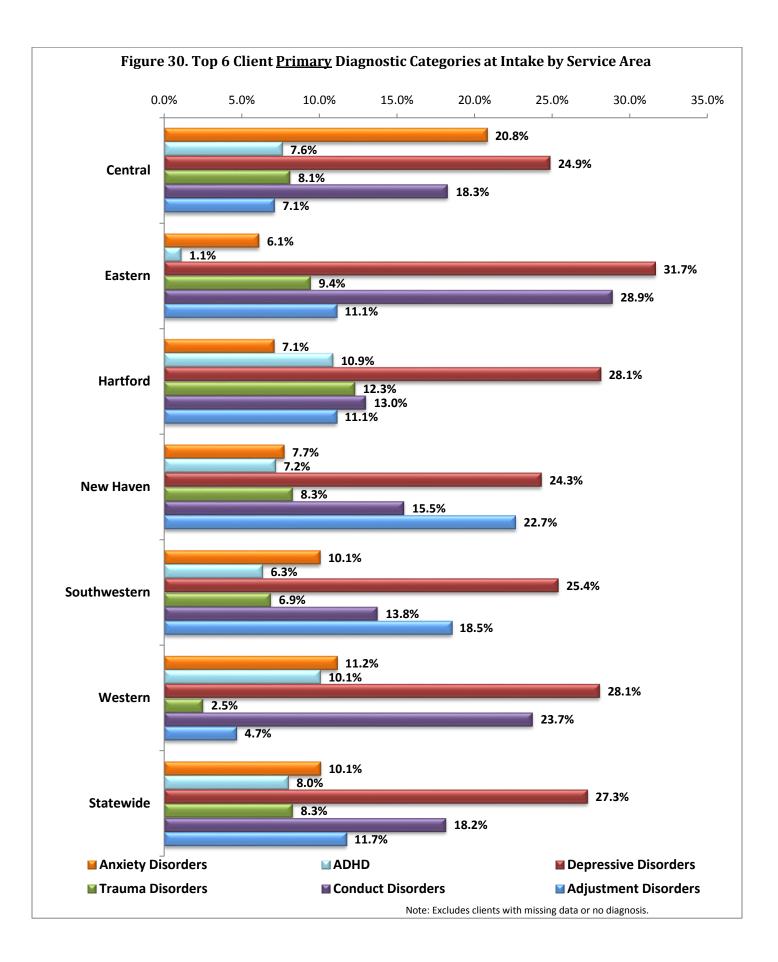
Dual Commitment (Juvenile Justice and Child Protective Services)

