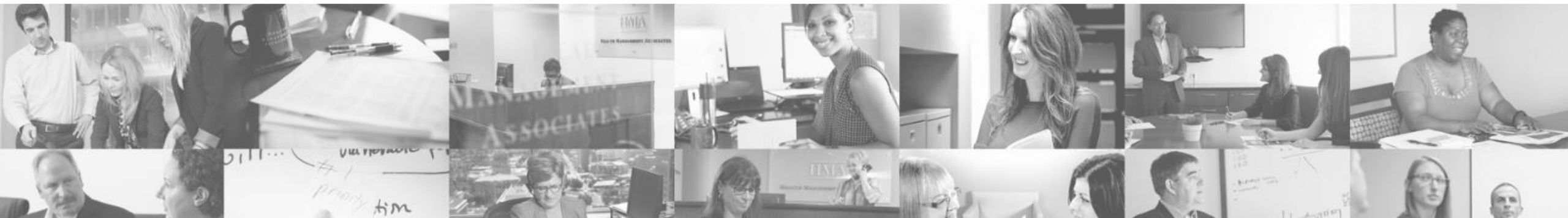




HEALTH MANAGEMENT ASSOCIATES

Rethinking Behavioral Health Crisis Systems: Saving Lives, Saving Resources

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Laquisha Grant, Senior Consultant



