MOBILE CRISIS
INTERVENTION SERVICES

Mobile Crisis Intervention Services 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

September 2021

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This report was prepared by the Mobile Crisis Intervention Services Performance Improvement Center (PIC):
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The Mobile Crisis Intervention Services Performance Improvement Center is housed at the Child Health and Development Institute of Connecticut, Inc.

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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 beginning in mid-March of 2020. While many schools and businesses have now re-opened (with restrictions), the effects of COVID-19 are still being felt significantly. 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. Possible difficulties related to the effects of COVID-19 in both service provision and data collection should be taken into consideration when reviewing this report.

Call and Episode Volume: In September 2021, 2-1-1 and Mobile Crisis received 1,600 calls including 1,192 calls (74.5%) handled by Mobile Crisis providers and 408 calls (25.5%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). There was one call missing disposition information. This month showed a 64.6% increase in call volume from September 2020 (n=972). Call volume remains only 9.4% lower than the same month in 2019 (n=1,766), prior to the start of the pandemic.

Among the **1,191 episodes of care** this month, episode volume ranged from 148 episodes (Southwestern) to 297 episodes (Hartford). The statewide average service reach per 1,000 children this month was 1.6, with service area rates ranging from 0.9 (Southwestern) to 2.1 (Eastern, 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 3.1 per 1,000 children in poverty, with service area rates ranging from 2.0 (Southwestern) to 5.0 (Eastern).

Mobility: Statewide mobility was 95.3% this month; the same as the rate in September 2020 (95.3%). All six service areas were at or above the 90% benchmark this month, with performance ranging from 92.5% (Central) to 97.7% (Western). Mobility for individual providers ranged from 92.4% (CHR) to 100.0% (Wheeler: Meriden; CFGC: EMPS (Bridgeport)). All fourteen individual providers had mobility rates above the 90% benchmark. Since the beginning of the COVID-19 pandemic, both video telehealth and in-person responses are reflected within the report as "mobile" responses. Beginning in FY2022, the number of video telehealth episodes can be found in Figure 9.

NOTE: Beginning with FY21 Q2 reporting, there was a change in calculation of mobility. If a referral made by a caller other than self/family (e.g. schools, EDs, etc.) is designated by 2-1-1 as mobile or deferred mobile, but is later determined to be non-mobile due to the family declining or not being available after multiple attempts to contact them, the episode will no longer be included in the mobility rate, as these situations are out of the providers' control. Any mobility rates from prior quarters referenced in this report have been recalculated to allow for accurate comparison.

Response Time: Statewide, this month **82.0% of mobile episodes received a face-to-face response in 45 minutes or less**, which is higher than the rate in September 2020 (79.7%). While video telehealth responses are counted as "mobile" responses, they are excluded from the response time calculations in this report. Three 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 72.1% (Eastern) to 95.6% (Southwestern). Seven of the fourteen sites met the 80% benchmark. The statewide median mobile response time was 31.0 minutes.

Length of Stay (LOS): Statewide, among discharged episodes, **9 of the 180 *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 15.0 days. The regional median LOS ranged from 13.0 days (Hartford, Western) to 27.5 days (New Haven). Note: these calculations only include episodes that began during FY2022.

