



Mobile Crisis Intervention Services is a program funded by the State of Connecticut in partnership with the United Way of Connecticut 2-1-1 and the Child Health and Development Institute (CHDI).



MOBILE CRISIS INTERVENTION SERVICES

Performance Improvement Center (PIC)

MONTHLY REPORT

February 2023

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The Mobile Crisis Intervention Services Performance Improvement Center is housed at the
Child Health and Development Institute

Executive Summary

Note: As of January 2023, Mobile Crisis providers are available for a mobile response 24 hours a day, 7 days of the week. Prior to January 2023, a mobile response was only available Monday – Friday 6:00 AM to 10:00 PM and from 1:00 PM to 10:00 PM on weekends. At this time, the main content of this report only reflects calls that took place during the previous mobile hours. Data specific to the new overnight hours is reported in the appendix at the end of this report.

Call and Episode Volume: In February 2023, 2-1-1 and Mobile Crisis received 1,585 calls including 1,210 calls (76.3%) handled by Mobile Crisis providers and 375 calls (23.7%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1. This month showed a 3.5% decrease in call volume from February 2022 (n=1,643). Call volume remains 23.4% lower than the same month in 2020 (n=2,068), prior to the start of the pandemic.

Among the **1,210 episodes of care** this month, episode volume ranged from 167 episodes (New Haven) to 262 episodes (Hartford). The statewide average service reach per 1,000 children this month was 1.6, with service area rates ranging from 1.1 (Southwestern) to 2.1 (Eastern) 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 2.5 (Western) to 7.6 (Central).

Mobility: Statewide mobility was **95.1% this month**, higher than the rate in February 2022 (91.0%). All six service areas were above the 90% benchmark this month, with performance ranging from 91.8% (Hartford) to 97.6% (Central). Mobility for individual providers ranged from 86.1% (CFG: South) to 100% (CFG: Norwalk, Wellmore: Torrington). Twelve 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. The number of telehealth responses this month has decreased by more than half (3, compared to 8 in January 2023).

Response Time: Statewide, this month **88.3% of mobile episodes received a face-to-face response in 45 minutes or less**, which is higher than the rate in February 2022 (78.0%). While video telehealth responses are counted as “mobile” responses, they are excluded from the response time calculations in this report. All six service areas were at or above the benchmark of 80% of mobile responses provided in 45 minutes or less, with performance ranging from 82.0% (Hartford) to 94.8% (Eastern). Eleven of the fourteen sites met the 80% benchmark. The statewide median mobile response time was 29.0 minutes.

Length of Stay (LOS): Statewide, among discharged episodes, **14 of the 428 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 14.0 days. The regional median LOS ranged from 13.0 days (Central and Western) to 35.0 days (Southwestern). Note: these calculations only include episodes that began during FY2023.