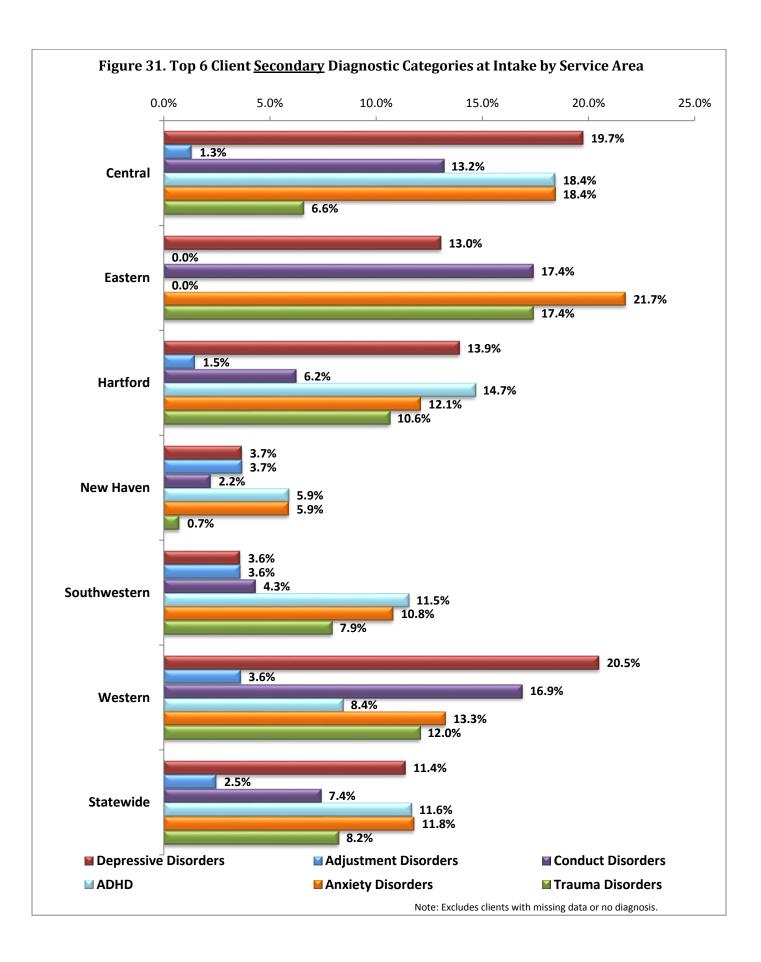
Section V: Clinical Functioning

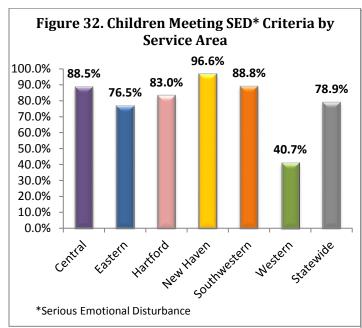


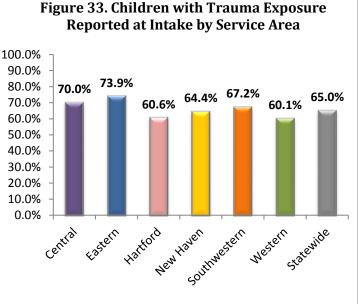


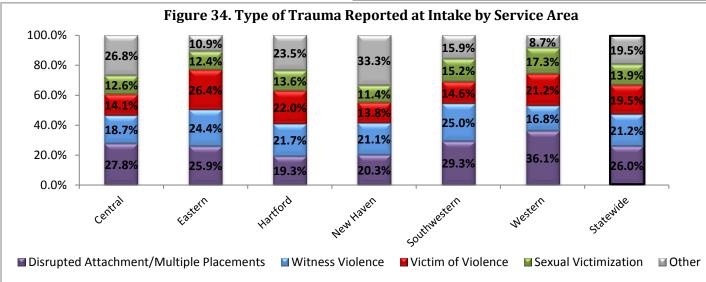


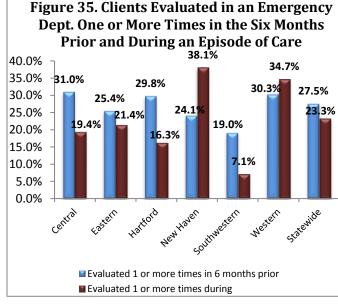


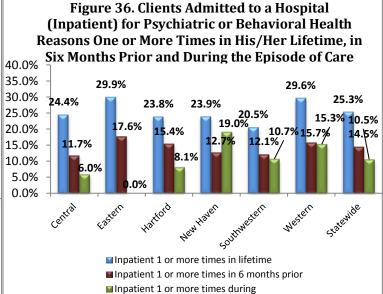












Section VI: Referral Sources

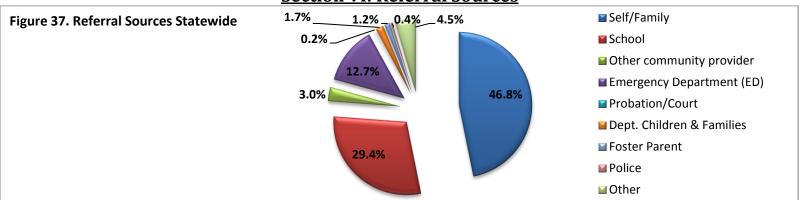
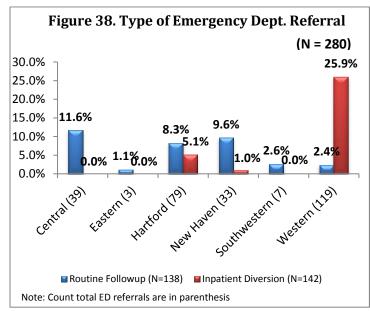
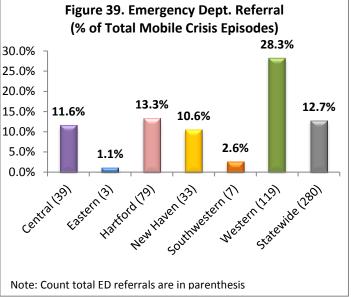
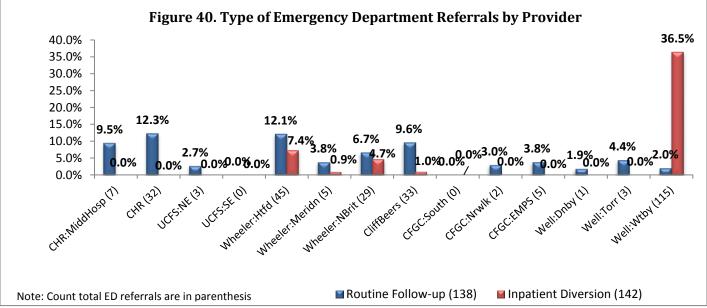


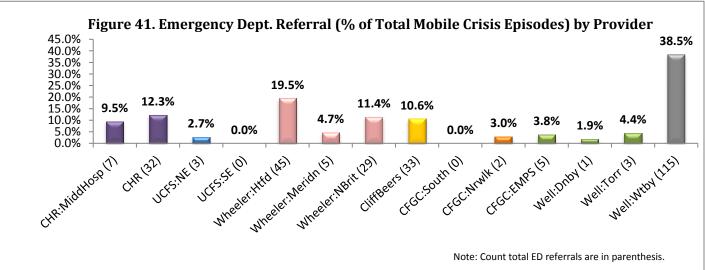
Table 1. Referral Sources (Q1 FY 2019)