Section I: Mobile Crisis Statewide/Service Area Dashboard

Figure 1. Total Call Volume by Call Type

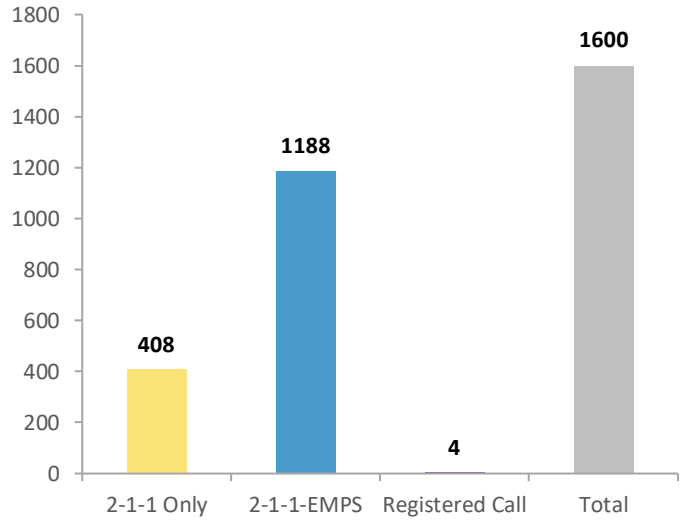
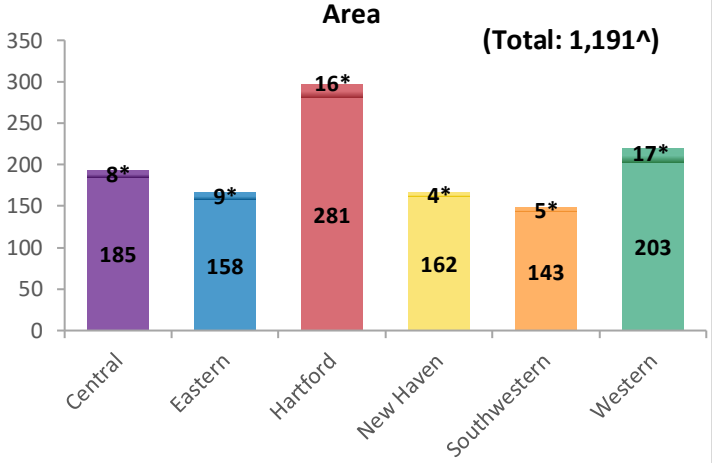


Figure 2. Mobile Crisis Episodes by Service Area



*After Hours Calls that resulted in episodes
^1 call missing disposition information

