

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 March 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.

<u>Call and Episode Volume</u>: In March 2023, 2-1-1 and Mobile Crisis received 1,862 calls including 1,441 calls (77.4%) handled by Mobile Crisis providers and 421 calls (22.6%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). This month showed a 28.2% increase in call volume from March 2022 (n=1,452). Call volume remains 20.6% lower than the same month in 2019 (n=2,346), prior to the start of the pandemic.

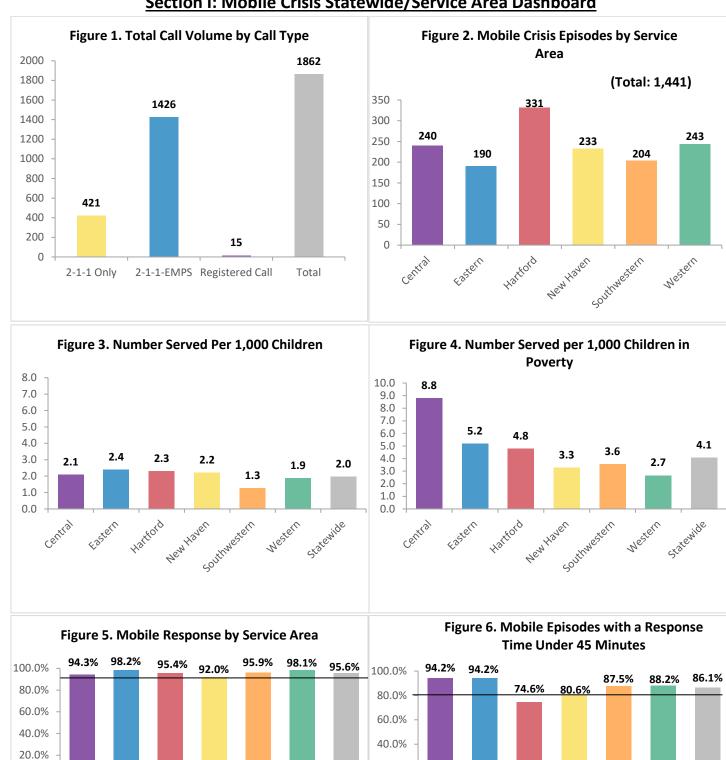
Among the **1,441 episodes of care** this month, episode volume ranged from 190 episodes (Eastern) to 331 episodes (Hartford). The statewide average service reach per 1,000 children this month was 2.0, with service area rates ranging from 1.3 (Southwestern) to 2.5 (Eastern) relative to their specific 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 4.1 per 1,000 children in poverty, with service area rates ranging from 2.7 (Western) to 8.8 (Central).

Mobility: Statewide mobility was 95.6% this month, higher than the rate in March 2022 (91.8%). All six service areas were above the 90% benchmark this month, with performance ranging from 92.0% (New Haven) to 98.2% (Eastern). Mobility for individual providers ranged from 92.0% (Clifford Beers) to 100% (UCFS: Northeastern, Wellmore: Torrington). 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. The number of telehealth responses this month has slightly increased (4, compared to 3 in February 2023).

Response Time: Statewide, this month 86.1% of mobile episodes received a face-to-face response in 45 minutes or less, which is higher than the rate in March 2022 (75.2%). While video telehealth responses are counted as "mobile" responses, they are excluded from the response time calculations in this report. Five 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 74.6% (Hartford) to 94.2% (Central and Eastern). Nine of the fourteen sites met the 80% benchmark. The statewide median mobile response time was 29.0 minutes.

<u>Length of Stay (LOS):</u> Statewide, among discharged episodes, **13 of the 506** *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 13.5 days (Central) to 33.0 days (New Haven and Southwestern). Note: these calculations only include episodes that began during FY2023.

Section I: Mobile Crisis Statewide/Service Area Dashboard



20.0%

0.0%

statewide 120al

Goal=90%

western 2151

Southwestern LTD

Note: Counts of 211-recommended mobile episodes are in

0.0%

parentheses.

