



MOBILE CRISIS
INTERVENTION SERVICES

EMPS Mobile Crisis is a program funded by the State of Connecticut
in partnership with the United Way of Connecticut 2-1-1.



Mobile Crisis Intervention Services

Performance Improvement Center (PIC)

Monthly Report: March 2020

Updated 4/21/20

Table of Contents

Executive Summary	3
Section I: Mobile Crisis Statewide/Service Area Dashboard.....	4
Figure 1. Total Call Volume by Call Type	4
Figure 2. Mobile Crisis Episodes by Service Area	4
Figure 3. Number Served Per 1,000 Children	4
Figure 4. Number Served Per 1,000 Children in Poverty	4
Figure 5. Mobile Response by Service Area	4
Figure 6. Total Mobile Episodes with a Response Time Under 45 Minutes	4
Section II: Mobile Crisis Response	5
Figure 7. Statewide 211 Disposition Frequency.....	5
Figure 8. Mobile Crisis Episodes by Provider	5
Figure 9. Actual Initial Mobile Crisis Response by Provider.....	5
Figure 10. Mobile Response by Provider	5
Section III: Response Time	6
Figure 11. Total Mobile Episodes with a Response Time Under 45 Minutes	6
Figure 12. Total Mobile Episodes with a Response Time Under 45 Minutes by Provider	6
Figure 13. Median Mobile Response Time in Minutes	6
Figure 14. Median Mobile Response Time by Provider in Minutes	6
Section IV: Emergency Department Referrals	7
Figure 15. Emergency Department Referrals.....	7
Figure 16. Emergency Department Referrals by Provider (% of Total Mobile Crisis Episodes).....	7
Section V: Length of Stay (LOS)	8
Table 1. LOS for Discharged Episodes with a Crisis Response of Plus Stabilization Follow-up.....	8

This report was prepared by the Mobile Crisis Intervention Services Performance Improvement Center (PIC):

Kayla Theriault, Data Analyst; Aleece Kelly, MPP, Senior Data Analyst; Yecenia Casiano, MS, Project Coordinator; Kellie Randall, Ph.D., Director; Carrie Shaw, Administrative Assistant; Heather Clinger, MPH, CPS, Program Manager (Wheeler Clinic); Sarah Camerota, LICSW, 2-1-1 EMPS Program Manager (United Way of CT-2-1-1); Jeffrey Vanderploeg, Ph.D., CEO

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



Executive Summary

Additional data and appendices are available online <http://www.chdi.org/publications/> or contact Jeffrey Vanderploeg, PhD, jvanderploeg@uchc.edu for more information.

Note: Due to COVID-19, schools were closed and stay-at-home orders were put in place for the non-essential workforce in Connecticut in mid-March. Mobile Crisis is still operational, and as part of the essential workforce providers are working with families to respond to calls via telephone, video conferencing, and in-person responses with safety of the child, family, and clinicians as the top priority. Note that both video and in-person responses during this period may be reflected within the report as 'mobile' responses. Due largely to the closure of schools, there has been a significant decrease in both call and episode volume for Mobile Crisis. This decrease as well as other factors associated with COVID-19, including challenges with data collection, should be noted when reviewing this report.

Call and Episode Volume: In March 2020, 2-1-1 and Mobile Crisis received 1,388 calls including 1,005 calls (72.4%) handled by Mobile Crisis providers and 383 calls (27.6%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). There was one crisis response follow-up call. This month showed a 40.8% decrease in call volume from March 2019 (n=2,346).

Among the **1,004 episodes of care** this month, episode volume ranged from 110 episodes (Eastern) to 279 episodes (Hartford). The statewide average service reach per 1,000 children this month was 1.2, with service area rates ranging from 0.7 (Southwestern) to 1.8 (Hartford) relative to their specific child populations. Additionally, the number of episodes generated relative to the number of children in poverty in each service area yielded a statewide average poverty service reach rate of 1.9 per 1,000 children in poverty, with service area rates ranging from 0.8 (Southwestern) to 3.0 (Hartford).

Mobility: Statewide mobility was **89.1% this month**; lower than the rate in March 2019 (92.5%). Two of the six service areas were at or above the 90% benchmark this month, with performance ranging from 85.1% (New Haven) to 95.5% (Southwestern). Mobility for individual providers ranged from 75.0% (Wellmore: Torrington) to 100.0% (Wheeler: Meriden). Eight of the fourteen individual providers had mobility rates above the 90% benchmark.