Learning Objectives



Understand the components of the behavioral health crisis system



Identify opportunities for system improvement



Approaches to achieve re-imagined crisis system

- Improved safety and health outcomes
- Efficient use of limited resources

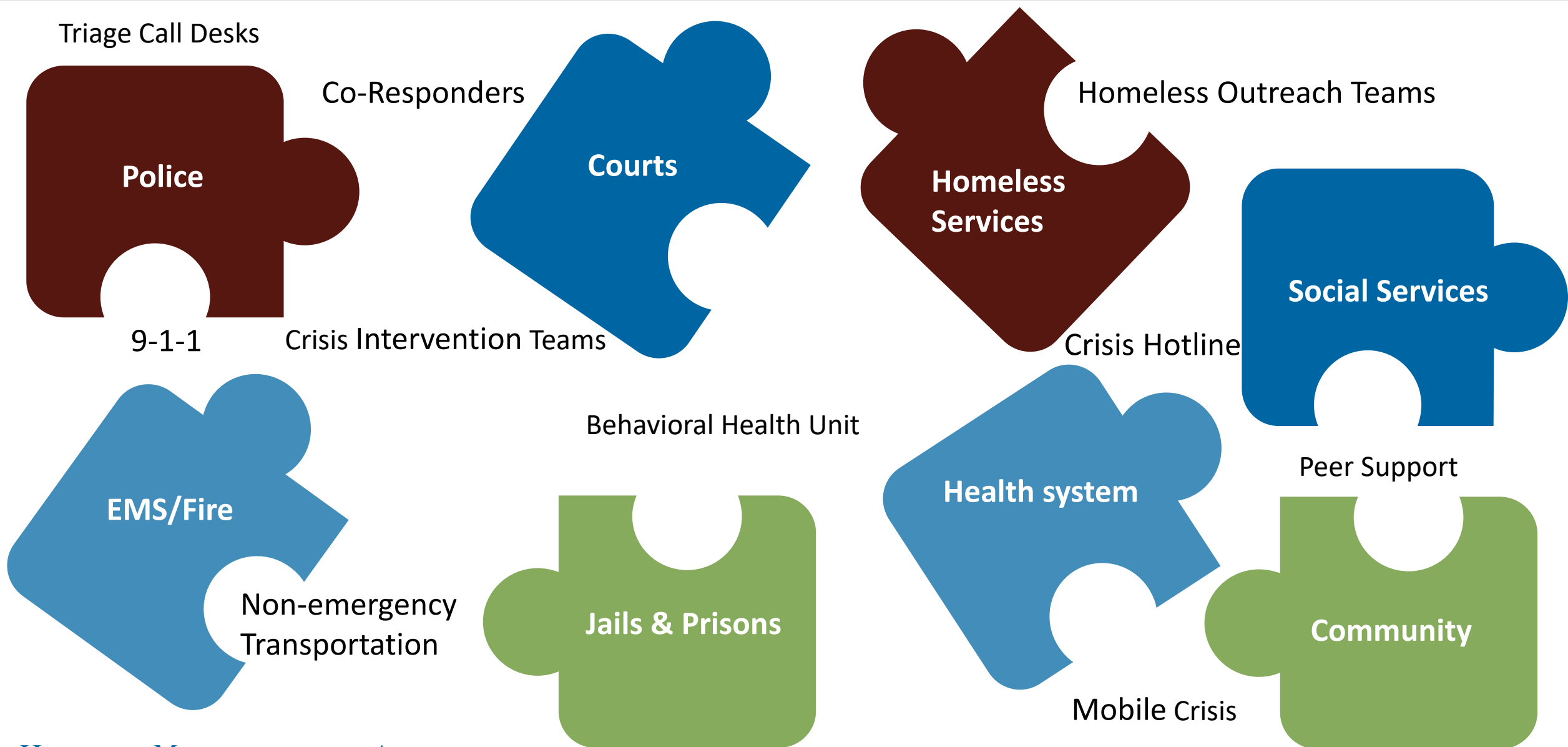
Operational Definition of Crisis

The formal system constructed
around 911 and crisis hotlines

Event Types:
Mental Health/Substance Use/IDD

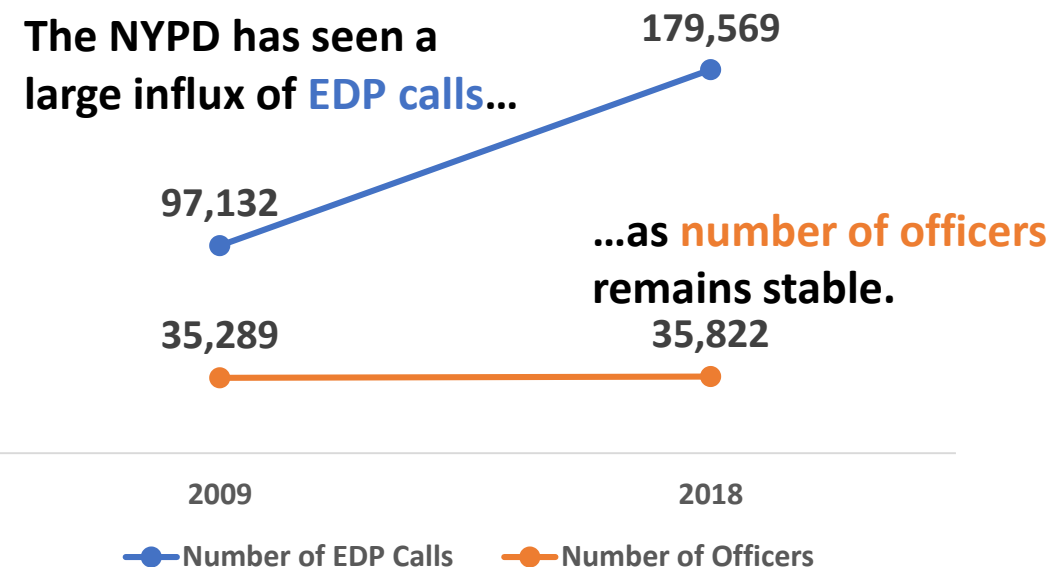
- Limitations:
 - Crisis doesn't always involve call to 911
 - Crisis is often misunderstood and/or criminalized