Section I: Mobile Crisis Statewide/Service Area Dashboard

Figure 1. Total Call Volume by Call Type

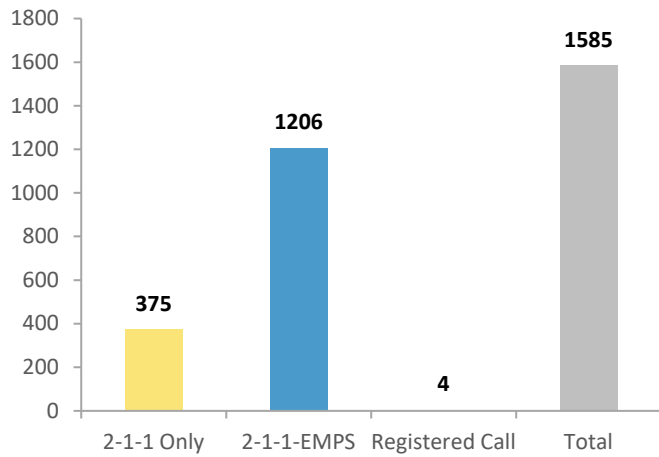


Figure 2. Mobile Crisis Episodes by Service Area

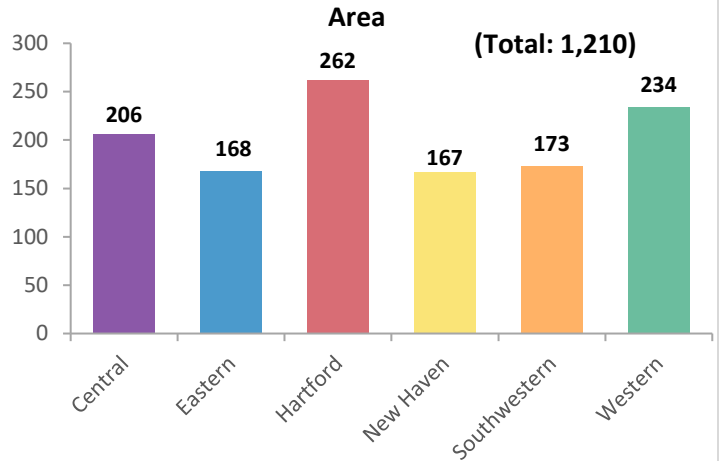


Figure 3. Number Served Per 1,000 Children

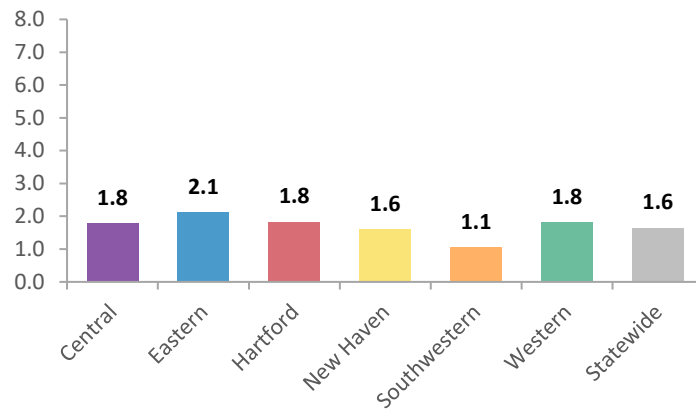


Figure 4. Number Served per 1,000 Children in Poverty

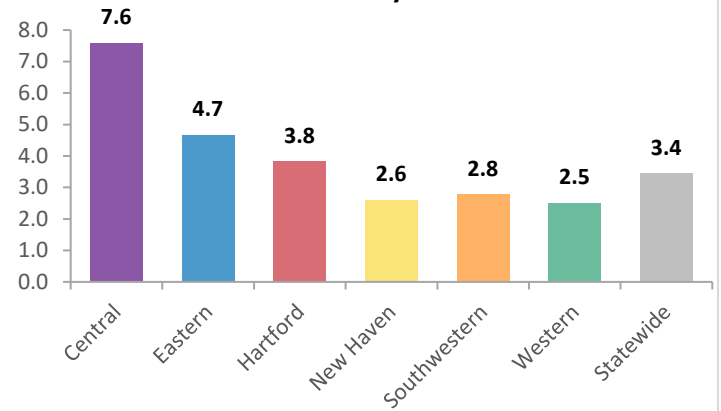
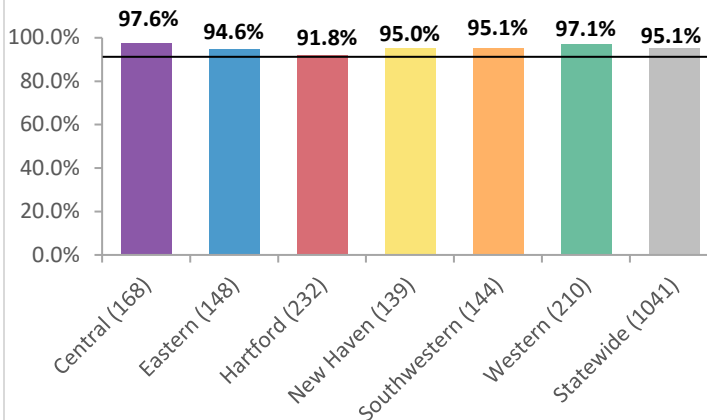