	Self/ Family	Family Adv.	School	Info- Line (2-1-1)	Other Prog. w/in Agency	Other Comm. Provider	Emer Dept. (ED)	Prob. or Court	Dept. of Child & Families (DCF)	Psych Hospital	Cong. Care Facility	Foster Parent	Police	Phys.	Comm. Nat. Supp.	Other State Agency
STATEWIDE	46.8%	0.1%	29.4%	0.0%	0.8%	3.0%	12.7%	0.2%	1.7%	1.8%	1.0%	1.2%	0.4%	0.8%	0.2%	0.0%
CENTRAL	49.6%	0.0%	26.6%	0.0%	0.9%	2.4%	11.6%	0.0%	0.0%	0.6%	2.1%	0.9%	2.1%	1.8%	1.5%	0.0%
CHR:MiddHosp	45.9%	0.0%	31.1%	0.0%	1.4%	2.7%	9.5%	0.0%	0.0%	0.0%	2.7%	2.7%	0.0%	4.1%	0.0%	0.0%
CHR	50.6%	0.0%	25.3%	0.0%	0.8%	2.3%	12.3%	0.0%	0.8%	2.7%	0.4%	1.9%	2.3%	0.8%	0.0%	0.0%
EASTERN	58.1%	0.0%	31.3%	0.0%	0.7%	1.1%	1.1%	0.0%	0.0%	0.7%	2.2%	2.9%	1.1%	0.0%	0.7%	0.0%
UCFS:NE	57.1%	0.0%	34.8%	0.0%	0.0%	0.0%	2.7%	0.0%	0.0%	1.8%	0.0%	1.8%	0.0%	1.8%	0.0%	0.0%
UCFS:SE	58.8%	0.0%	28.8%	0.0%	1.3%	1.9%	0.0%	0.0%	1.3%	2.5%	5.0%	0.6%	0.0%	0.0%	0.0%	0.0%
HARTFORD	40.7%	0.0%	34.6%	0.0%	0.7%	3.0%	13.3%	0.0%	0.2%	2.4%	3.0%	0.2%	0.8%	0.2%	0.7%	0.2%
Wheeler:Htfd	29.0%	0.0%	41.1%	0.0%	1.3%	3.0%	19.5%	0.4%	0.4%	4.8%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%
Wheeler:Meridn	50.9%	0.0%	34.0%	0.0%	0.9%	2.8%	4.7%	0.0%	1.9%	0.9%	0.0%	2.8%	0.0%	0.9%	0.0%	0.0%
Wheeler:NBrit	47.1%	0.0%	29.0%	0.0%	0.0%	3.1%	11.4%	0.0%	4.3%	2.4%	0.4%	0.4%	0.4%	1.2%	0.4%	0.0%
NEW HAVEN	54.8%	0.0%	27.6%	0.0%	0.0%	4.8%	10.6%	0.0%	0.3%	1.0%	0.3%	0.0%	0.3%	0.3%	0.0%	0.0%
CliffBeers	54.8%	0.0%	27.6%	0.0%	0.0%	4.8%	10.6%	0.3%	1.0%	0.3%	0.0%	0.3%	0.3%	0.0%	0.0%	0.0%
SOUTHWESTERN	57.8%	0.7%	23.1%	0.0%	2.2%	4.5%	2.6%	0.0%	0.0%	3.4%	0.4%	0.4%	3.0%	0.0%	1.5%	0.4%
CFGC:South	58.6%	0.0%	22.9%	0.0%	4.3%	5.7%	0.0%	0.0%	2.9%	0.0%	0.0%	2.9%	0.0%	2.9%	0.0%	0.0%
CFGC:Nrwlk	67.2%	0.0%	20.9%	0.0%	0.0%	1.5%	3.0%	0.0%	6.0%	0.0%	1.5%	0.0%	0.0%	0.0%	0.0%	0.0%
CFGC:EMPS	52.7%	1.5%	24.4%	0.0%	2.3%	5.3%	3.8%	0.0%	2.3%	0.8%	0.0%	4.6%	0.0%	1.5%	0.8%	0.0%
WESTERN	33.0%	0.0%	28.3%	0.0%	0.5%	2.6%	28.3%	0.0%	0.5%	1.9%	1.4%	1.9%	0.5%	0.2%	0.5%	0.5%
Well:Dnby	53.7%	0.0%	35.2%	0.0%	0.0%	3.7%	1.9%	0.0%	1.9%	1.9%	0.0%	0.0%	0.0%	1.9%	0.0%	0.0%
Well:Torr	38.2%	0.0%	38.2%	0.0%	0.0%	4.4%	4.4%	0.0%	4.4%	1.5%	5.9%	0.0%	1.5%	0.0%	1.5%	0.0%
Well:Wtby	28.1%	0.0%	24.7%	0.0%	0.7%	2.0%	38.5%	0.7%	1.3%	1.3%	1.3%	0.7%	0.0%	0.3%	0.3%	0.0%