■ CRISIS SYSTEMS IN CRISIS



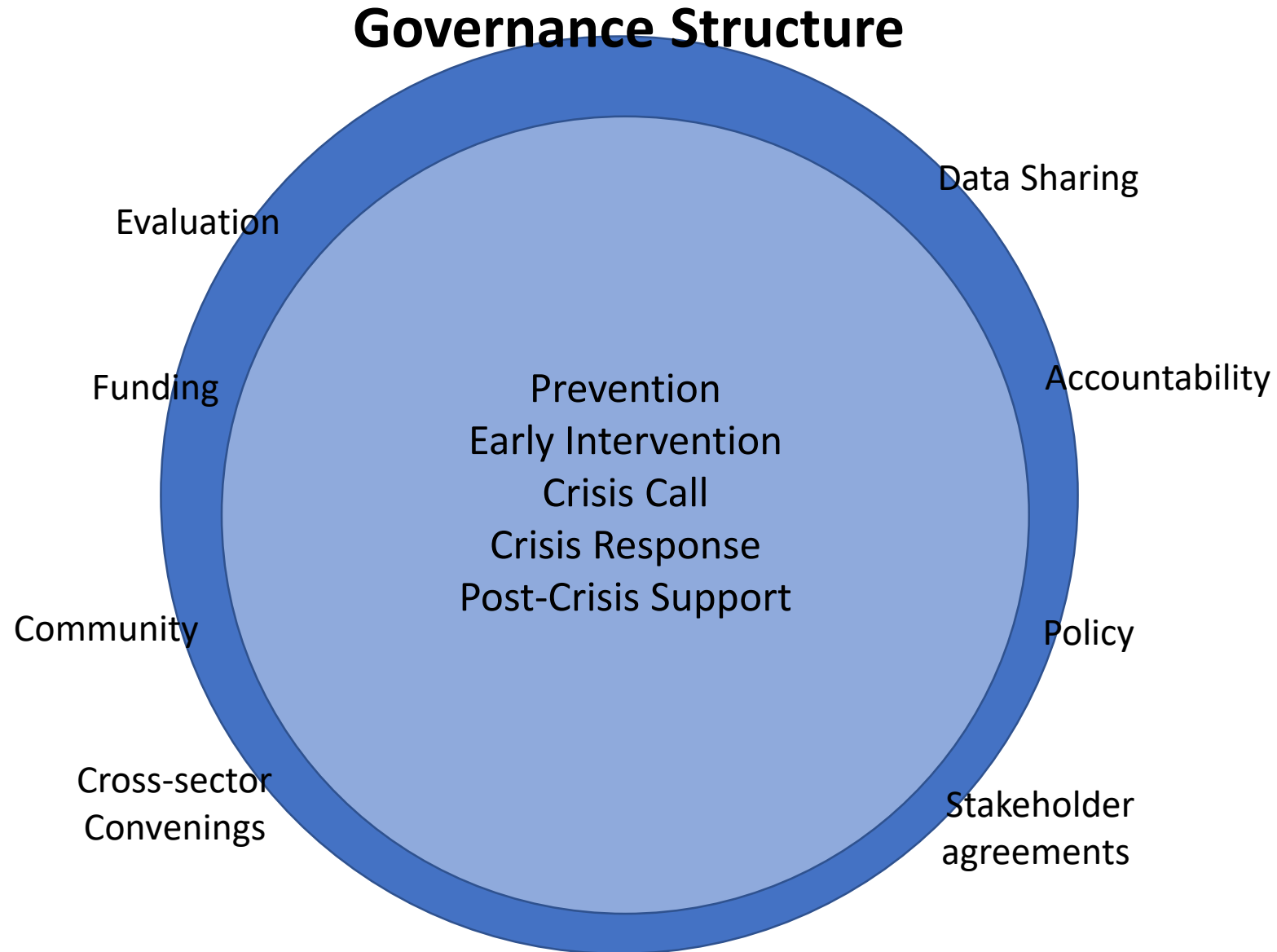
Chicago Sends Police To 911 Mental Health Calls. What Could The City Do Instead?