Figure 5. Mobile Response by Service Area



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

Goal=90%

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



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

Goal=80%

Section II: Mobile Crisis Response

Figure 7. Statewide 2-1-1 Call Disposition

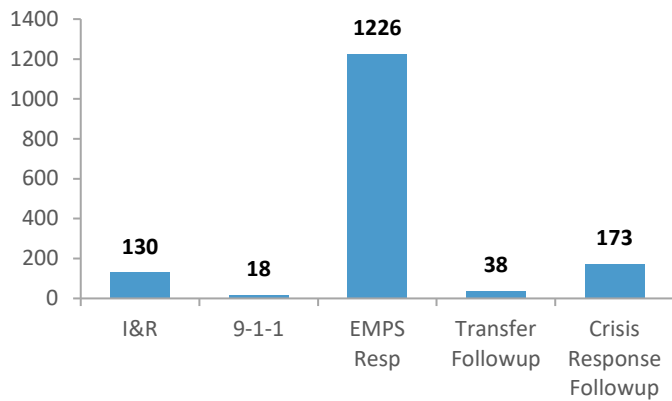


Figure 8. Mobile Crisis Episodes by Provider

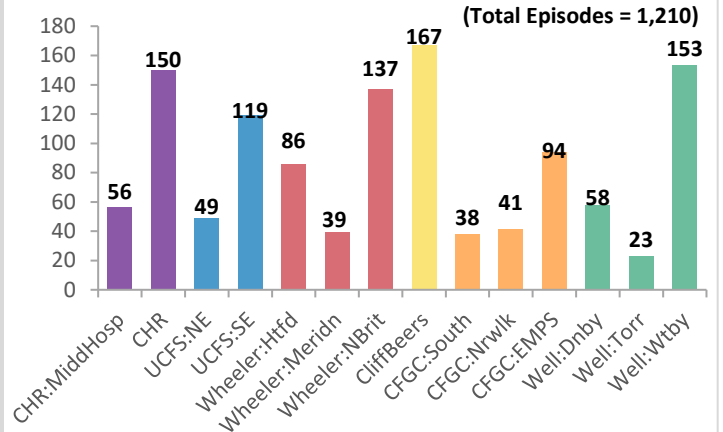
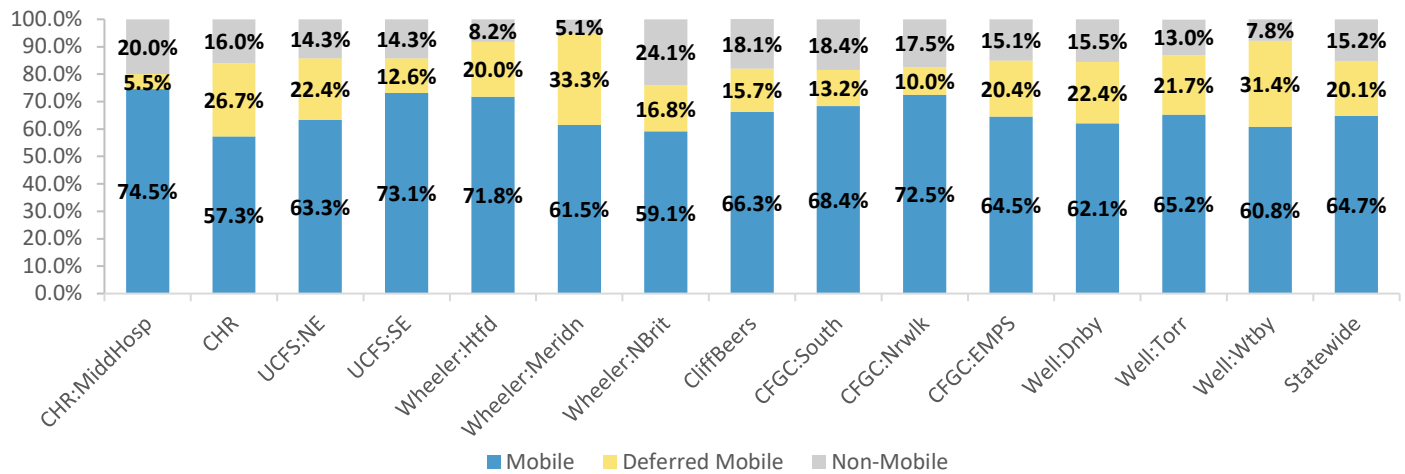
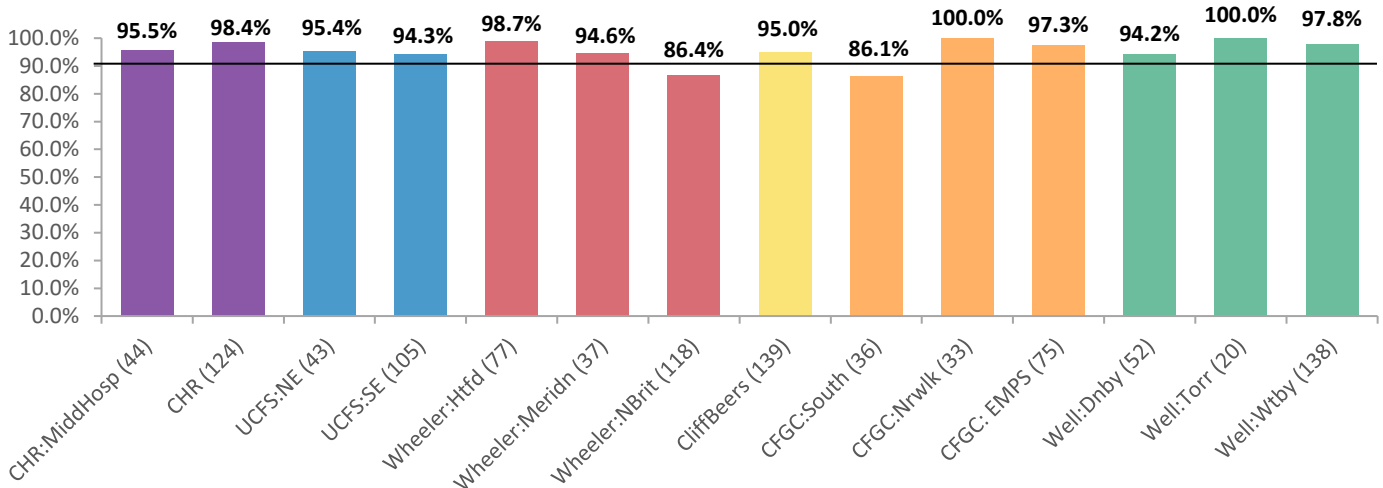


Figure 9. Actual Initial Mobile Crisis Response* by Provider



*Statewide, there were 3 mobile or deferred mobile episodes that were performed via video telehealth.

