

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

November 2021

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



Executive Summary

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.

<u>Call and Episode Volume</u>: In November 2021, 2-1-1 and Mobile Crisis received 1,806 calls including 1,320 calls (72.5%) handled by Mobile Crisis providers and 486 calls (27.5%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). This month showed a 56.1% increase in call volume from November 2020 (n=1,157). Call volume remains only 8.0% lower than the same month in 2019 (n=1,962), prior to the start of the pandemic.

Among the **1,320 episodes of care** this month, episode volume ranged from 181 episodes (Southwestern) to 315 episodes (Hartford). The statewide average service reach per 1,000 children this month was 1.8, with service area rates ranging from 1.1 (Southwestern) to 2.5 (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 3.4 per 1,000 children in poverty, with service area rates ranging from 1.8 (New Haven) to 5.6 (Central).

<u>Mobility:</u> Statewide mobility was 94.2% this month; slightly lower than the rate in November 2020 (96.6%). All six service areas were at or above the 90% benchmark this month, with performance ranging from 91.8% (New Haven) to 96.4% (Western). Mobility for individual providers ranged from 90.7% (UCFS: NE) to 100.0% (CHR: Middlesex; CFGC: Norwalk). All of the 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.

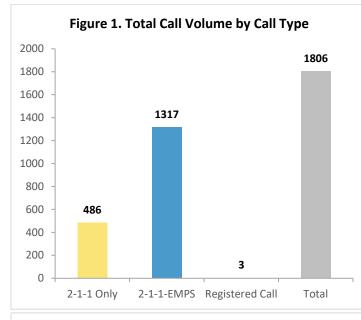
NOTE: Beginning with FY21 Q2 reporting, there was a change in calculation of mobility. If a referral made by a caller other than self/family (e.g. schools, EDs, etc.) is designated by 2-1-1 as mobile or deferred mobile, but is later determined to be non-mobile due to the family declining or not being 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 **83.2% of mobile episodes received a face-to-face response in 45 minutes or less**, which is slightly lower than the rate in October 2020 (84.8%). While video telehealth responses are counted as "mobile" responses, they are excluded from the response time calculations in this report. 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 76.1% (Hartford) to 98.9% (Southwestern). Seven of the fourteen sites met the 80% benchmark. The statewide median mobile response time was 30.0 minutes.

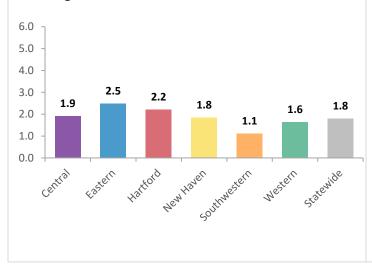
Length of Stay (LOS): Statewide, among discharged episodes, **10 of the 382** *plus stabilization follow-up* episodes exceeded **45 days**. The statewide median LOS for episodes discharged this month with a crisis response of *plus stabilization follow-up* was 16.0 days. The regional median LOS ranged from 14.0 days (Western) to 32.0 days (Southwestern). Note: these calculations only include episodes that began during FY2022.

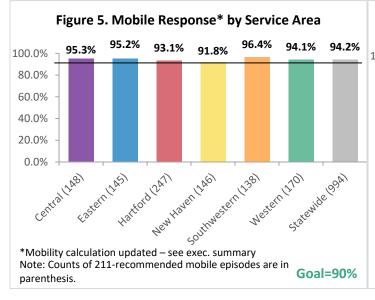
Additional data and appendices are available online <u>http://www.chdi.org/publications/</u> or contact Kayla Theriault, MPH, ktheriault@uchc.edu for more information.

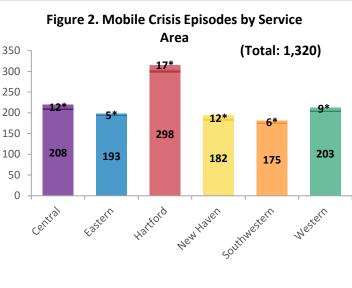
Section I: Mobile Crisis Statewide/Service Area Dashboard