Hartord 128 New Haven 122

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

Eastern (131)

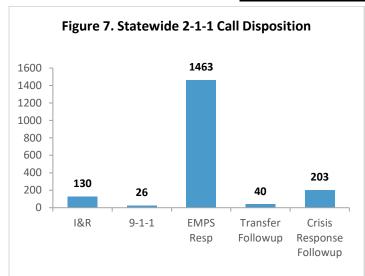
Southwestern L122

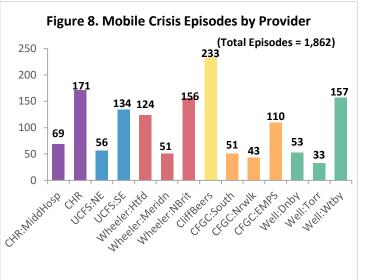
Western Lash

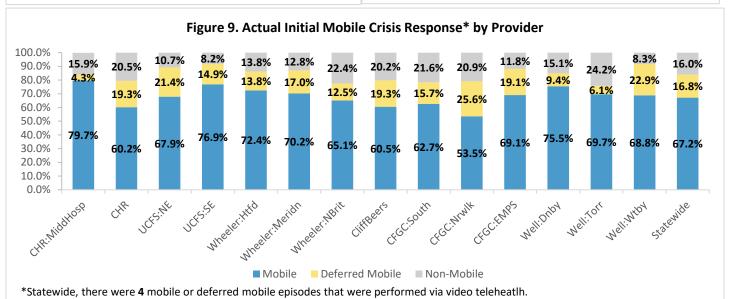
statewide [189]