Figure 10. Mobile Response* by Provider

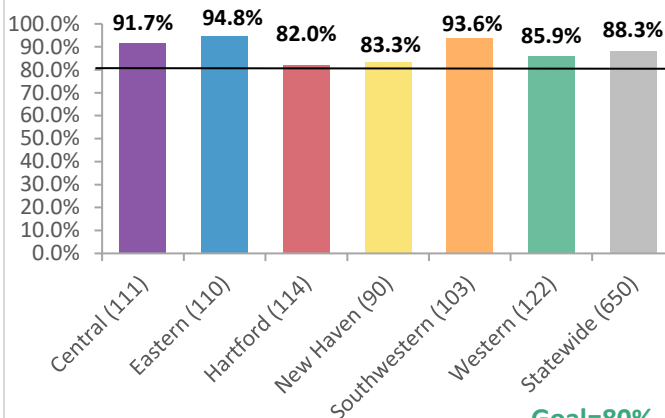


Note: Counts of 211-recommended mobile episodes are in parentheses.

Goal=90%

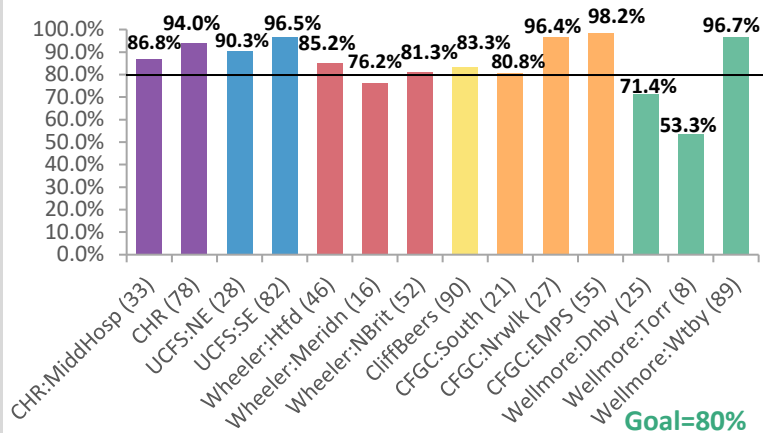
Section III: Response Time

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



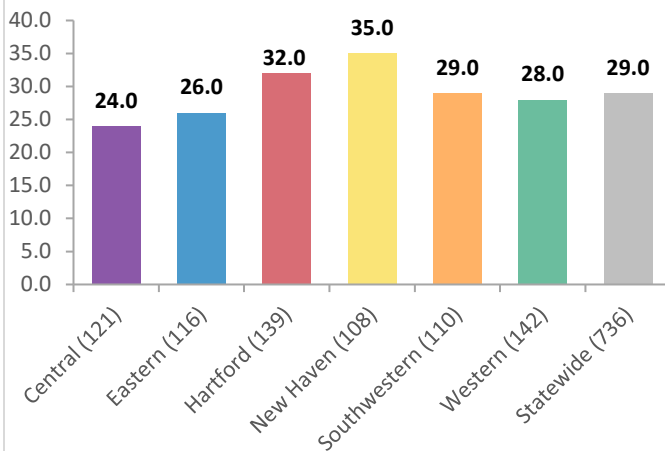
Note: Counts of mobile episodes under 45 mins. are in parentheses. **Goal=80%**

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



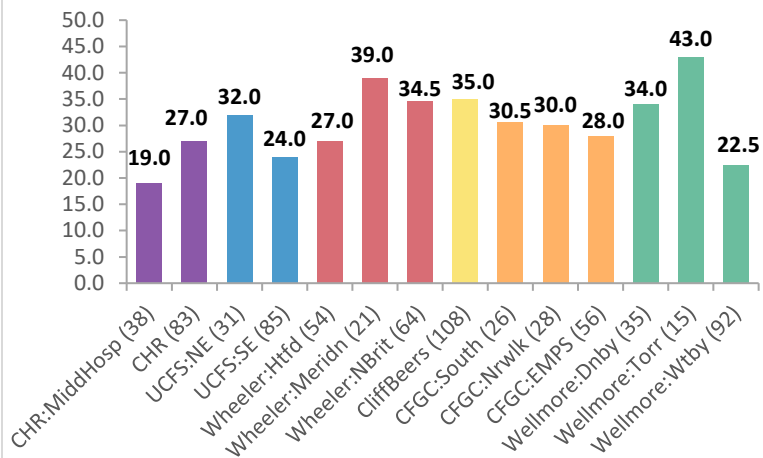
Note: Counts of mobile episodes under 45 mins. are in parentheses. **Goal=80%**

Figure 13. Median Mobile Response Time in Minutes



Note: Count of mobile response episodes are in parentheses.

Figure 14. Median Mobile Response Time by Provider in Minutes



Note: Count of mobile response episodes are in parentheses.