Response Time: Statewide, this month **83.4% of mobile episodes received a face-to-face response in 45 minutes or less**, which is lower than the rate in March 2019 (86.5%). Four of the six service areas were at or above the benchmark of 80% of mobile responses provided in 45 minutes or less, with performance ranging from 66.7% (Western) to 98.3% (Southwestern). Nine of the fourteen sites met the 80% benchmark. The statewide median mobile response time was 30.0 minutes.

Length of Stay (LOS): Statewide, among discharged episodes, **5.2% of the 367 plus stabilization follow-up episodes exceeded 45 days**. The statewide median LOS for episodes discharged this month with a crisis response of *plus stabilization follow-up* was 13.0 days. The regional median LOS ranged from 9.0 days (Hartford) to 39.0 days (New Haven).

Section I: Mobile Crisis Statewide/Service Area Dashboard

Figure 1. Total Call Volume by Call Type

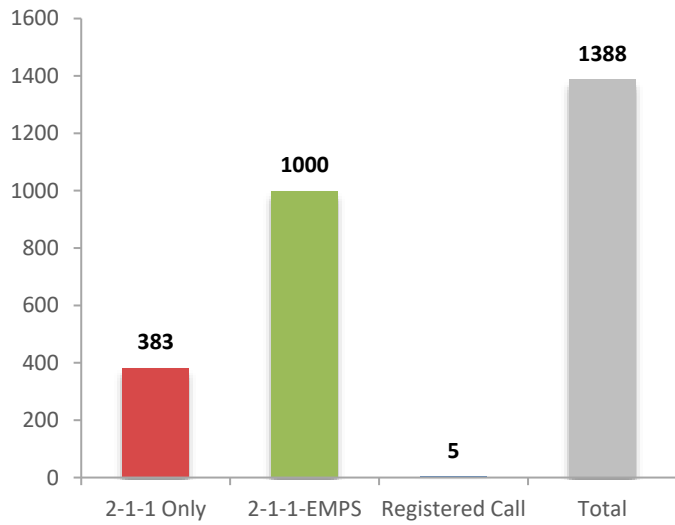


Figure 2. Mobile Crisis Episodes by Service Area

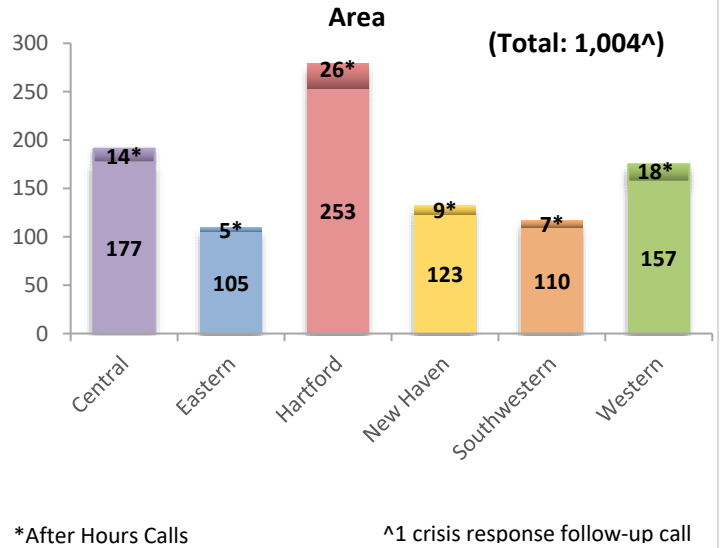


Figure 3. Number Served Per 1,000 Children

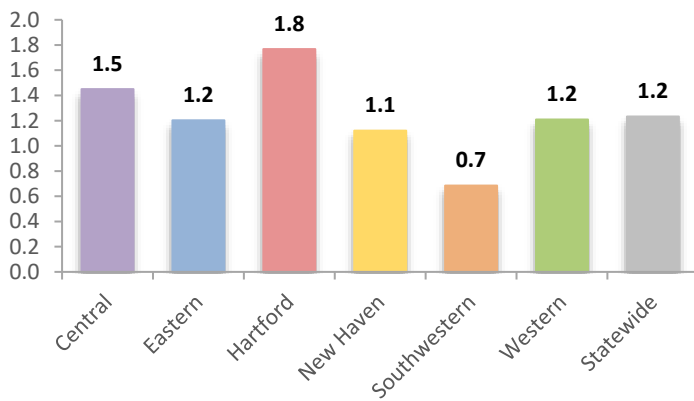


Figure 4. Number Served per 1,000 Children in Poverty

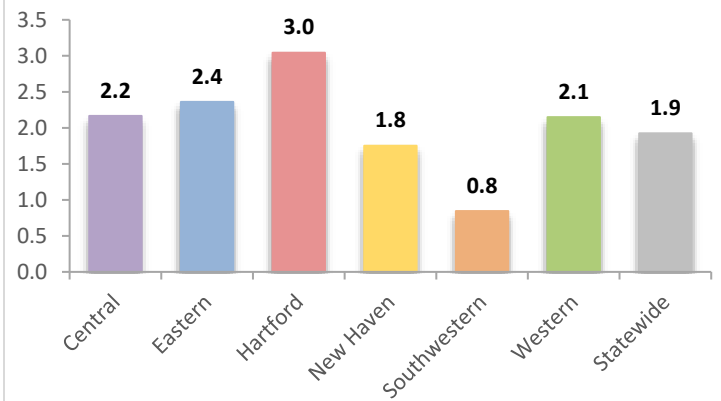


Figure 5. Mobile Response by Service Area

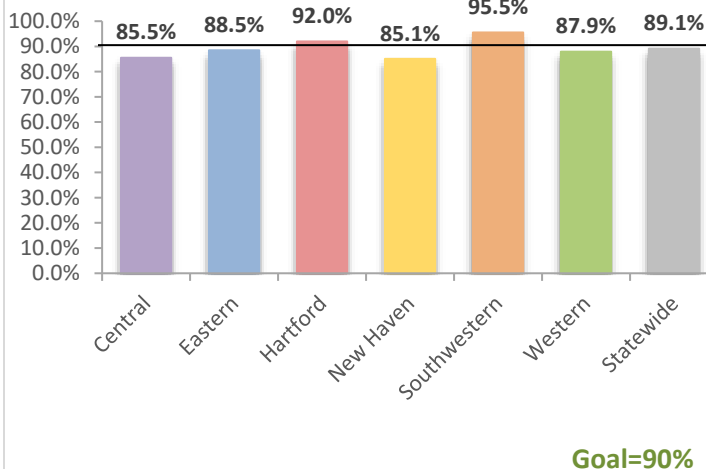
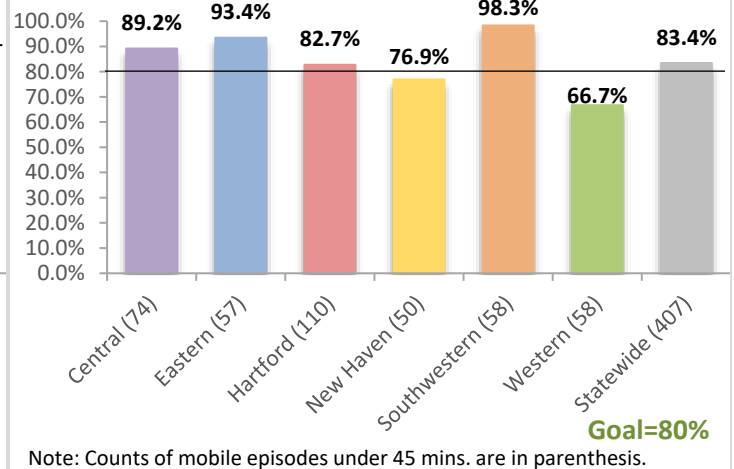