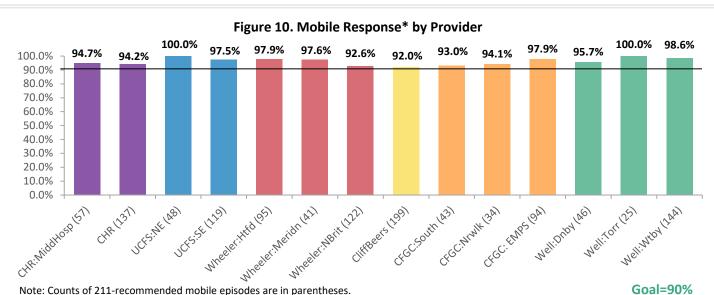
Goal=80%

Section II: Mobile Crisis Response

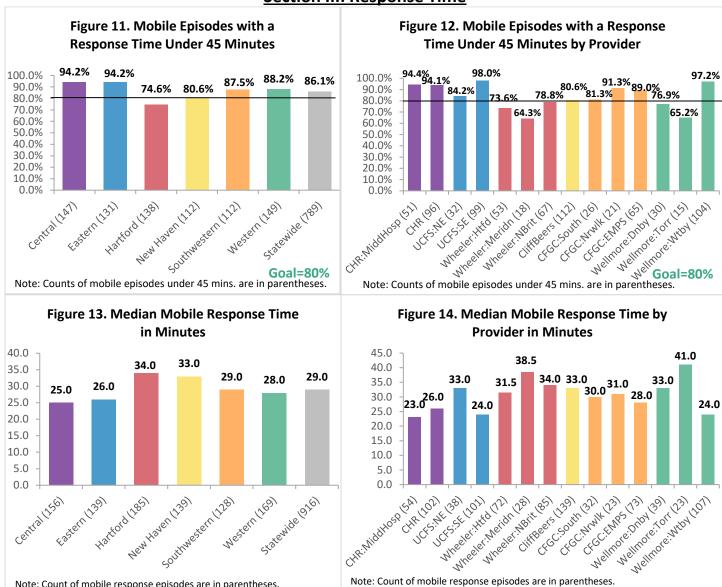








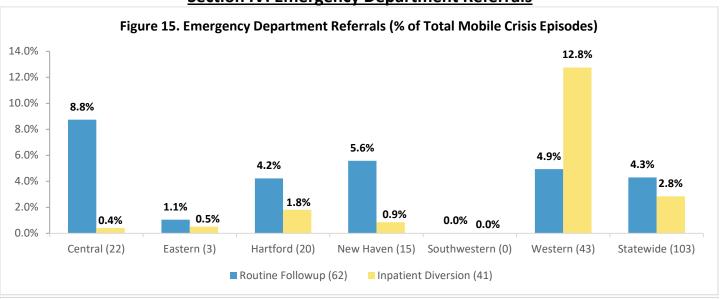
Section III: Response Time

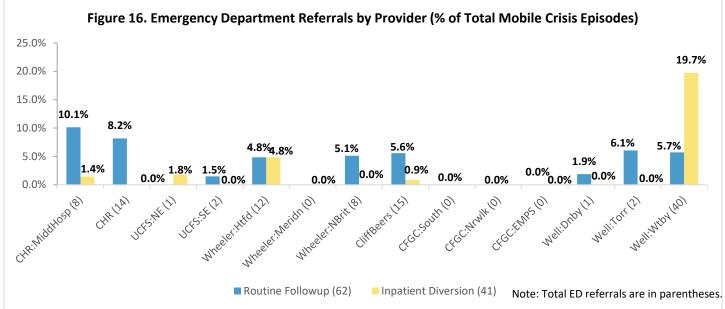


Note: Count of mobile response episodes are in parentheses.

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Section IV: Emergency Department Referrals





Section V: Length of Stay (LOS)

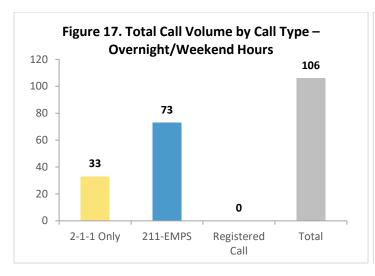
Table 1. LOS for <u>Discharged Episodes*</u> with a Crisis Response Plus Stabilization Follow-up

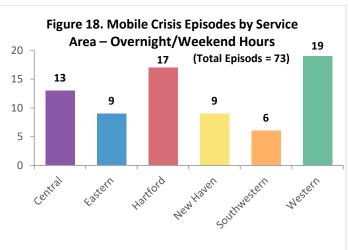
	Discharged Episodes with a Crisis Response of Plus Stabilization Follow-up					
	Number of		Median LOS	Percent Exceeding		
	Episodes	(in days)	(in days)	45 Days		
STATEWIDE	506	18.3	15.0	2.5% (n = 13)		
Central	170	16.1	13.5	2.4% (n = 4)		
Eastern	16	30.0	32.5	6.3% (n = 1)		
Hartford	127	18.7	15.0	0.8% (n = 1)		
New Haven	15	31.4	33.0	20.0% (n = 3)		
Southwestern	17	33.9	33.0	17.6% (n = 3)		
Western	161	16.2	14.0	0.6% (n = 1)		

^{*}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 106 calls including 73 calls handled by Mobile Crisis providers and 33 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, 38.4% of these episodes received a mobile response, 27.4% received a deferred mobile response, and 34.2% received a non-mobile response. During the daytime hours, only 67.2% of episodes received a non-mobile response (Figure 9). Of the mobile and deferred mobile episodes, 19 received a face-to-face assessment, and an additional 27 received a face-to-face assessment plus follow-up.