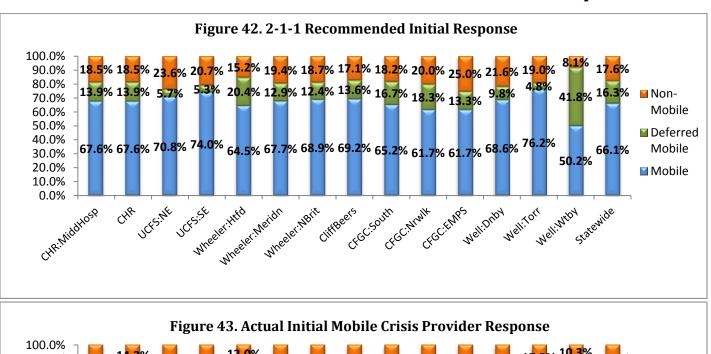


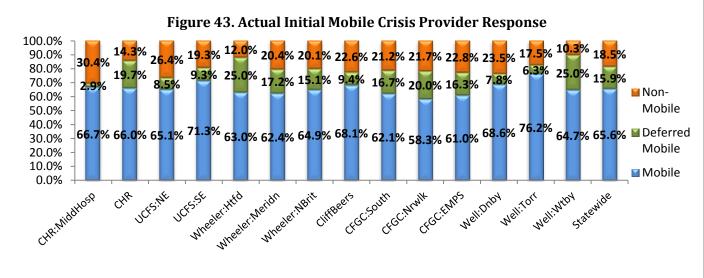


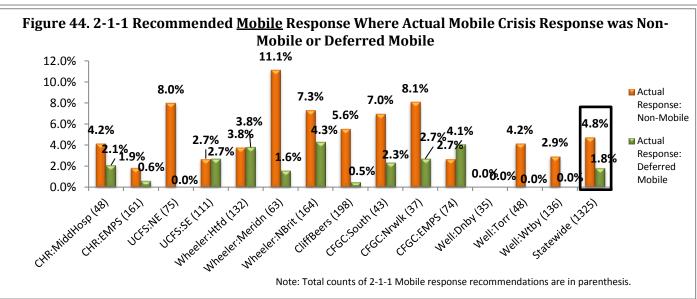


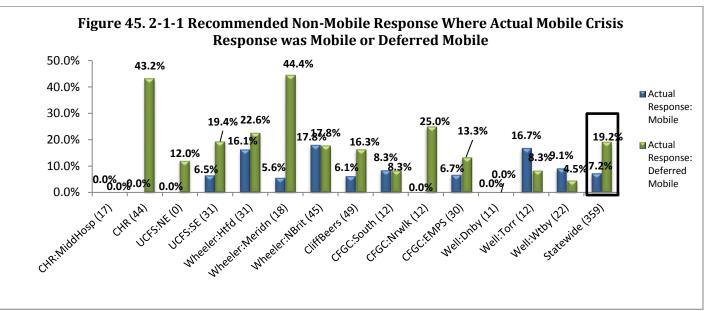


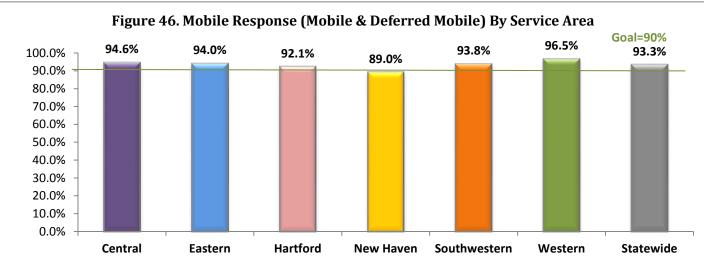
Section VII: 2-1-1 Recommendations and Mobile Crisis Response