Figure 6. Total Mobile Episodes with a Response Time Under 45 Minutes



Section II: Mobile Crisis Response

Figure 7. Statewide 2-1-1 Call Disposition

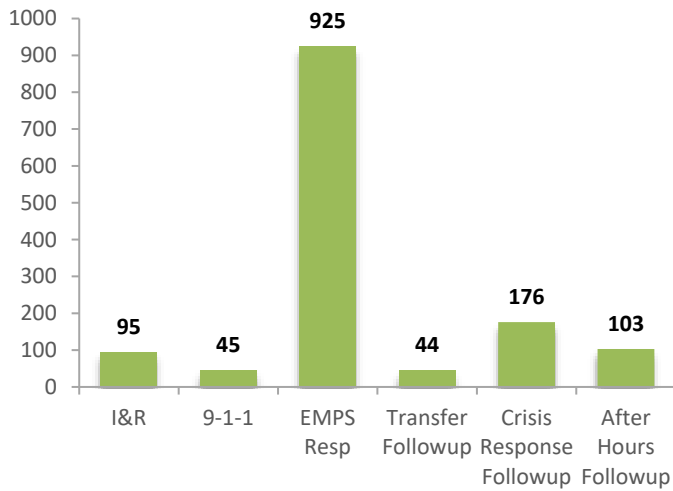


