Crisis phone response isn’t enough...how mobile teams as an extension of crisis phones are providing stabilization in the community

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Session Objectives

• Discuss how mobile teams can alter the course for those who contemplate and/or attempt suicide.
• Summarize how effective mobile teams can show improved outcomes resulting in more resources.
Agenda

- Who We Are
- Mobile Team Operations
- Collecting Data
- From a Funder’s Perspective
- Next Steps
Who We Are
What is a Mobile Team?

• Objectives & Outcomes
  – Community stabilized; keep people in their community

• How we utilize Mobile Teams in Arizona
  – If the caller’s risk and acuity are high, we send a Mobile Team
  – 22 Mobile Teams, 3 Specialty Teams
  – Average of 1,600 Mobile Teams dispatched each month
Mobile Team Operations

• What are the top 3 reasons why a Mobile Team is dispatched?
• How long does it take (on average) for a Mobile Team to arrive?
• How long (on average) is the Mobile Team on site?
• Where do our clients go after the Mobile Team has been there?
Purpose for Dispatches

- DTS: 51%, 50%, 49%, 51%, 51%
- DTO: 13%, 12%, 12%, 9%, 11%
- Significant Event/Highly Distressed: 38%, 38%, 39%, 40%, 38%
- CISD: [Bars for Jan '11, Feb '11, Mar '11, Apr '11, May '11]
Mobile Team Dispositions (Adult & Children)
Mobile Team Dispositions – Community Stabilized (Adult & Children)
Mobile Team Dispositions – Psych Reason (Adult & Children)
Mobile Team Operations

- How long does it take (on average) for a Mobile Team to arrive?
  - 45 minutes
  - 35 minutes for police requests

- How long (on average) is the Mobile Team on site?
  - 90 minutes
Hiring to Prevent Firing

To make sure you have the right people in the van!
8 Questions to Test…

- Flexibility
- Customer Service
- Problem Solving
- Ethical Issues
- Safety Issues
Questions

1. [Image of a no phone symbol]

2. [Image of a person with glasses and a stack of papers]

3. [Image of three stick figures with one pointing]

4. [Image of a person looking at their watch]
Collecting Data

- Importance of collecting data
- Types of data collected
- Variety of purposes of data
- National Crisis Community Responders Survey Project
Importance of Data Collections

• Why would you want to collect data?
  – Agency and program decision making
  – Are we on target clinically or operationally?
  – Are we being responsive to our community?

What are some other reasons?
Types of Data and Purpose

• Data on every service line (crisis phones, mobile teams, rapid response, etc.)
  – What is the average length of intervention?
  – Are we meeting the community needs?
  – Do we have enough staff and teams?
  – Are we scheduled to meet the needs?
  – Do we have unmet needs?
  – Do we need more resources?
  – What is the data telling us?

• Data Purposes – for your agency, funders, the community, stakeholders, etc.
National Survey

• Building a library of Crisis Service Providers
  – Survey
  – Findings to date
  – Distribute survey and sign up list
  – Next steps
Macro-Level & Funder’s Perspective

What matters to the ‘Powers to Be’
Two Key Components of an Adequate Crisis System

1. **Accessibility**
   - Appropriate services are conveniently located throughout the geographic service area

2. **Availability**
   - Services are timely and responsive
     - 24/7 Crisis Line with minimal wait times
     - 24/7 Mobile Team with minimal response times
     - 24/7 Facility-based services minimal diversion rates
     - 1st responder turnaround times at stabilization facilities
Programmatic Level Focus Should Include:

- Outcomes
- Service Effectiveness
- Cost Efficiency
- Consistency/Precision
How to Achieve Macro-Level Strategies

- COMMUNICATION
- RELIABLE DATA
- STRATEGIC PLANNING
Emergency Department Costs

- Average ER visit cost $2,000
- Average ER visits by chronically homeless SMI 7/year
- Roughly 4,000 chronically homeless SMI recipients in Greater Phoenix Area
- $56,000,000/year in ER costs alone
- If each of the 38 emergency departments in the Greater Phoenix area saw 1 chronically homeless SMI recipient per day
  - Annual cost: $27,740,000/year
Emergency Department Costs

- The American College of Emergency Physicians surveyed hundreds of U.S. hospitals last month and 79 percent of hospitals routinely "boarded" psychiatric patients in their waiting rooms for at least some period of time due to limited healthcare services.

- One-third of emergency rooms reported psychiatric patient stays averaged at least eight hours. Six percent said they had average waits of more than 24 hours waiting for the next step in a patient's care.
Emergency Department Costs

- Oscar Mejia – Sunrise Hospital (Las Vegas, 2010)
  - Two hours after arrival, doctors placed Mejia's on a legal psychiatric hold. Suicide precautions in the nursing notes required visual checks every fifteen minutes.
  - Despite doctor’s orders, there are no hospital records of any checks for nearly four hours.
  - Mejia suffocated himself with his hospital-issued socks.

- 59-year old male – Mountain View Hospital (Las Vegas, 2010)
  - Records reveal he hanged himself with his belt minutes after learning his transport to a psychiatric facility was delayed until morning.
In your area, how can Mobile Teams (or face-to-face interactions) be enhanced to better serve your community?
Questions?
Thank you, from the

Crisis Response Network, Inc.
Inspiring Hope During Life's Most Challenging Times

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