Figure 3. Number Served Per 1,000 Children

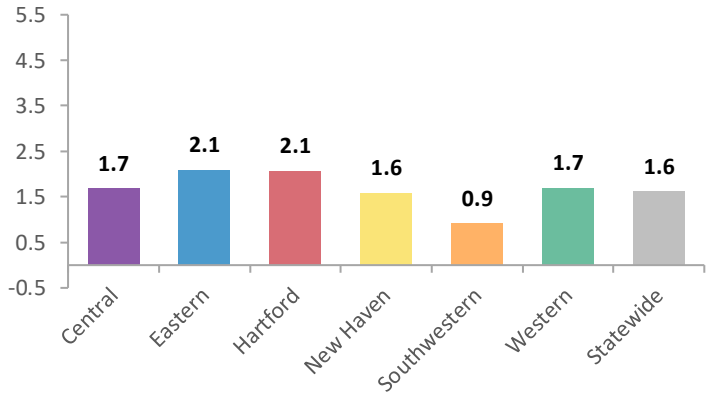


Figure 4. Number Served per 1,000 Children in Poverty

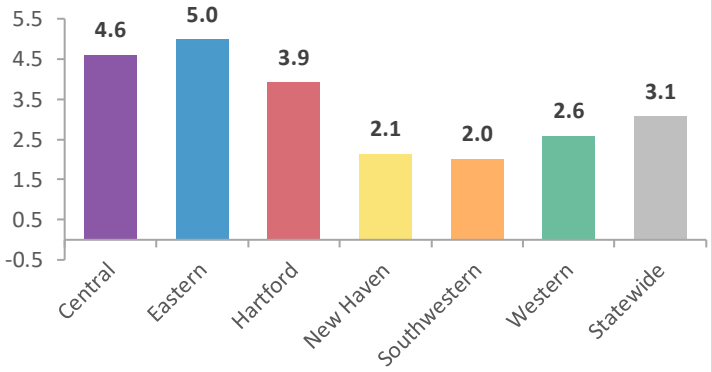
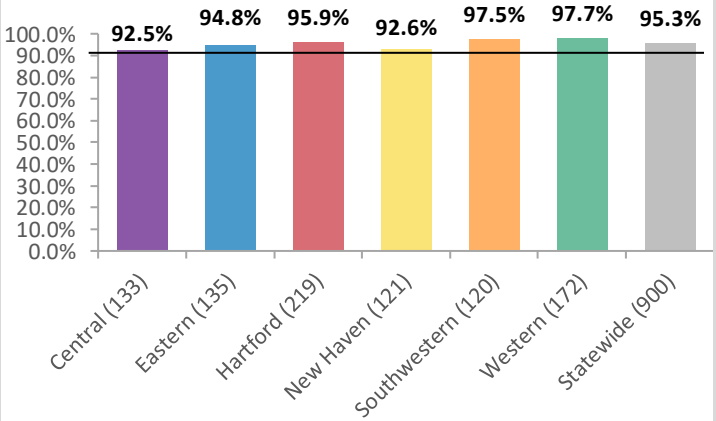


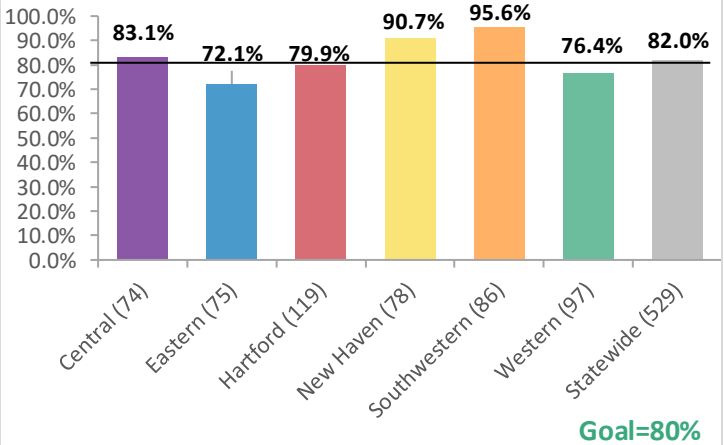
Figure 5. Mobile Response* by Service Area



*Mobility calculation updated – see exec. summary
Note: Counts of 211-recommended mobile episodes are in parenthesis.