Figure 8. Mobile Crisis Episodes by Provider

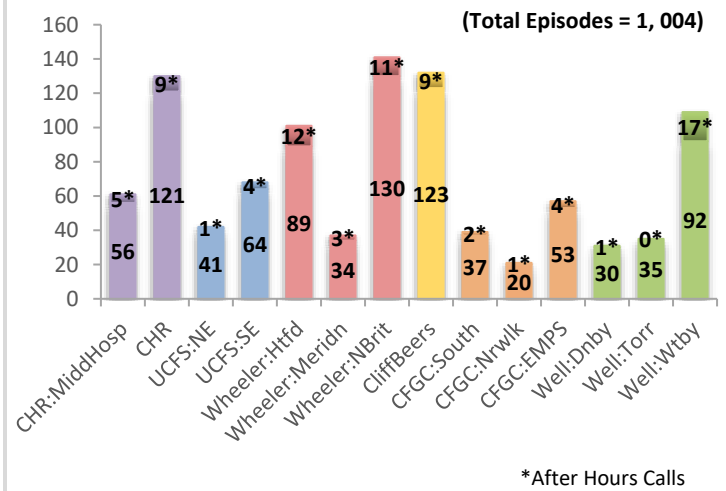


Figure 9. Actual Initial Mobile Crisis Response by Provider

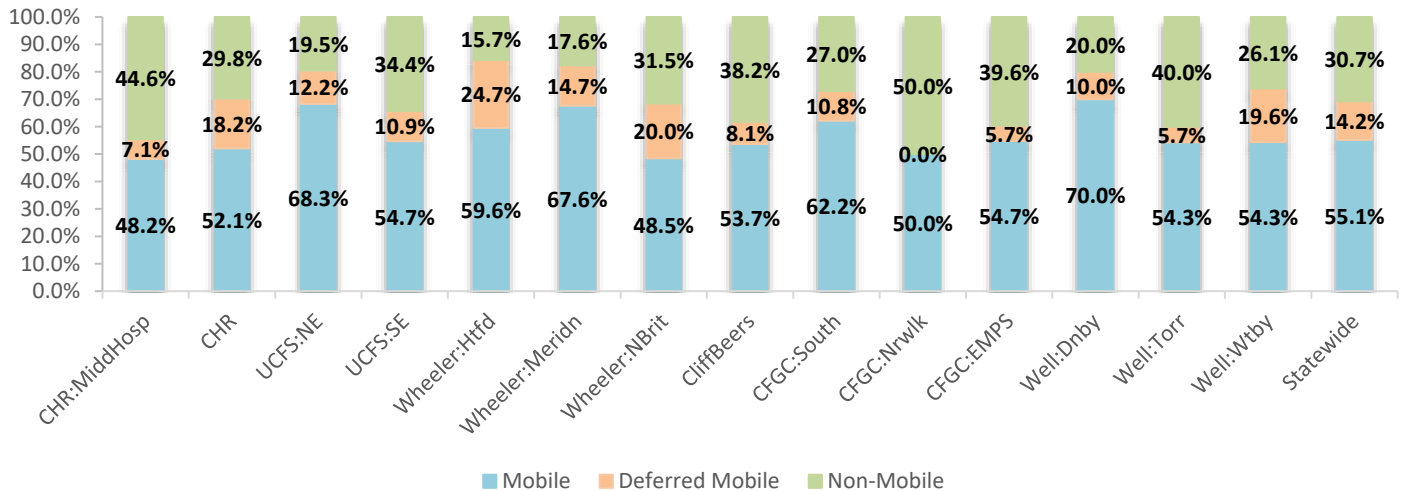
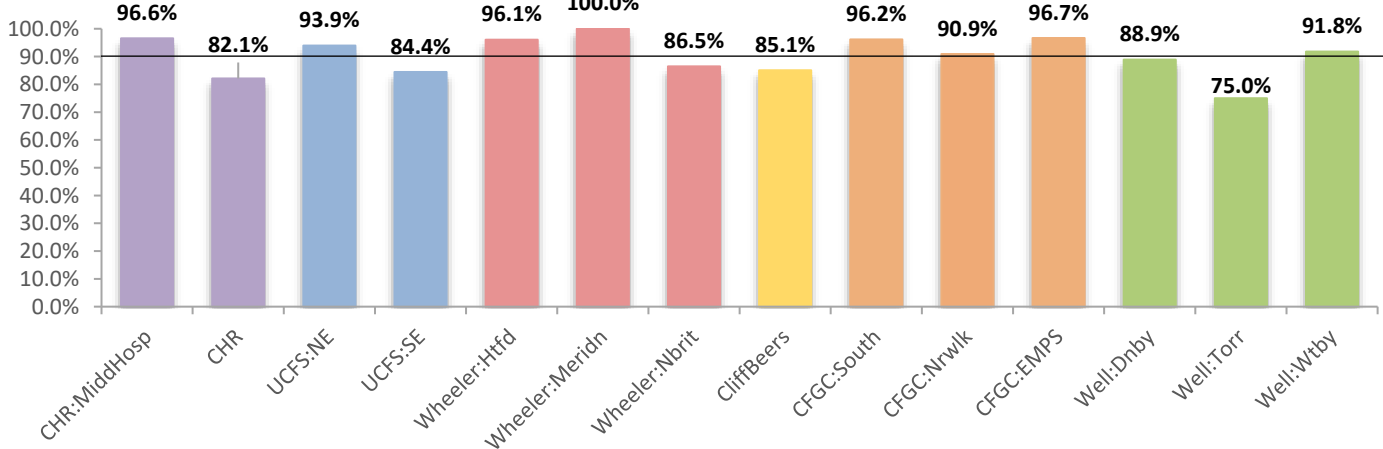