Section IV: Emergency Department Referrals

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

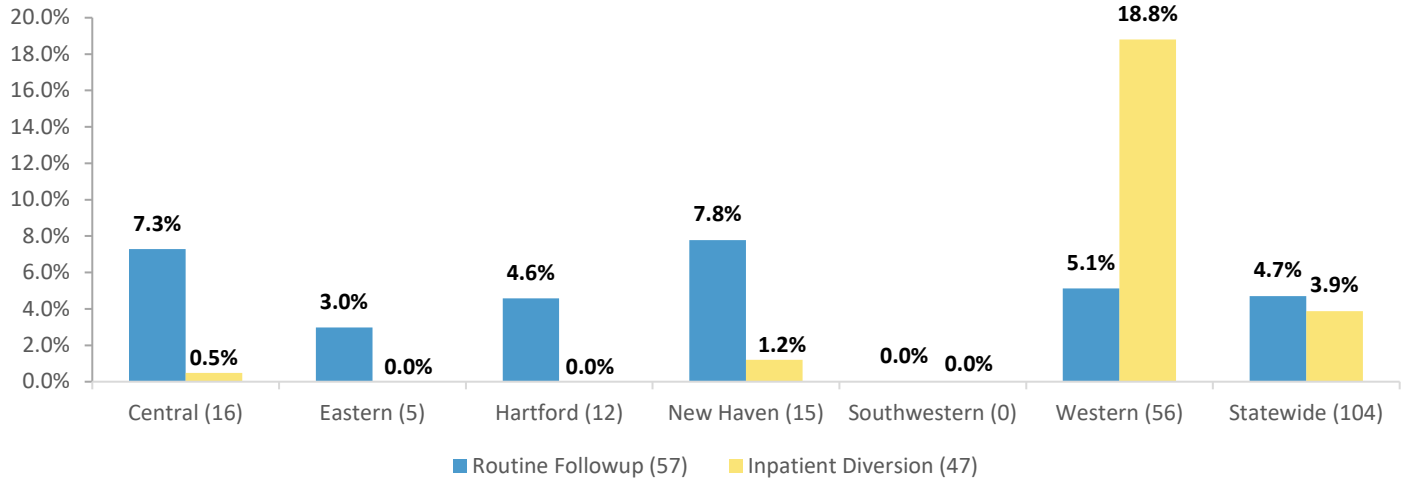
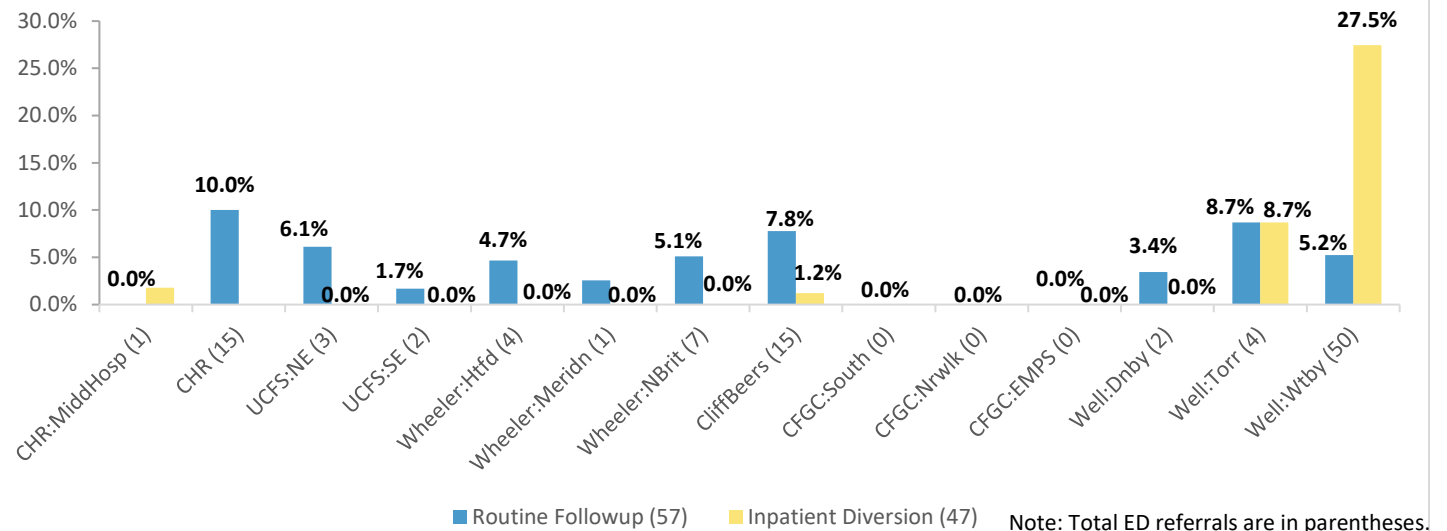


Figure 16. Emergency Department Referrals by Provider (% of Total Mobile Crisis Episodes)



Section V: Length of Stay (LOS)