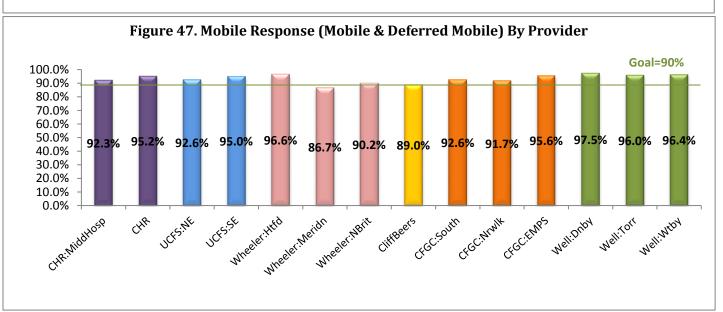




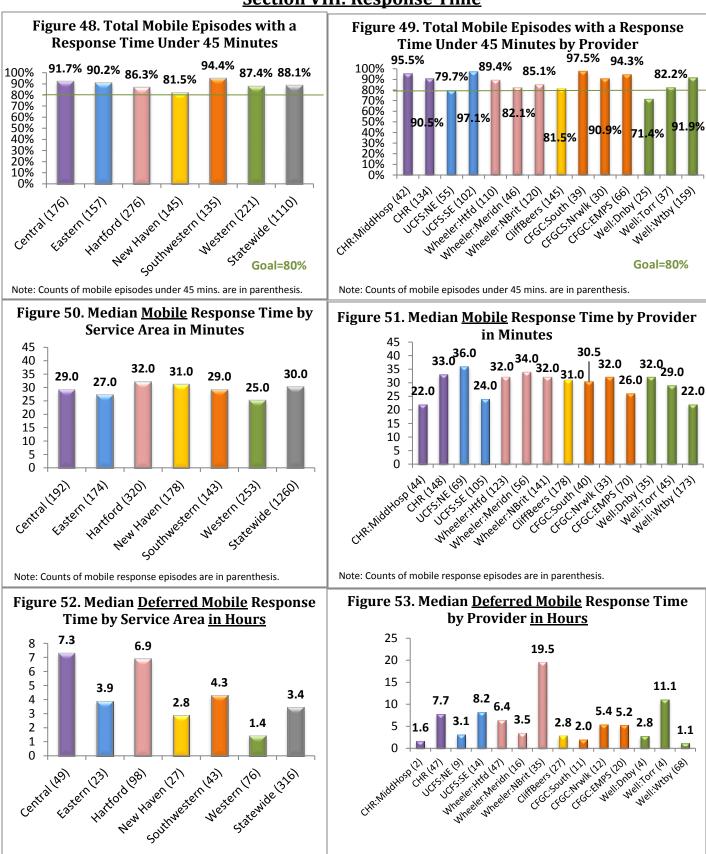








Section VIII: Response Time



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

		А	В	С	D	Е	F	G	Н	- 1	J	K	L	М	N	0	Р	Q	R
			Disc	harged E	pisodes fo	r Curr	ent Repor	ting Perio	od				Cumu	lative D	Dischar	ged Epis	odes*		
			Mean		ſ	Mediar	n		Percent			Mean			Mediar	า	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	0.6	5.4	14.6	0.0	3.0	12.0	10.9%	24.7%	3.2%	0.6	5.4	14.6	0.0	3.0	12.0	10.9%	24.7%	3.2%
2	Central	1.8	10.7	19.4	0.5	7.0	15.0	32.3%	56.2%	6.6%	1.8	10.7	19.4	0.5	7.0	15.0	32.3%	56.2%	6.6%
3	CHR:MiddHosp	3.5	2.7	10.5	2.5	2.0	8.0	59.1%	9.1%	0.0%	3.5	2.7	10.5	2.5	2.0	8.0	59.1%	9.1%	0.0%
4	CHR	0.9	14.1	22.1	0.0	11.0	19.0	17.5%	76.5%	8.5%	0.9	14.1	22.1	0.0	11.0	19.0	17.5%	76.5%	8.5%
5	Eastern	0.2	3.1	16.9	0.0	3.0	16.5	3.5%	2.9%	0.0%	0.2	3.1	16.9	0.0	3.0	16.5	3.5%	2.9%	0.0%
6	UCFS:NE	0.3	3.1	20.8	0.0	3.0	21.0	5.1%	5.9%	0.0%	0.3	3.1	20.8	0.0	3.0	21.0	5.1%	5.9%	0.0%
7	UCFS:SE	0.2	3.1	14.3	0.0	3.5	15.0	2.2%	1.2%	0.0%	0.2	3.1	14.3	0.0	3.5	15.0	2.2%	1.2%	0.0%
8	Hartford	0.9	4.6	12.2	0.0	2.0	9.0	18.3%	25.8%	2.0%	0.9	4.6	12.2	0.0	2.0	9.0	18.3%	25.8%	2.0%
9	Wheeler:Htfd	1.0	3.8	11.6	1.0	3.0	9.0	19.4%	21.2%	0.0%	1.0	3.8	11.6	1.0	3.0	9.0	19.4%	21.2%	0.0%
10	Wheeler:Meridn	2.2	3.2	9.6	1.0	2.0	7.0	48.0%	14.3%	0.0%	2.2	3.2	9.6	1.0	2.0	7.0	48.0%	14.3%	0.0%
11	Wheeler:NBrit	0.2	5.8	14.4	0.0	2.0	11.0	3.8%	33.9%	5.3%	0.2	5.8	14.4	0.0	2.0	11.0	3.8%	33.9%	5.3%
12	New Haven	0.2	6.5	22.1	0.0	3.0	20.5	4.0%	38.4%	11.5%	0.2	6.5	22.1	0.0	3.0	20.5	4.0%	38.4%	11.5%
13	CliffBeers	0.2	6.5	22.1	0.0	3.0	20.5	4.0%	38.4%	11.5%	0.2	6.5	22.1	0.0	3.0	20.5	4.0%	38.4%	11.5%
14	Southwestern	0.2	6.2	9.6	0.0	3.0	6.0	1.5%	23.5%	0.0%	0.2	6.2	9.6	0.0	3.0	6.0	1.5%	23.5%	0.0%
15	CFGC:South	0.1	3.0	10.6	0.0	0.0	5.5	0.0%	9.1%	0.0%	0.1	3.0	10.6	0.0	0.0	5.5	0.0%	9.1%	0.0%
16	CFGC:Nrwlk	0.1	5.3	5.3	0.0	2.0	6.0	0.0%	25.8%	0.0%	0.1	5.3	5.3	0.0	2.0	6.0	0.0%	25.8%	0.0%
17	CFGC:EMPS	0.2	7.6	7.5	0.0	4.0	7.5	2.9%	27.3%	0.0%	0.2	7.6	7.5	0.0	4.0	7.5	2.9%	27.3%	0.0%
18	Western	0.4	2.5	14.3	0.0	1.0	13.0	6.6%	5.5%	2.1%	0.4	2.5	14.3	0.0	1.0	13.0	6.6%	5.5%	2.1%
19	Well:Dnby	0.8	3.6	13.2	0.0	4.0	10.0	6.7%	0.0%	0.0%	0.8	3.6	13.2	0.0	4.0	10.0	6.7%	0.0%	0.0%
20	Well:Torr	0.2	5.1	11.3	0.0	2.0	8.0	4.5%	14.3%	0.0%	0.2	5.1	11.3	0.0	2.0	8.0	4.5%	14.3%	0.0%
21	Well:Wtby	0.4	2.1	15.0	0.0	1.0	14.0	7.4%	4.9%	2.9%	0.4	2.1	15.0	0.0	1.0	14.0	7.4%	4.9%	2.9%

^{*} 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 3. Number of Episodes for <u>Discharged Episodes</u> of Care

		Α	В	С	D	Е	F	G	Н	1	J	K	L		
		Disc	harged	Episodes	-	rent Rep	orting								
				Pe	riod				Cumulative	Dischar	ged Ep	isodes*			
		N used	Mean/	Median	N us	sed for P	ercent	N used	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	488	685	411	53	169	13	488	685	411	53	169	13		
2	Central	62	73	61	20	41	4	62	73	61	20	41	4		
3	CHR:MiddHosp	22	22	14	13	2	0	22	22	14	13	2	0		
4	CHR	40	51	47	7	39	4	40	51	47	7	39	4		
5	Eastern	85	137	10	3	4	0	85	137	10	3	4	0		
6	UCFS:NE	39	51	4	2	3	0	39	51	4	2	3	0		
7	UCFS:SE	46	86	6	1	1	0	46	86	6	1	1	0		
8	Hartford	109	132	152	20	34	3	109	132	152	20	34	3		
9	Wheeler:Htfd	31	52	65	6	11	0	31	52	65	6	11	0		
10	Wheeler:Meridn	25	21	30	12	3	0	25	21	30	12	3	0		
11	Wheeler:NBrit	53	59	57	2	20	3	53	59	57	2	20	3		
12	New Haven	75	151	26	3	58	3	75	151	26	3	58	3		
13	CliffBeers	75	151	26	3	58	3	75	151	26	3	58	3		
14	Southwestern	66	119	21	1	28	0	66	119	21	1	28	0		
15	CFGC:South	16	22	16	0	2	0	16	22	16	0	2	0		
16	CFGC:Nrwlk	16	31	3	0	8	0	16	31	3	0	8	0		
17	CFGC:EMPS	34	66	2	1	18	0	34	66	2	1	18	0		
18	Western	91	73	141	6	4	3	91	73	141	6	4	3		
19	Well:Dnby	15	5	17	1	0	0	15	5	17	1	0	0		
20	Well:Torr	22	7	19	1	1	0	22	7	19	1	1	0		
21	Well:Wtby	54	61	105	4	3	3	54	61	105	4	3	3		