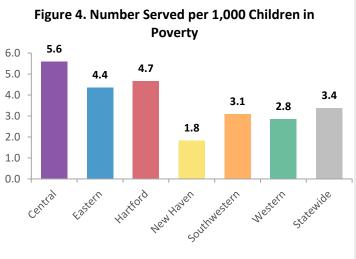


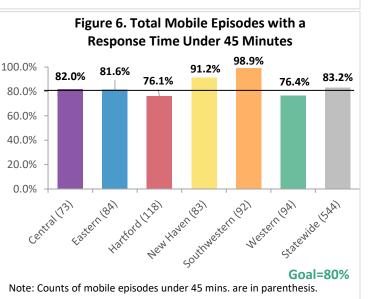


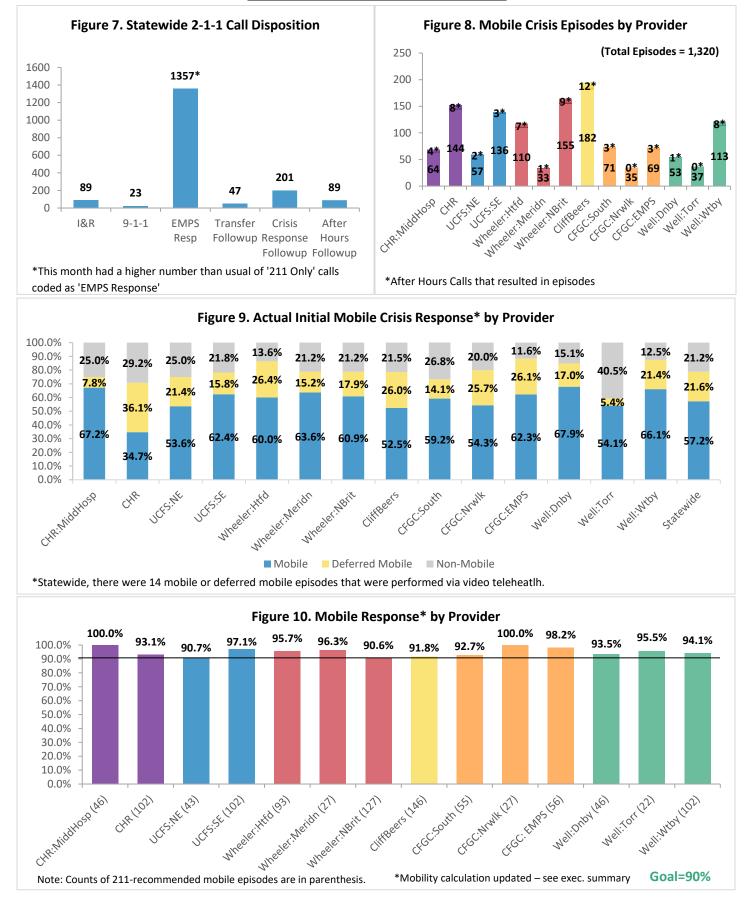




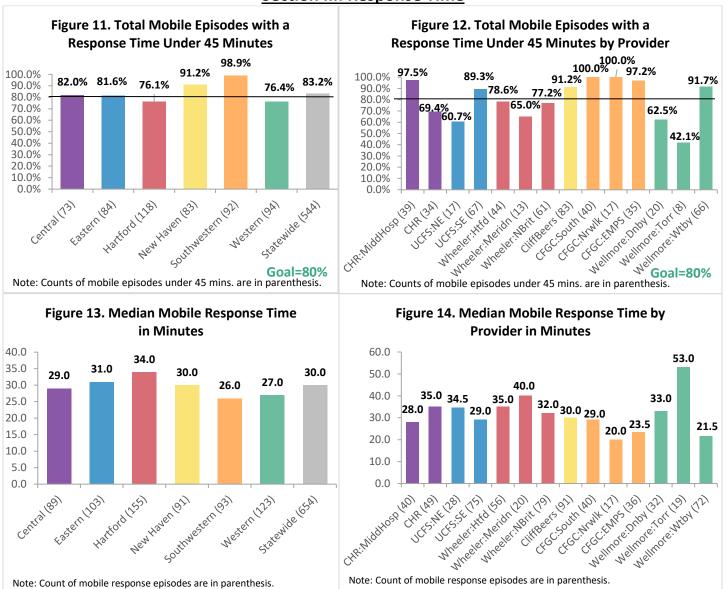
*After Hours Calls that resulted in episodes



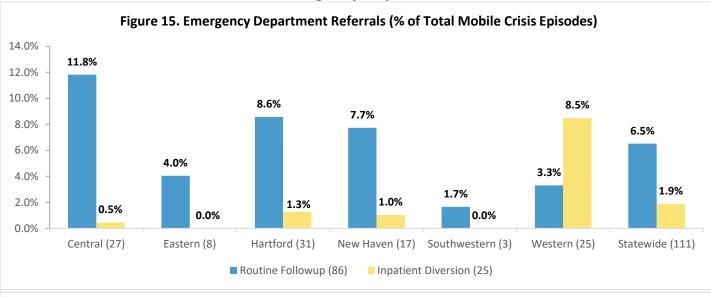




Section II: Mobile Crisis Response

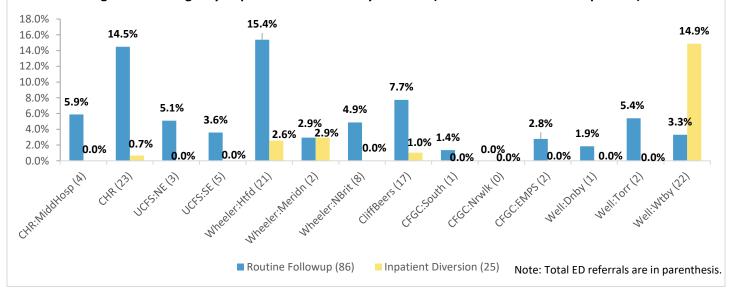


Section III: Response Time



Section IV: Emergency Department Referrals

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



Section V: Length of Stay (LOS)

	Discharged Episodes with a Crisis Response of Plus Stabilization Follow-up				
	Number of	Mean LOS	Median LOS	Percent Exceeding	
	Episodes	(in days)	(in days)	45 Days	
STATEWIDE	382	20.0	16.0	2.6% (n = 10)	
Central	113	23.2	19.0	8.8% (n = 10)	
Eastern	8	21.5	22.5	0.0% (n = 0)	
Hartford	126	19.4	17.0	1.0% (n = 0)	
New Haven	5	22.0	22.0	0.0% (n = 0)	
Southwestern	15	27.5	32.0	0.0% (n = 0)	
Western	115	16.2	14.0	0.0% (n = 0)	

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

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