Goal=90%

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



Goal=80%

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

Section II: Mobile Crisis Response

Figure 7. Statewide 2-1-1 Call Disposition

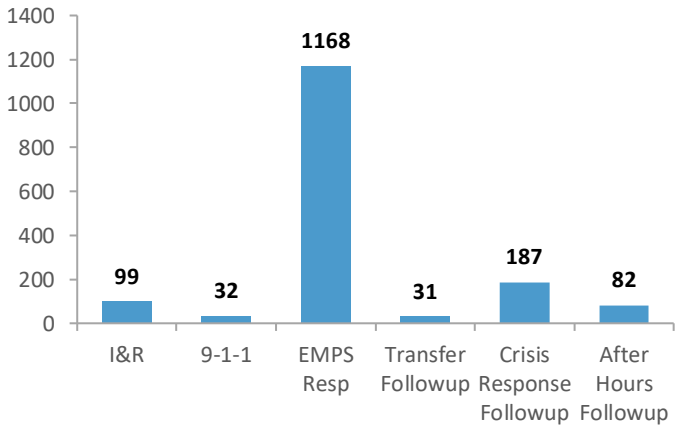
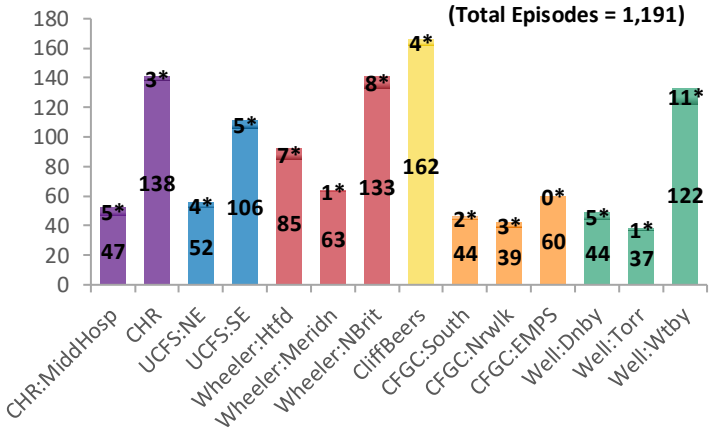
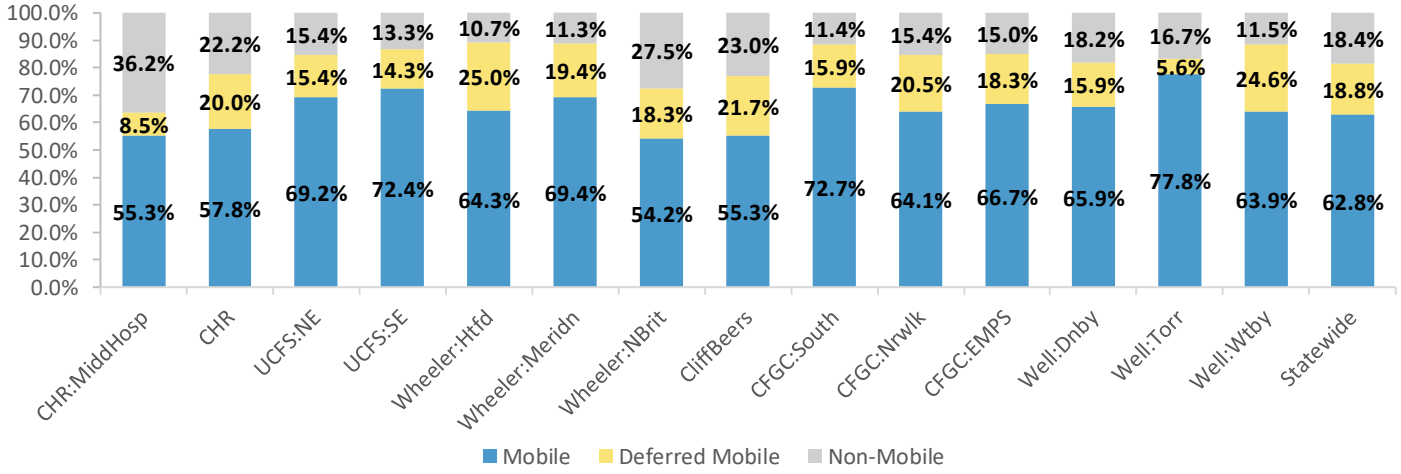


Figure 8. Mobile Crisis Episodes by Provider



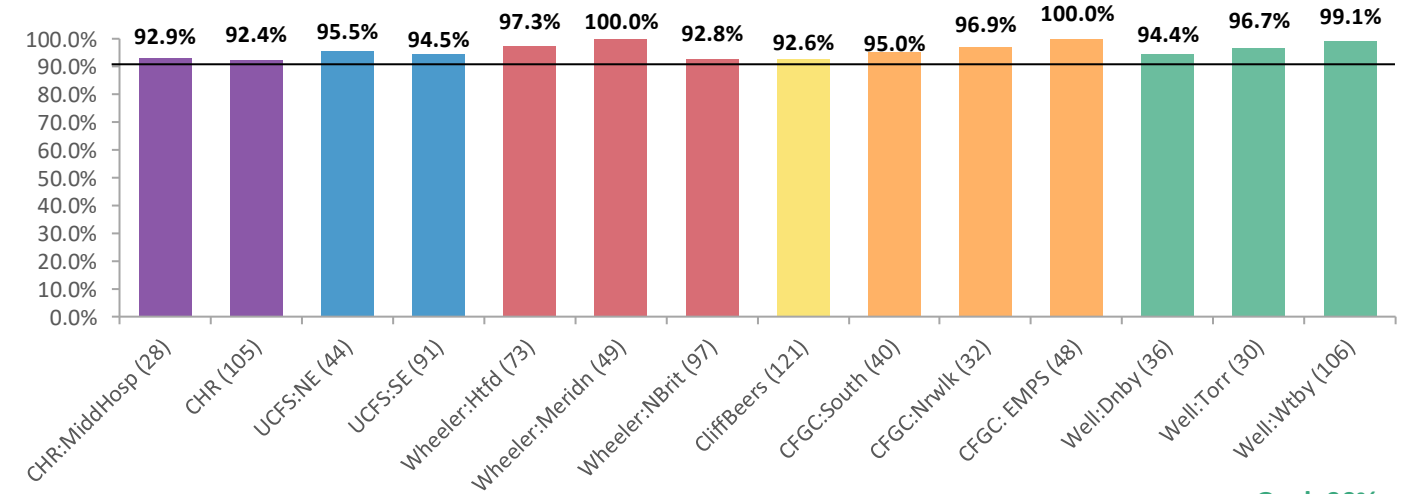
*After Hours Calls that resulted in episodes