^{*} 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

	Table 4. Length of Stay for Open L			/ -									1			
		Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0
					Epis	odes St	ill in Care*					N of E	pisodes S	Still in C	are*	
											N used					
			Mean		Median				Me	ean/Med	lian	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	79.9	72.5	72.1	73.5	69.0	69.0	100.0%	100.0%	100.0%	22	146	293	22	146	293
2	Central	64.0	73.1	75.3	64.0	71.0	70.0	100.0%	100.0%	100.0%	1	34	77	1	34	77
3	CHR:MiddHosp	64.0	63.0	NA	64.0	63.0	NA	100.0%	100.0%	NA	1	2	0	1	2	0
4	CHR	NA	73.8	75.3	NA	71.5	70.0	NA	100.0%	100.0%	0	32	77	0	32	77
5	Eastern	NA	63.8	71.1	NA	63.5	71.0	NA	100.0%	100.0%	0	4	14	0	4	14
6	UCFS:NE	NA	63.8	72.5	NA	63.5	71.0	NA	100.0%	100.0%	0	4	8	0	4	8
7	UCFS:SE	NA	NA	69.3	NA	NA	67.5	NA	NA	100.0%	0	0	6	0	0	6
8	Hartford	79.9	73.4	72.6	79.0	70.0	70.0	100.0%	100.0%	100.0%	11	37	118	11	37	118
9	Wheeler:Htfd	78.0	72.5	75.4	78.5	71.5	71.0	100.0%	100.0%	100.0%	6	14	43	6	14	43
10	Wheeler:Meridn	95.0	64.0	69.9	95.0	63.0	69.0	100.0%	100.0%	100.0%	2	3	21	2	3	21
11	Wheeler:NBrit	73.7	75.4	71.4	72.0	72.0	70.0	100.0%	100.0%	100.0%	3	20	54	3	20	54
12	New Haven	114.3	77.4	76.4	114.0	71.0	71.0	100.0%	100.0%	100.0%	3	27	11	3	27	11
13	CliffBeers	114.3	77.4	76.4	114.0	71.0	71.0	100.0%	100.0%	100.0%	3	27	11	3	27	11
14	Southwestern	NA	68.8	70.7	NA	67.0	66.0	NA	100.0%	100.0%	0	29	10	0	29	10
15	CFGC:South	NA	69.0	70.7	NA	69.0	66.0	NA	100.0%	100.0%	0	1	10	0	1	10
16	CFGC:Nrwlk	NA	69.8	NA	NA	70.0	NA	NA	100.0%	NA	0	11	0	0	11	0
17	CFGC	NA	68.2	NA	NA	67.0	NA	NA	100.0%	NA	0	17	0	0	17	0
18	Western	67.3	69.5	66.9	70.0	67.0	64.0	100.0%	100.0%	100.0%	7	15	63	7	15	63
19	Well:Dnby	NA	63.0	66.4	NA	61.0	67.0	NA	100.0%	100.0%	0	3	9	0	3	9
20	Well:Torr	67.5	79.5	68.0	67.5	79.5	69.0	100.0%	100.0%	100.0%	2	2	15	2	2	15
21	Well:Wtby	67.2	69.5	66.5	70.0	67.5	64.0	100.0%	100.0%	100.0%	5	10	39	5	10	39
	* Data includes enicodes still in					2010	١. ٢									