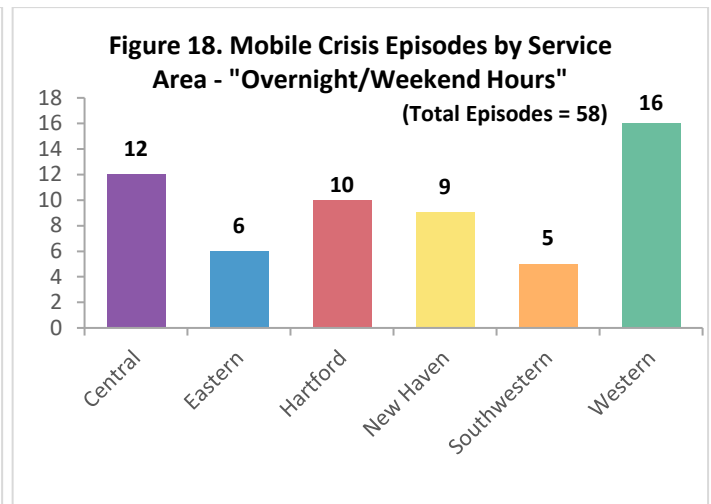
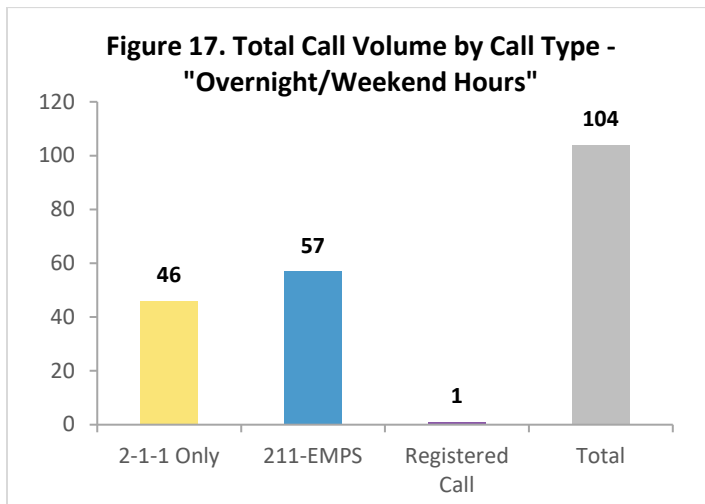
Table 1. LOS for Discharged Episodes* with a Crisis Response Plus Stabilization Follow-up

	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	428	17.3	14.0	3.3% (n = 14)
Central	137	18.6	13.0	5.8% (n = 8)
Eastern	15	26.3	27.0	6.6% (n = 1)
Hartford	115	16.5	15.0	0.0% (n = 0)
New Haven	2	14.0	14.0	0.0% (n = 0)
Southwestern	9	44.6	35.0	33.3% (n = 3)
Western	150	14.7	13.0	1.3% (n = 2)

*Only episodes that had both a start and a discharge date within FY2023 are included in this chart.

Appendix: Mobile Crisis Overnight and Weekend Hours

This appendix provides an overview of Mobile Crisis episodes that took place during the new mobile hours in January 2023 (10 p.m. – 6 a.m. on weekdays and 10 p.m. – 1:00 p.m. on weekends). Mobile Crisis and 2-1-1 received 104 calls including 58 calls handled by Mobile Crisis providers and 46 calls handled by 2-1-1 only. Among the 58 episodes of care, episode volume ranged from 5 episodes (Southwestern) to 16 episodes (Western).



Statewide, 31.6% of these episodes received a mobile response, 21.1% received a deferred mobile response, and 47.4% received a non-mobile response. During the daytime hours, only 15.2% of episodes received a non-mobile response (Figure 9). Of the mobile and deferred mobile episodes, 14 received a face-to-face assessment, and an additional 10 received a face-to-face assessment plus follow-up.