February 20, 2019



Police calls involving mental health have doubled. St. Paul now devotes a unit to them

PUBLISHED: March 31, 2018 at 11:20 pm | UPDATED: August 1, 2018 at 10:27 am



■ OUTCOMES

Reduce

- Avoidable crisis calls

Improve

- Outcomes for people in crisis and responders

Save

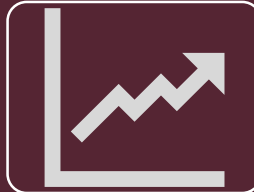
- Better use of resources

GOAL: INTEGRATED BEHAVIORAL HEALTH CRISIS SYSTEM

Strategies



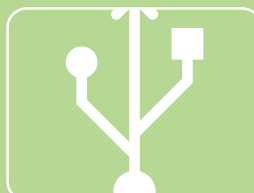
Prevent or intervene early to avoid a crises



Improve **response** to BH crises



Enhance **post-crisis stabilization/support** and reduce the likelihood of future crises



Develop **data-sharing** across systems in support of improved crisis strategies

■ CRISIS STAGES



■ CONSIDERATIONS

Community Trust &
Engagement

Peer & Community

Cross-sector
Collaboration

Policies

Data &
Information Sharing

Oversight/Governance

Payors/Funding

Privacy & Legal Issues

Race

Social Determinants of
Health

High Utilizers/
Frequent Callers

Training &
Skill Building

Trauma

Prevention

- Promote wellness & community tenure
- Improve community support networks
- Address social determinants

Housing

System
Literacy

Peer
Support

Safe Spaces

Access to
Quality Care

Local
Support

Prevention: Case Example

Community Partners in Care (CPIC)

- Trained local organizations like barbershops, beauty salons, senior centers, and fitness clubs on how to recognize depression and on Cognitive Behavioral Therapy
- Decreased Behavioral Health Hospitalization by 50%
- Improved quality of life, increased physical activity and reduced homelessness risk factors, rate of behavioral health hospitalization and medication visits among specialty care users in clients part of the intervention arm of the trial
- Decreased homelessness and risk factors for homelessness by 25%



Early Intervention

- Public awareness/knowledge
- Support neighborhood responses
- Focus on families
- Build partnerships
- Services/supports responsive to need



Crisis Respite



Urgent BH Crisis
Care



Family/Peer
Supports



Police/MH
Partnership



CIT



Diversion/Drop-
off Centers

Early Intervention: Case Examples

Crisis Response Center (Pima County, AZ)

- Walk-in urgent care clinic
- 50% of patients brought by law enforcements

Concrrn (San Francisco, CA)

- Technology to connect person of concern and trained peer responders



Crisis Call

- Use data better
- Shared definitions
- Varied deployment options
- Cross-sector collaboration