^{*} 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

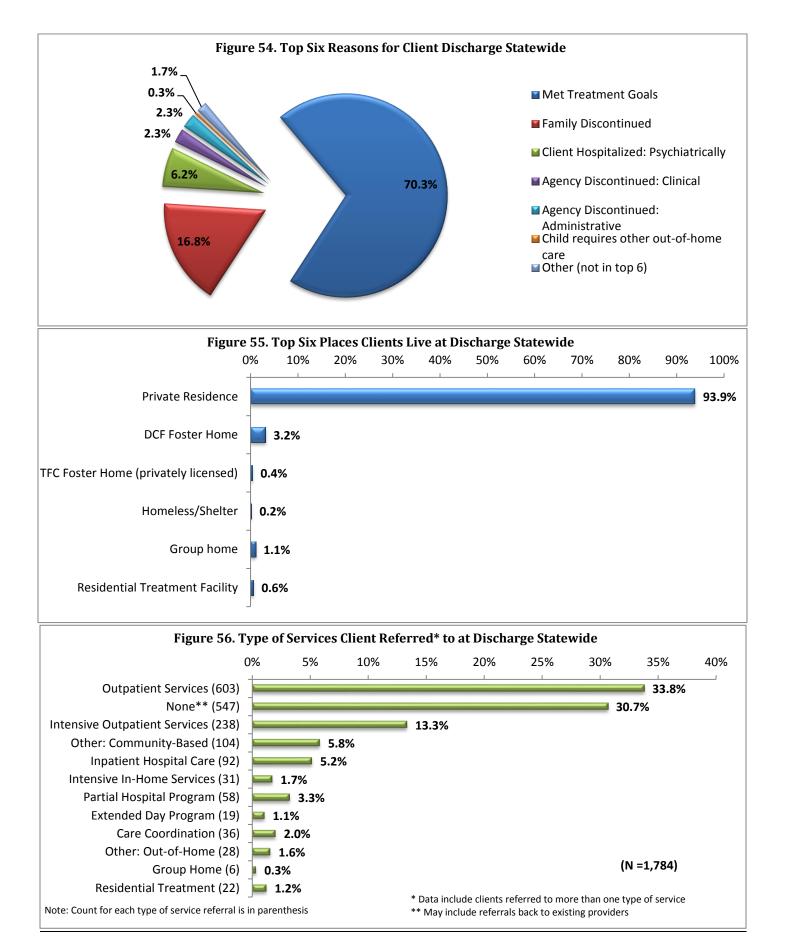


Table 5. Ohio Scales Scores by Service Area

Table 5. Unio Scales Scores b	, 5011100111						
Service Area	N (paired [,] intake & discharge)	Mean (paired [,] intake)	Mean (paired [,] discharge)	Mean Difference (paired ¹ cases)	t-score	Sig.	† .0510 * P < .05 **P < .01
STATEWIDE	uischurge	intukej	uischurge	cusesy	t-score	Sig.	
Parent Functioning Score	64	46.11	46.23	0.13	0.08	0.933	
Worker Functioning Score	428	43.49	45.25	1.76	4.72	0.000	**
Parent Problem Score	64	28.14	24.25	-3.89	-2.72	0.008	**
Worker Problem Score	428	28.24	24.96	-3.28	-9.83	0.000	**
Central							
Parent Functioning Score	13	40.15	46.08	5.92	1.67	0.122	
Worker Functioning Score	55	42.44	46.85	4.42	5.59	0.000	**
Parent Problem Score	13	35.08	27.38	-7.69	-1.98	0.071	†
Worker Problem Score	54	28.69	22.87	-5.81	-6.10	0.000	**
Eastern							
Parent Functioning Score	3	48.33	50.67	2.33	0.24	0.832	
Worker Functioning Score	11	40.36	41.09	0.73	0.25	0.810	
Parent Problem Score	3	21.33	15.33	-6.00	-0.63	0.592	
Worker Problem Score	11	33.36	28.55	-4.82	-1.72	0.116	
Hartford							
Parent Functioning Score	19	46.26	46.68	0.42	0.33	0.746	
Worker Functioning Score	148	45.82	46.20	0.38	0.49	0.621	
Parent Problem Score	19	24.84	20.00	-4.84	-2.83	0.011	*
Worker Problem Score	148	25.79	23.07	-2.72	-4.92	0.000	**
New Haven							
Parent Functioning Score	0	0.00	0.00	0.00	0.00	0.000	**
Worker Functioning Score	23	38.74	38.83	0.09	0.08	0.936	
Parent Problem Score	0	0.00	0.00	0.00	0.00	0.000	**
Worker Problem Score	24	26.29	26.13	-0.17	-0.12	0.905	
Southwestern							
Parent Functioning Score	10	48.70	39.70	-9.00	-1.91	0.088	†
Worker Functioning Score	20	39.80	37.05	-2.75	-1.62	0.122	
Parent Problem Score	10	29.10	34.30	5.20	1.11	0.295	
Worker Problem Score	20	35.65	30.70	-4.95	-2.38	0.028	*
Western							
Parent Functioning Score	19	48.32	48.63	0.32	0.12	0.906	
Worker Functioning Score	171	43.08	45.99	2.91	6.03	0.000	**
Parent Problem Score	19	27.26	22.47	-4.79	-2.42	0.026	*
Worker Problem Score	171	29.29	26.18	-3.12	-6.42	0.000	*

paired = Number of cases with both intake and discharge scores

^{†.05-.10,}

^{*} P < .05,

^{**}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	4.28	4.02
The 2-1-1 staff was courteous	4.38	4.22
The 2-1-1 staff was knowledgeable	4.33	4.22
My phone call was quickly transferred to the EMPS provider	4.25	4.13
Sub-Total Mean: 2-1-1	4.31	4.15
Mobile Crisis Items		
Mobile Crisis responded to the crisis in a timely manner	4.37	4.12
The Mobile Crisis staff was respectful	4.43	4.28
The Mobile Crisis staff was knowledgeable	4.42	4.25
The Mobile Crisis staff spoke to me in a way that I understood	4.40	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)	4.37	Х
The services or resources my child and/or family received were right for us	4.37	Х
The child/family I referred to Mobile Crisis was connected with appropriate services or resources upon discharge from Mobile Crisis	х	4.13
Overall, I am very satisfied with the way that Mobile Crisis responded to the crisis	4.40	4.22
Sub-Total Mean: Mobile Crisis	4.39	4.20
Overall Mean Score	4.36	4.18

^{*} 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:

- The parent raved about her experience, "If it wasn't for them I don't know what we would do." She reports they are still doing bridge services."
- "They were great...They came right out, made a safety plan...."
- Mother stated the 45 minute wait for [Mobile Crisis] to arrive is too long and often the youth is de-escalated when they arrive. Mother also wanted youth removed from the home, understands the limitations, but was disappointed that the youth couldn't be removed.
- "I am really surprised, after they came he changed."
- The clinician went "above and beyond" during the assessment and to get them services.
- Parent feels the process of getting intake information and waiting for the clinician to arrive is too long. She would also like more follow up after the assessment instead of a "good luck see you later" feeling.
- The prompts are difficult to navigate in a crisis situation and caller would prefer that she did not have to answer intake questions prior to transfer to the 2-1-1 clinician because it takes times she feels is not beneficial.

Referrer Comments:

- "I find them very responsive."
- "Overall our relationship with [Mobile Crisis] is continuing to grow." "We have a great relationship with Samantha and her team."
- The CIT officer in Windsor had nothing but praise for youth and adult MCI in his area. He reported the officers are legitimately starting to see MCI as an asset and seeking them out more and more.
- "The person who came out was very good. She was under control while we were very panicky about the situation."
- Caller called the clinician "a Godsend."
- Caller reports she had a 5-10 minute wait to talk to the clinician after speaking with 2-1-1 which she felt was too long.
- Caller reports it typically takes 45 minutes to 1 hour for [Mobile Crisis] to arrive and once they have gotten there the youth has often de-escalated. She reports at times it is helpful and at times they no longer have a need by the time Mobile Crisis arrives.
- Caller reports "it took a little while" in regard to her call to 2-1-1 and reports it took "over an hour" in regard to response by MCI.