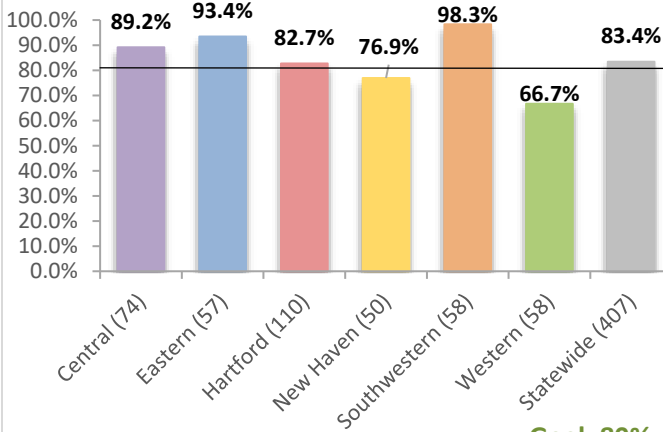
Figure 10. Mobile Response by Provider



Goal=90%

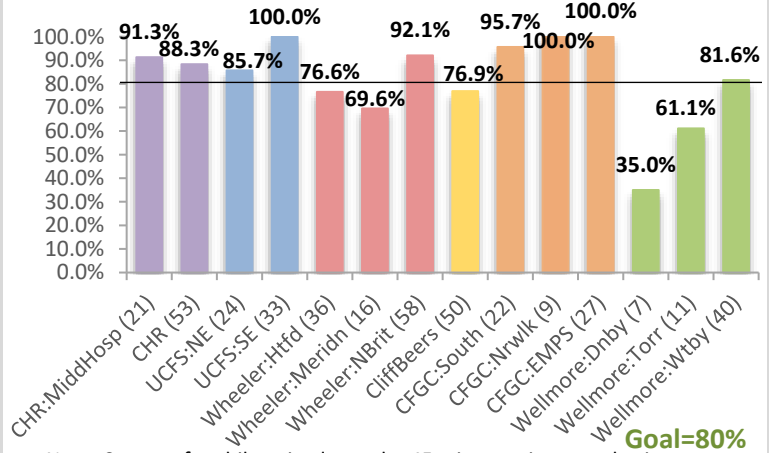
Section III: Response Time

Figure 11. Total Mobile Episodes with a Response Time Under 45 Minutes



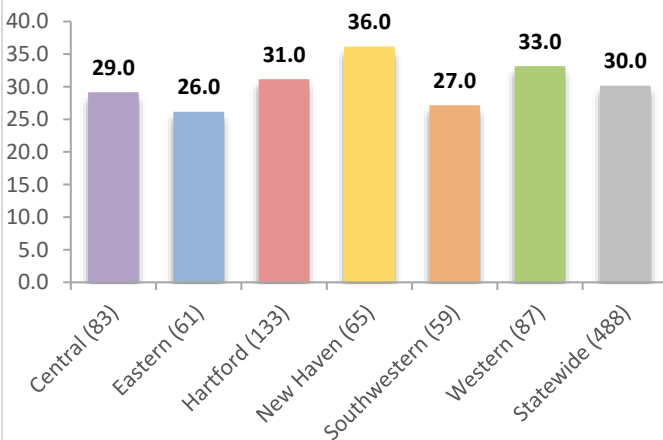
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

Figure 12. Total Mobile Episodes with a Response Time Under 45 Minutes by Provider



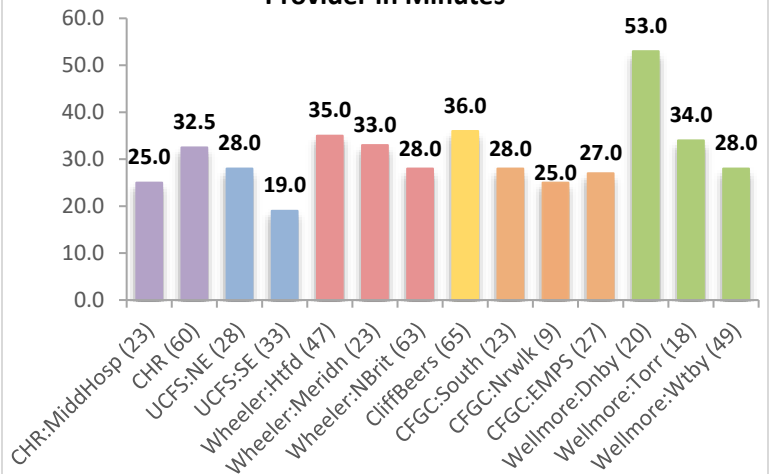
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

Figure 13. Median Mobile Response Time in Minutes



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

Figure 14. Median Mobile Response Time by Provider in Minutes



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

Section IV: Emergency Department Referrals

Figure 15. Emergency Department Referrals (% of Total Mobile Crisis Episodes)