911 & Crisis Hotline Coordination

- Seamless call handoffs

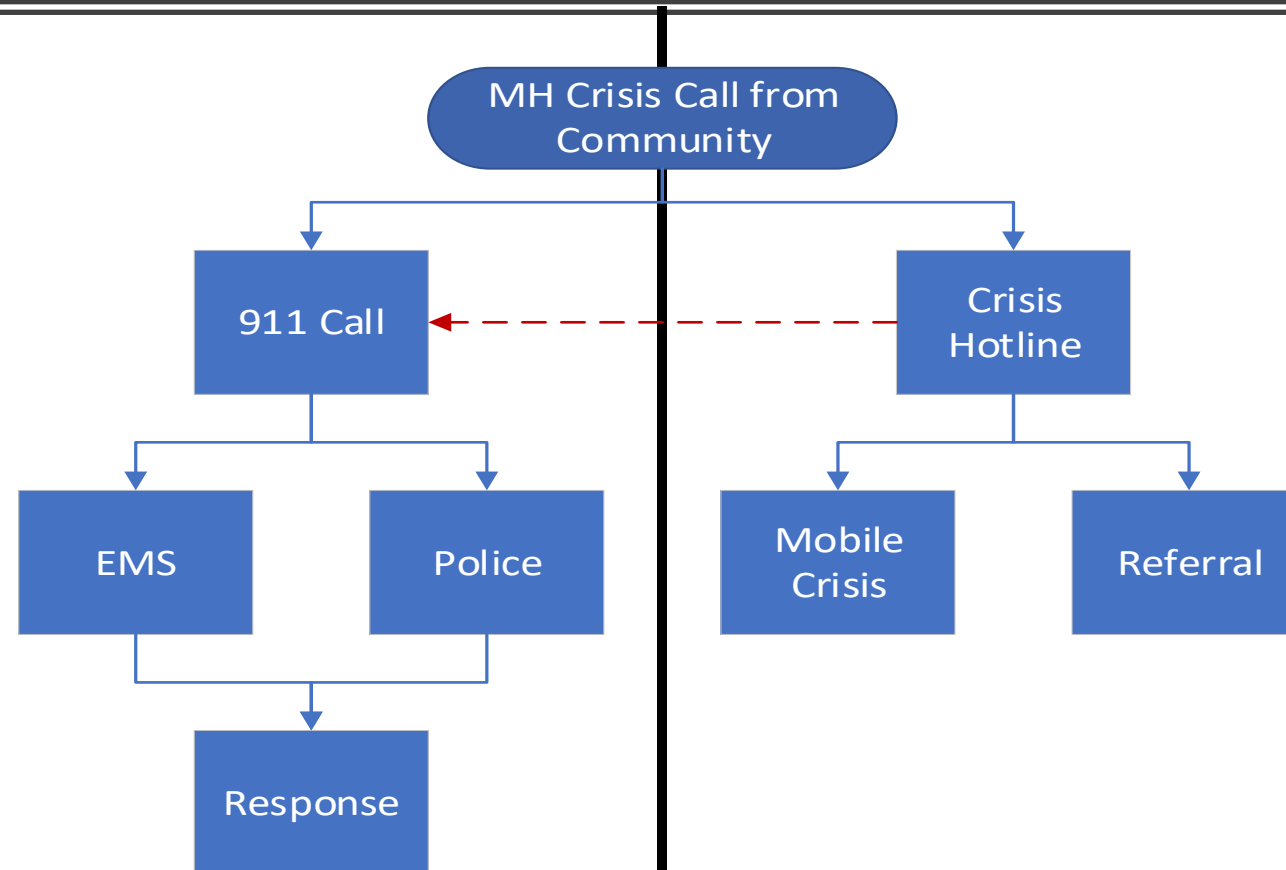
Call Risk/Need Assessment

- Train call takers
- Use information better

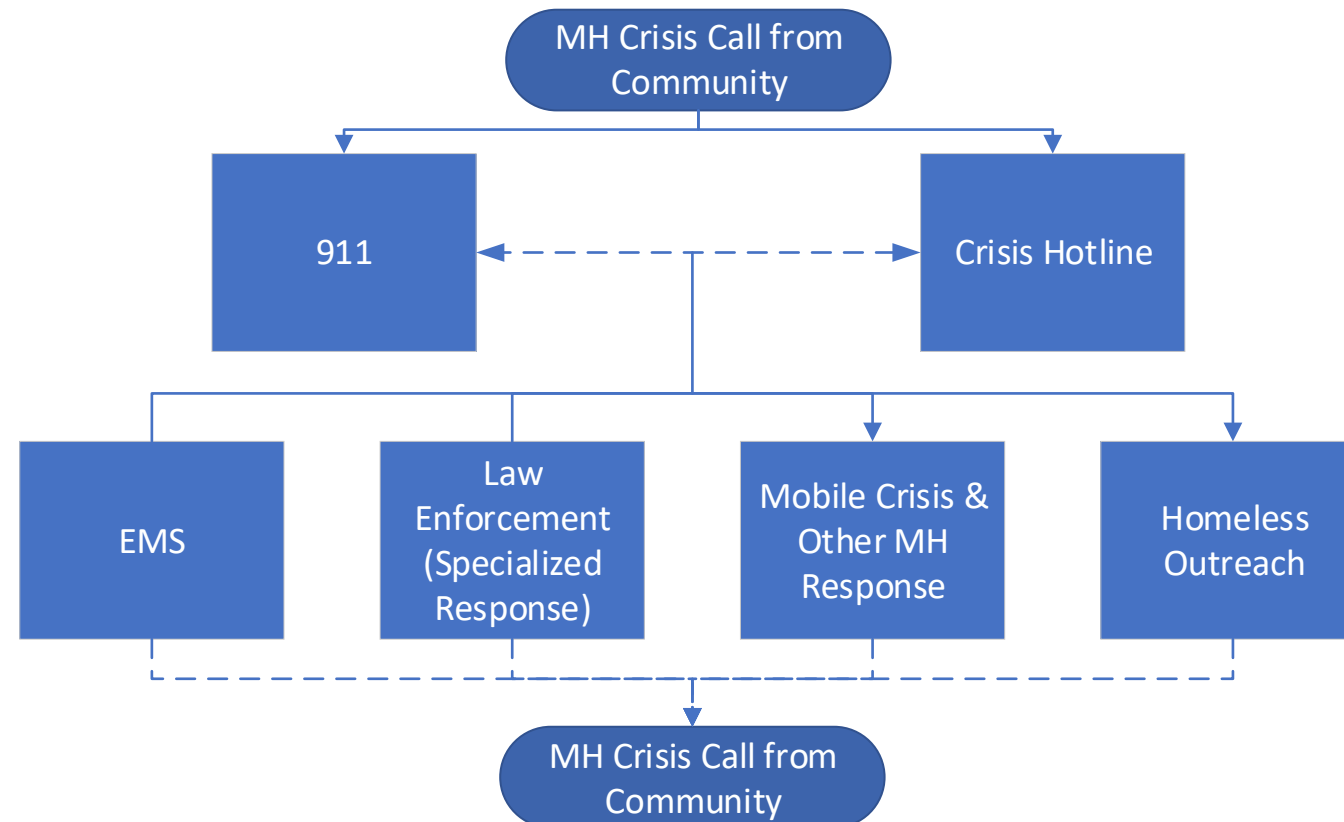
Deploy “Right” Service

- Match response to need

Crisis Call: Case Example



Crisis Call: Case Example



Response

- Decrease burden on police/EMS
- Expand health-only response
- Trauma-informed interventions
- Use information and technology



Police/mental health co-responder models



Crisis Intervention Teams



Call diversion to health/community response



Tech solutions

- Real-time info & Telehealth



Alternative transportation approaches

Response: Case Examples

ETHAN (Emergency TeleHealth and Navigation), Houston, TX

- Connects EMTs to medical services
- Can arrange taxi service for transportation, in lieu of ambulance to ED

RideAlong App (Seattle, WA)

- Contains Crisis Response Plans and Core Profiles
- Gives officers personalized service referral options



Post-crisis

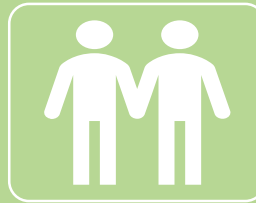
- Diversify stabilization options
- Rapid access to services
- On-going supports
- Use data better/track trends
- Focus on high utilizers