Section XI: Training Attendance

Table 7. Trainings Completed for All Active* Staff

	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 (166)*	70%	69%	60%	49%	73%	76%	67%	67%	67%	36%	46%	45%	14%	
CHR:MiddHosp (10)*	90%	80%	40%	90%	100%	90%	70%	100%	80%	100%	90%	70%	30%	33%
CHR (13)*	69%	77%	77%	100%	92%	92%	77%	62%	77%	85%	46%	15%	15%	18%
UCFS:NE (7)*	43%	43%	29%	100%	29%	43%	71%	29%	43%	71%	57%	71%	14%	14%
UCFS:SE (14)*	57%	50%	43%	71%	57%	64%	50%	50%	50%	43%	86%	43%	7%	11%
Wheeler:Htfd (17)*,^	53%	65%	59%	12%	76%	76%	53%	59%	65%	18%	12%	47%	0%	0%
Wheeler:Meridn (7)*	57%	86%	43%	57%	71%	57%	43%	57%	57%	29%	14%	71%	14%	100%
Wheeler:NBrit (20)*	65%	70%	45%	40%	60%	70%	60%	65%	70%	0%	25%	50%	0%	0%
CliffBeers (26)*	88%	100%	88%	62%	92%	96%	88%	88%	96%	58%	62%	73%	42%	58%
CFGC:South (7)*	71%	43%	71%	43%	57%	57%	86%	43%	57%	0%	71%	43%	0%	0%
CFGC:Nrwlk (6)*	83%	50%	50%	50%	100%	100%	83%	83%	50%	17%	50%	0%	0%	0%
CFGC:EMPS (14)*,^	86%	57%	79%	43%	86%	93%	86%	86%	57%	36%	43%	36%	21%	22%
Well:Dnby (11)*,^	36%	27%	36%	0%	27%	27%	27%	36%	27%	0%	18%	9%	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 (99)	79%	73%	71%	61%	77%	83%	78%	73%	73%	44%	58%	48%	19%	

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

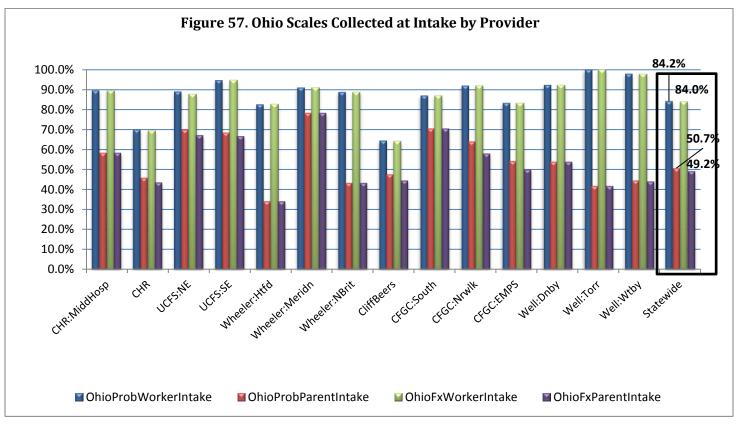
ASD = Autism Spectrum Disorder

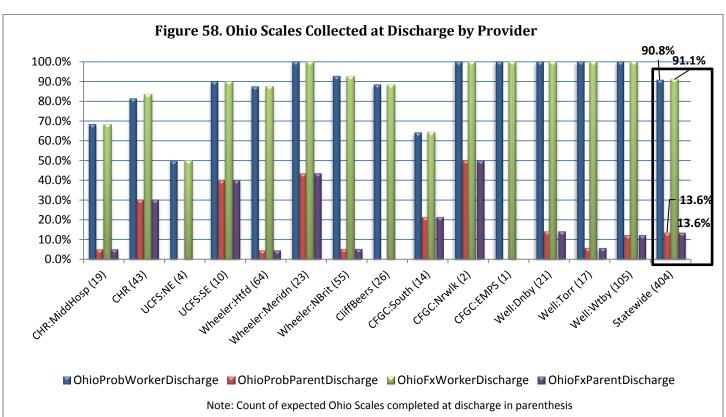
CSSRS=Columbia Suicide Severity Rating Scale
Trauma = Traumatic Stress and Trauma Informed Care
Violence = Violence Assessment and Prevention
Str Based = Strengths-Based Crisis Planning
CRC = 21st Century Culturally Responsive Mental Health Care
Emerg. Certificate= Emergency Certificate

^{*} Includes all active full-time, part-time and per diem staff as of Sept. 30, 2018.

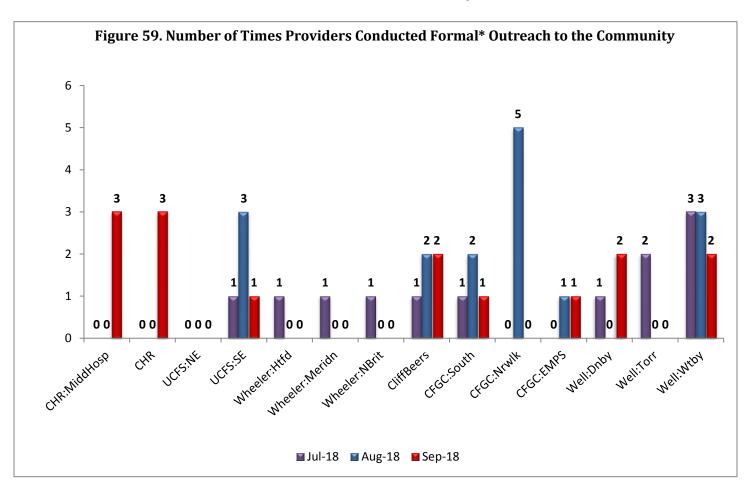
[^]Includes staff who did not have an assigned site reported and/or support multiple sites.

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.

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