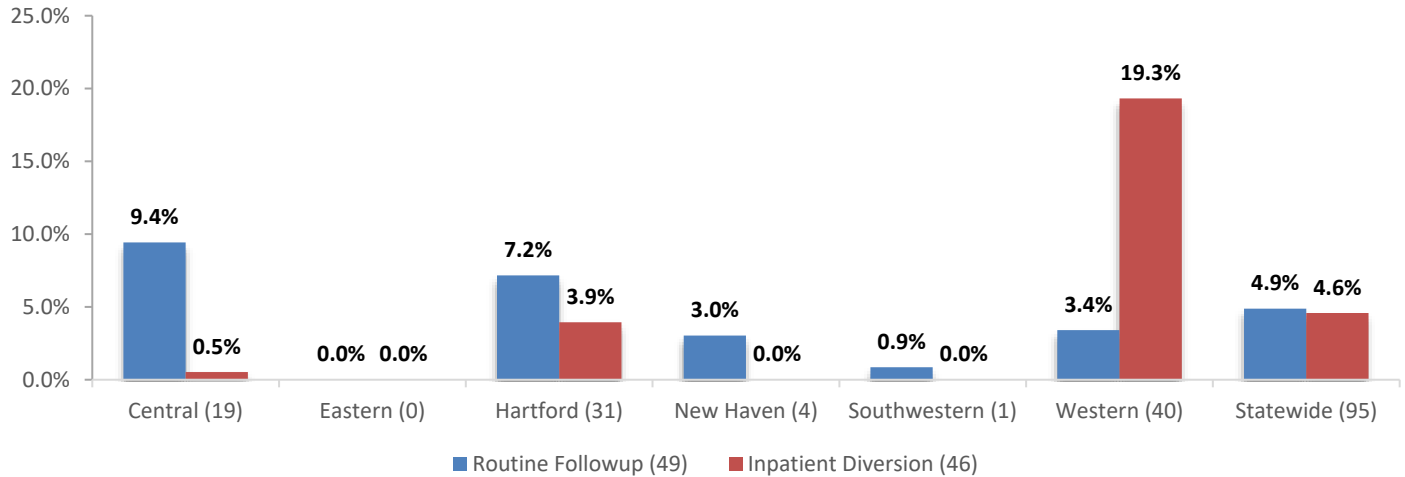
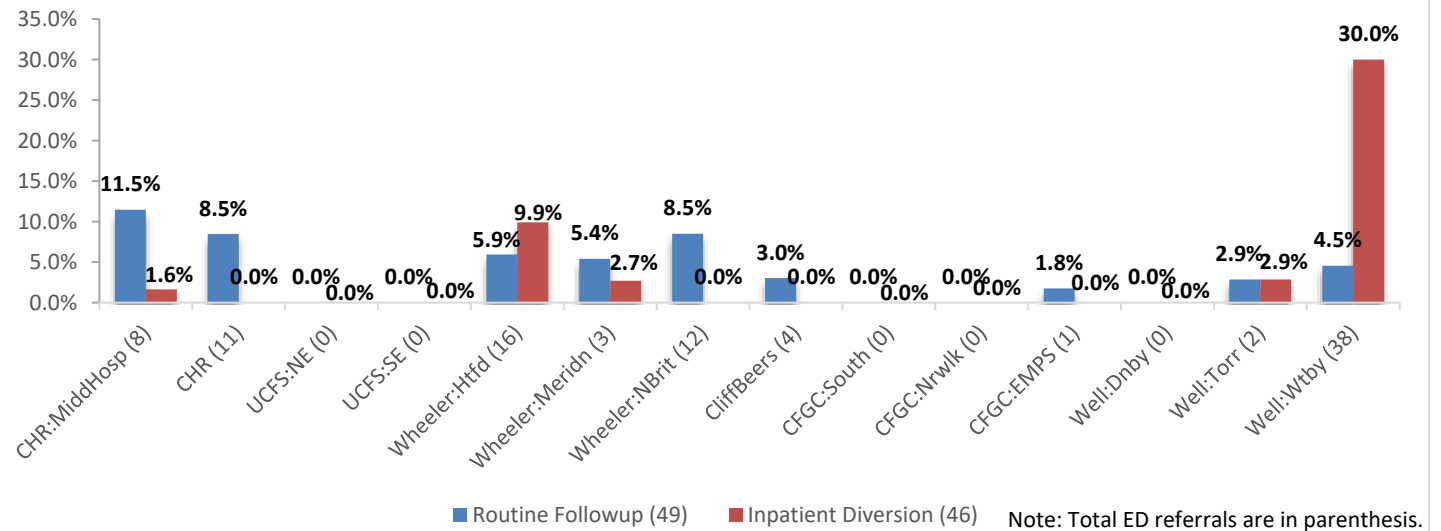


Figure 16. Emergency Department Referrals by Provider (% of Total Mobile Crisis Episodes)



Section V: Length of Stay (LOS)

Table 1. LOS for Discharged Episodes with a Crisis Response Plus Stabilization Follow-up

	Discharged Episodes with a Crisis Response of Plus Stabilization Follow-up			
	Number of Episodes	Mean LOS (in days)	Median LOS (in days)	Percent Exceeding 45 Days
STATEWIDE	367	17.2	13.0	5.2% (n = 19)
Central	35	14.8	13.0	0.0% (n = 0)
Eastern	12	18.1	17.5	0.0% (n = 0)
Hartford	149	11.4	9.0	0.0% (n = 0)
New Haven	9	50.4	39.0	44.4% (n = 4)
Southwestern	32	23.0	23.0	0.0% (n = 0)
Western	130	17.2	15.0	11.5% (n = 15)