Hospital Discharge:
Critical time intervention support



Focus on complex care individuals
with high utilization

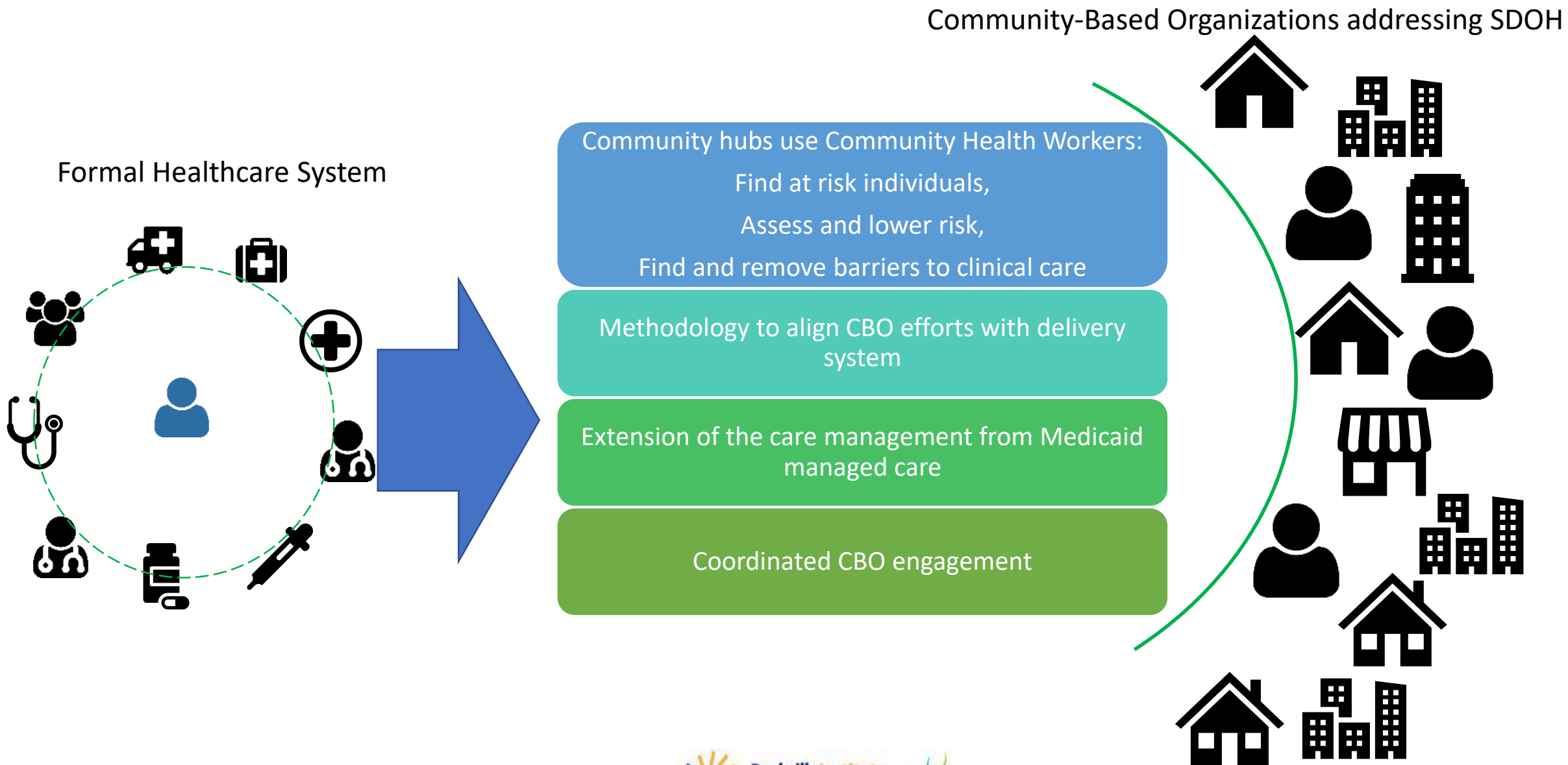


Connect to care management



Community/Peer supports

POST-CRISIS CASE EXAMPLE



Real-time

- Data sources
- Data owners
- Information transfer
- Key partnerships

What information is available?

Who has the information?

What information is useful to make decisions or improve interactions?

Can they share the information? And who can they share it with?

How can you share the information?

How quickly can you share the information?

System Surveillance

- Data sources
- Data owners
- Information transfer
- Key partnerships

Key success metrics

Data collection

Data and info sharing

Drive system re-design from lens of best addressing from need rather than funding availability and source

Blended/Varied Funding streams is a reality today for sustainability

Future advocacy needed for dedicated funding structure to support crisis systems

Current Sources

Federal grants

State and local funding through RFP or contracts

Medicaid benefit package

Medicaid waivers

Private insurance

Private grants

Self-pay

■ CRISIS SYSTEM FUNDING CHALLENGES

- + No dedicated and reliable national funding structure for crisis services
- + Blended funding can be complicated and burdensome
- + Medicaid and fee for services do not support key infrastructure
- + Trend of states moving funding from state aid into Medicaid creates risks
- + Medicare & private insurance are not payers
- + Uninsured and uninsurable

TAKEAWAYS



- + Increasing “costs” in our systems
- + Crisis Systems need integration
- + Dream big, be realistic
- + Funding needs to align and support integrated system
- + Cross-sector stakeholders
- + Communities are key partner in BH crisis systems
- + Technology solutions
- + Data and information must drive system performance
- + Opportunity awaits with careful planning

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