Figure 9. Actual Initial Mobile Crisis Response* by Provider



*Statewide, there were 10 mobile or deferred mobile episodes that were performed via video teleheatlh.

Figure 10. Mobile Response* by Provider



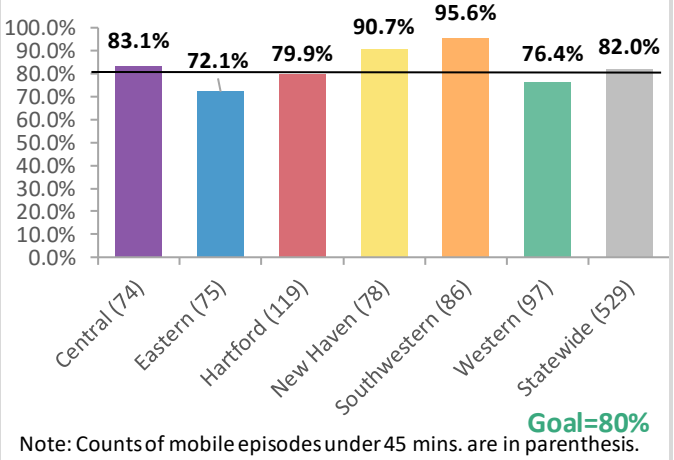
Note: Counts of 211-recommended mobile episodes are in parenthesis.