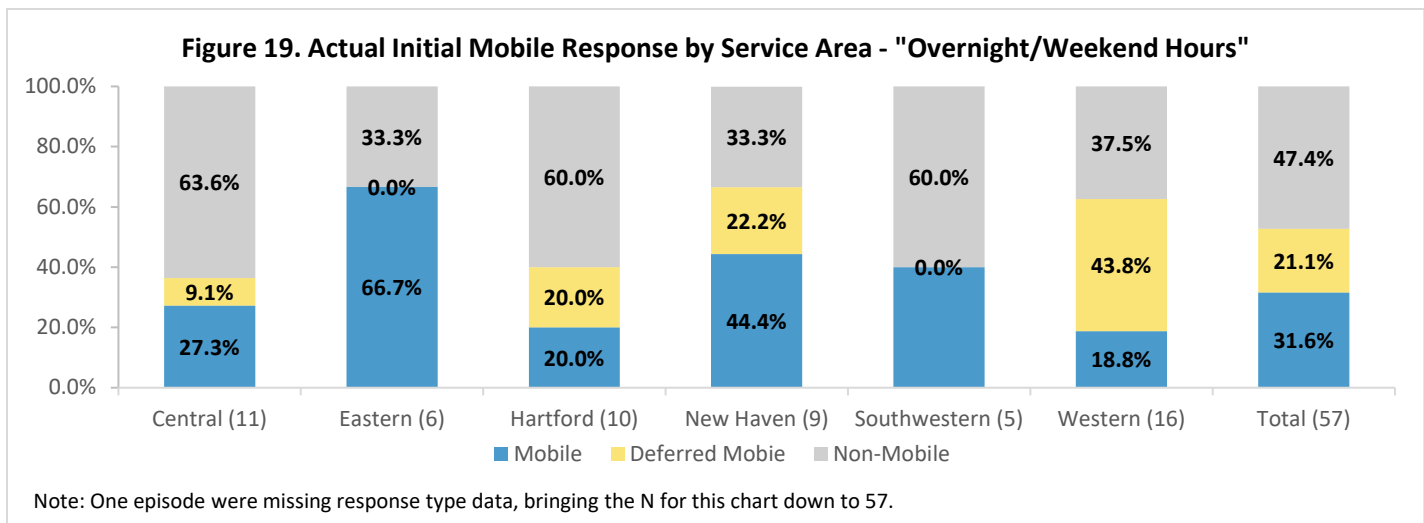
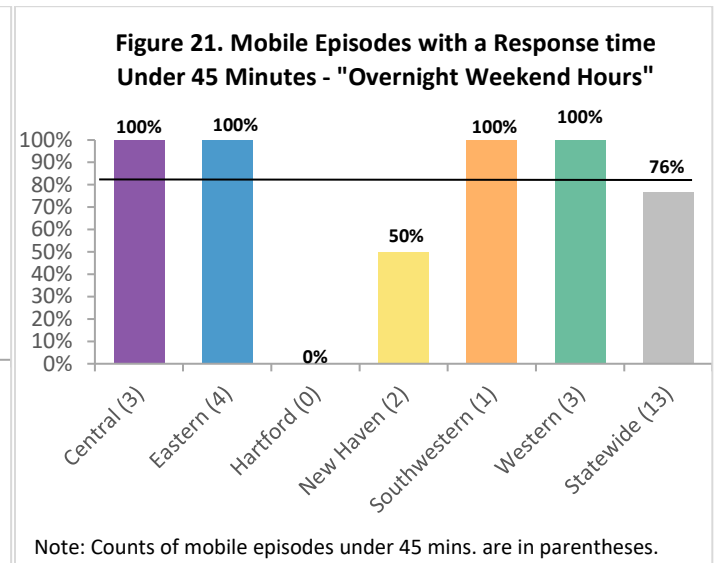
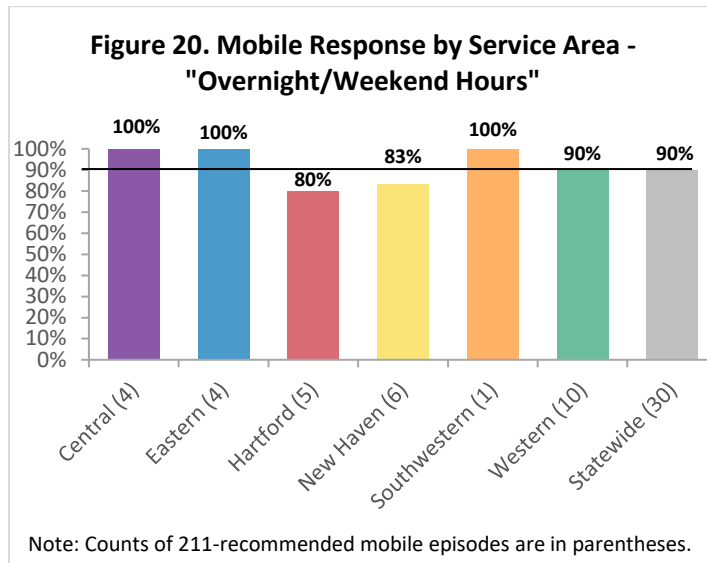


Table 2. Assessment Type by Response Mode – "Overnight/Weekend Hours"

Response Mode	Phone Only	Face-to-Face	Plus Stabilization Follow-Up	Telehealth	Face to Face: Consultation Only	Total
Mobile	3	9	4	0	2	18
Non-Mobile	27	0	0	0	0	27
Deferred Mobile	1	5	6	0	0	12
Total	31	14	10	0	2	57

There were 30 episodes that 211 recommended for a mobile (or deferred) reponse. The statewide mobility rate was 90% with four regions meeting the 90% benchmark. Additionally, of the 14 episodes that had an immediate response, 76% received a face-to-face response in 45 minutes or less, with four of the six region meeting the 80% benchmark.



The majority of referral sources were from 'Self/Family' (67%) and Emergency Department (24%). Schools accounted for 5% of the referrals but these most likely involve a data entry error, as schools are not in session during the hours covered in this portion of the report.