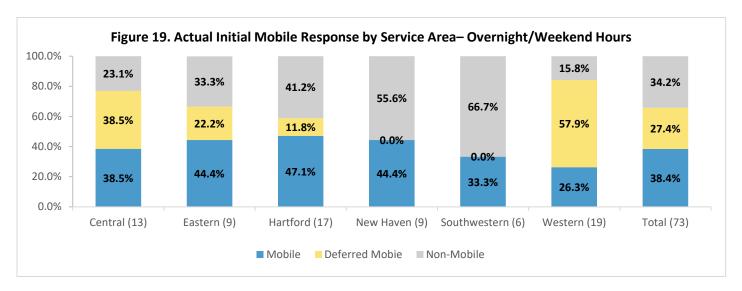
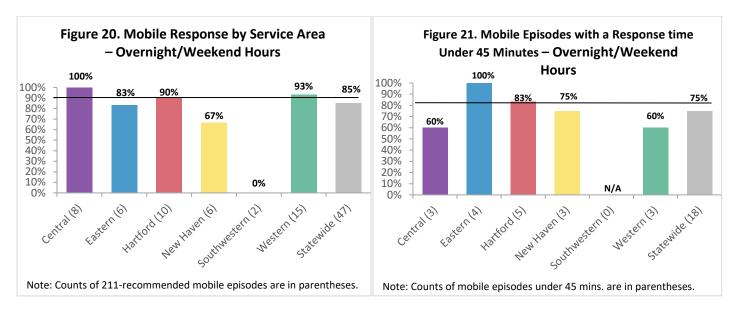


Table 2. Assessment Type by Response Mode – Overnight/Weekend Hours

Response Mode	Phone Only	Face-to-Face	Plus Stabilization Follow-Up	Telehealth	Face to Face: Consultation Only	Total
Mobile	1	16	11	0	0	28
Non-Mobile	25	0	0	0	0	25
Deferred Mobile	0	3	16	0	1	20
Total	26	19	27	0	1	73

There were 47 episodes that 211 recommended for a mobile (or deferred) reponse. The statewide mobility rate was 85% with three regions meeting the 90% benchmark. Additionally, of the 18 episodes that had an immediate response, 75% received a face-to-face response in 45 minutes or less, with two of the six regions meeting the 80% benchmark.



The majority of referrals to Mobile Crisis during the overnight/weekend hours were from 'Self/Family' (74%) and Emergency Departments (25%).

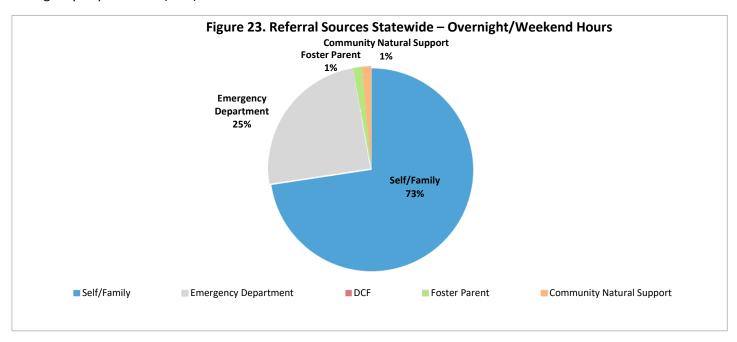


Table 3 reflects the number of calls during the newly added hours broken down by "shift", combining late night calls with the early morning. The highest volume of calls occurred from Friday at 10 p.m. to Saturday 1 p.m. (20 calls) and on Saturday at 10 p.m. to Sunday 1 p.m. (18 calls), which is 52.1% 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	4	3	2	3	5	3	2	22
23:00-23:59	3	1	1	0	2	1	0	8
0:00-0:59	2	0	1	0	0	0	2	5
1:00-1:59	1	2	0	1	0	0	1	5
2:00-2:59	0	0	0	0	0	1	0	1
3:00-3:59	1	0	0	0	0	0	0	1
4:00-4:59	0	0	1	0	0	0	0	1
5:00-5:59	1	0	0	1	0	0	0	2
6:00-6:59	N/A	N/A	N/A	N/A	N/A	1	1	2
7:00-7:59	N/A	N/A	N/A	N/A	N/A	2	0	2
8:00-8:59	N/A	N/A	N/A	N/A	N/A	2	1	3
9:00-9:59	N/A	N/A	N/A	N/A	N/A	2	1	3
10:00-10:59	N/A	N/A	N/A	N/A	N/A	2	3	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	4	5	9
Total	12	6	5	5	7	20	18	73