*Mobility calculation updated – see exec. summary

Goal=90%

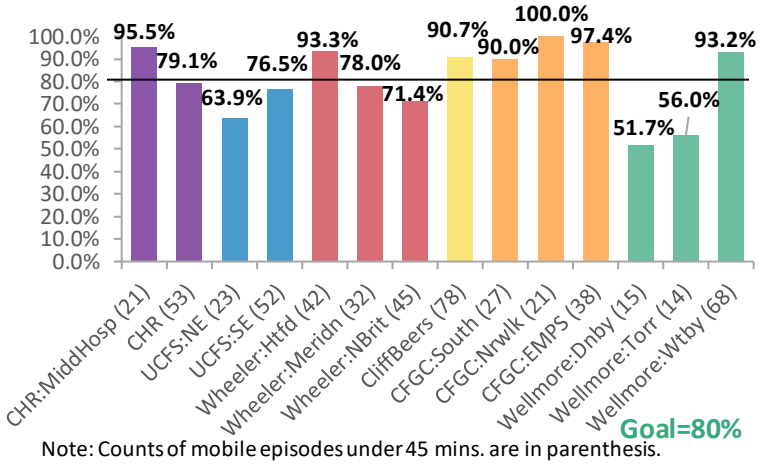
Section III: Response Time

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



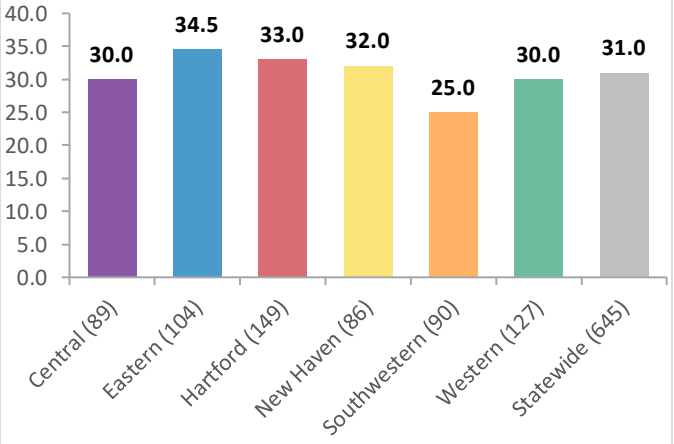
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

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



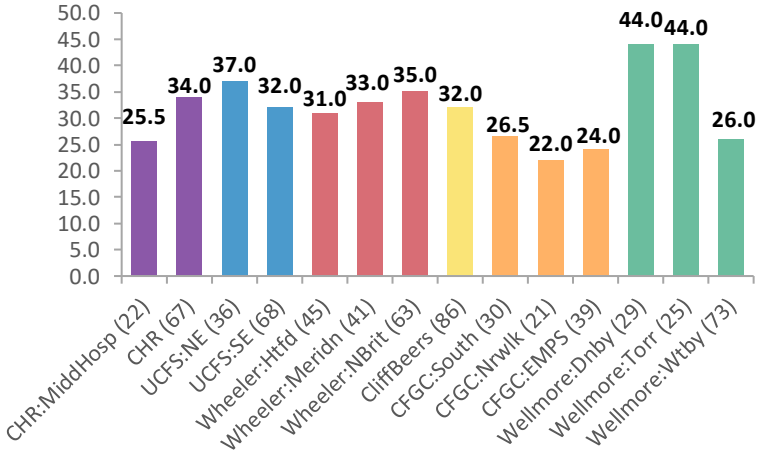
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

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)