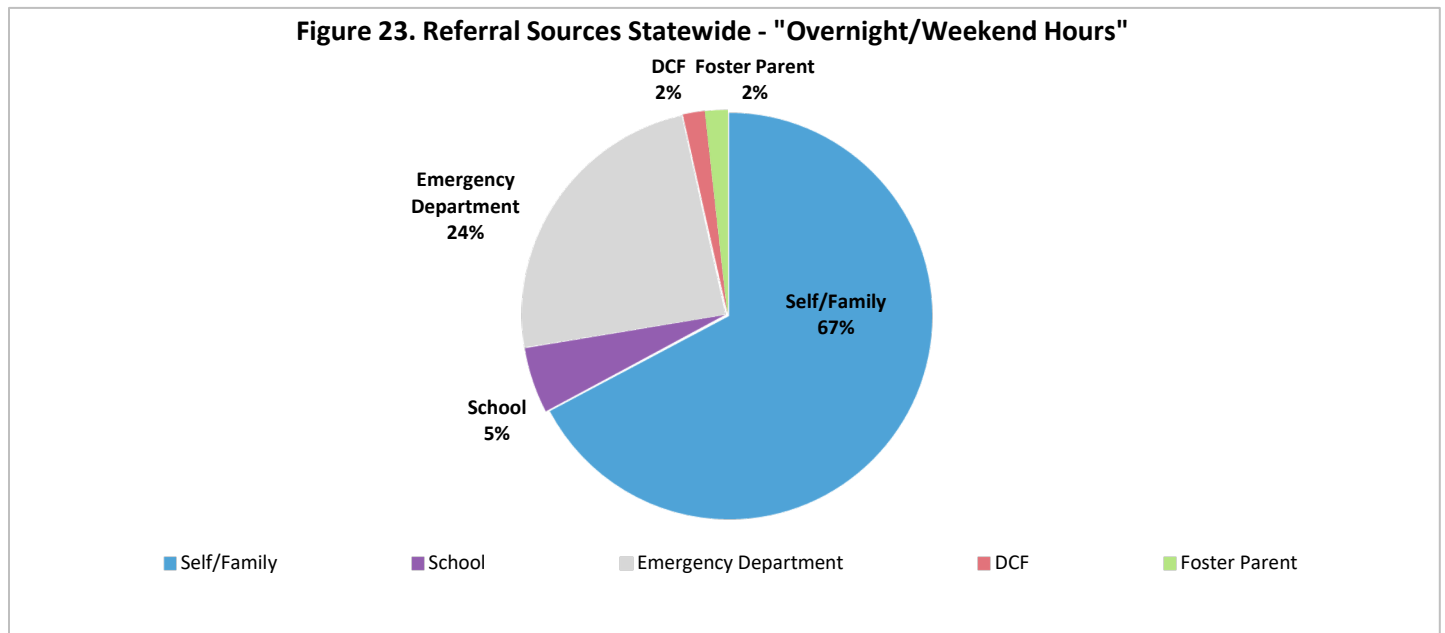


Table 3 reflects the number of calls during the newly added hours broken down by “shift”, combining late night calls with the early morning. The highest volume of calls occurred from Friday at 10 p.m. to Saturday 1 p.m. (23 calls) and on Saturday at 10 p.m. to Sunday 1 p.m. (15 calls), which is 65.5% of the total calls that had occurred within the newly added hours.

Table 3. Episodes per hour based on day of week – “Overnight/Weekend Hours”

Time	Sun 10PM - Mon 6AM	Mon 10PM - Tue 6AM	Tue 10PM - Wed 6AM	Wed 10PM - Thu 6AM	Thur 10PM - Fri 6AM	Fri 10PM - Sat 1PM	Sat 10PM - Sun 1PM	Total
22:00-22:59	1	1	0	0	3	2	2	9
23:00-23:59	1	1	0	2	4	1	1	10
0:00-0:59	1	0	0	1	0	4	0	6
1:00-1:59	0	0	0	2	0	1	0	3
2:00-2:59	0	0	0	0	0	0	0	0
3:00-3:59	0	0	0	0	0	0	0	0
4:00-4:59	0	0	1	0	0	0	0	1
5:00-5:59	0	0	1	1	0	0	0	2
6:00-6:59	N/A	N/A	N/A	N/A	N/A	0	0	0
7:00-7:59	N/A	N/A	N/A	N/A	N/A	0	0	0
8:00-8:59	N/A	N/A	N/A	N/A	N/A	4	2	6
9:00-9:59	N/A	N/A	N/A	N/A	N/A	1	2	3
10:00-10:59	N/A	N/A	N/A	N/A	N/A	3	2	5
11:00-11:59	N/A	N/A	N/A	N/A	N/A	2	2	4
12:00-12:59	N/A	N/A	N/A	N/A	N/A	5	4	9
Total	3	2	2	6	7	23	15	58