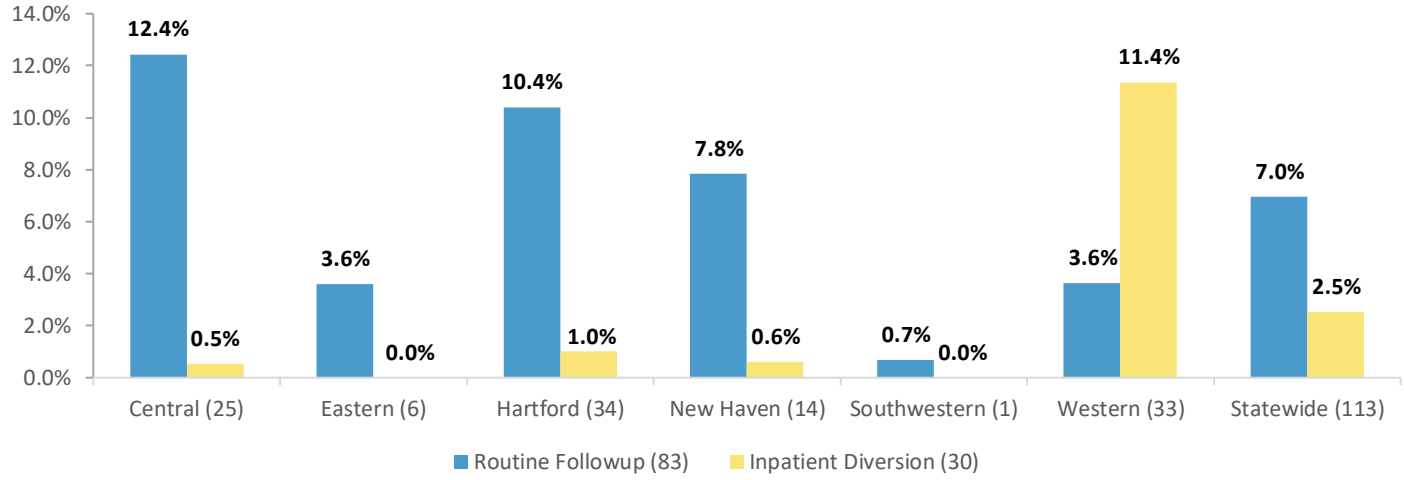
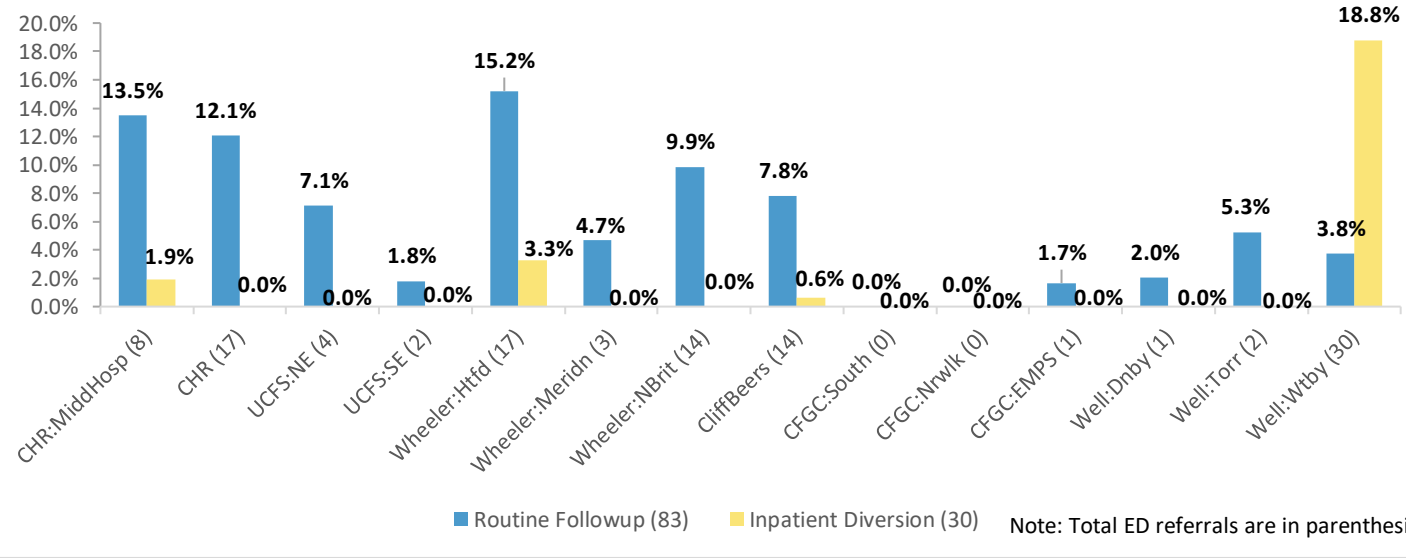


Figure 16. Emergency Department Referrals by Provider (% of Total Mobile Crisis Episodes)



Note: Total ED referrals are in parenthesis.

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	**180**	**18.6**	**15.0**	**5.0% (n = 9)**
Central	**59**	**20.8**	**17.0**	**5.1% (n = 3)**
Eastern	**5**	**23.6**	**20.0**	**0.0% (n = 0)**
Hartford	**63**	**16.9**	**13.0**	**6.3% (n = 4)**
New Haven	**6**	**29.7**	**27.5**	**0.0% (n = 2)**
Southwestern	**11**	**19.6**	**16.0**	**0.0% (n = 0)**
Western	**36**	**15.0**	**13.0**	**0.0% (n = 0)**

*Only episodes that had both a start and a discharge date within FY2022 are included in this chart.