



**MOBILE CRISIS
INTERVENTION SERVICES**

EMPS Mobile Crisis 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)

Quarter 2 Report: Fiscal Year 2017

October 1 – December 31, 2016

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



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Executive Summary

Introduction: Starting in Q2 FY2016, Mobile Crisis PIC has restructured quarterly reports to incorporate DSM-V data and a Results Based Accountability (RBA) report card to enhance the capacity for DCF and statewide stakeholders to monitor quality assurance of the Mobile Crisis program.

Call and Episode Volume: In the second quarter of FY2017, **211 received 4,811 calls** including 3,502 calls (72.8%) handled by Mobile Crisis providers and 1,309 calls (27.2%) handled by 211 (e.g., calls for other information or resources, calls transferred to 911). Of the 3,490 calls, 3,373 (92.9%) were received during regular hours, and 117 (7.0%) were handled after hours. When compared to the same quarter in FY2016, this quarter had a increase in both call volume (5.6%) and total episodes (3.0%). In FY2016, there was a total volume of 4,556 calls and 3,388 episodes.

Among the **3,490 episodes of care** generated in Q2 FY17, episode volume ranged from 407 episodes including After Hours calls (Eastern service area) to 958 episodes including After Hours calls (Hartford service area). Relative to the population of children in each service area, the statewide average service reach rate per 1,000 children this quarter was 4.29, with service area rates ranging from 2.98 (Southwestern) to 6.07 (Hartford). 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 7.29 per 1,000 children in poverty, with service area rates ranging from 5.82 (Western) to 10.34 (Eastern).

Each quarter, every Mobile Crisis site is required to achieve an overall service reach rate of 2.5 episodes per 1,000 children. For this quarter, 12 providers met this benchmark.

Demographics: Statewide this quarter, Mobile Crisis served more boys (54.5%) than girls (45.5%). Approximately **31% of youth served were 13-15 years old**, 28.0% were 9-12 years old, 22.5% were 16-18 years old, and 13.7% were 6-8 years old. One-third (**33.4%**) of youth served were of Hispanic ethnicity. The majority of the children served were Caucasian (**63%**), 24.1% were African-American or Black, 12% reported "Other Race." The majority of youth were insured by Husky A (63.9%) and private insurance (28.4%). The majority of clients (84.5%) were not DCF-involved.

Clinical Functioning: The most commonly reported primary presenting problems for clients statewide include: Harm/Risk of Harm to Self (27%), Disruptive Behavior (27%), Depression (13%), Harm/Risk of Harm to Others (8%), Anxiety (7%), and Family Conflict (5%). The top client primary diagnoses at intake this quarter were: Depressive Disorders (27.7%), Adjustment Disorders (17.5%), Conduct Disorders (12.6%), Attention Deficit/Hyperactivity Disorders (10.9%), Anxiety Disorders (9.7%), and Trauma Disorders (7.1%). This quarter, **77% of Mobile Crisis clients statewide met the definition for Serious Emotional Disturbance (SED).**

In this quarter, the **statewide percentage of children with trauma exposure reported at intake was 60%**, with service areas ranging from 46% (Central) to 69% (Western). The most common types of trauma exposure reported at intake statewide were: Disrupted Attachment/Multiple Placements (27%), Witnessing Violence (23%), Other (22%), Victim of Violence (16%), and Sexual Victimization (12%).

The statewide rate for **the percentage of children evaluated in an Emergency Department once or more in the six months prior to a current episode of care was 17%**, a decrease from 18% in the same quarter last fiscal year. Sixteen percent of children were evaluated one or more times *during* an episode of care. The inpatient admission rate in the six months prior to Mobile Crisis referral was 9% statewide, which is the same when compared to the same quarter in FY 2016. While the admission rate to an inpatient unit during the Mobile Crisis episode of care was 6%, about 1% lower than Q2 FY 2016.

Referral Sources: Statewide, **46.2% were received from schools and 38.2% of all referrals were received from parents, families, and youth.** Emergency Departments (EDs) accounted for about 7.2% of all Mobile Crisis referrals. The remaining 8.4% of referrals came from other sources.

ED utilization of Mobile Crisis varies widely among hospitals in Connecticut. This quarter, a total of **253 Mobile Crisis referrals were received from EDs**, including 69 referrals for inpatient diversion and 192 referrals for routine follow-up. Regionally, the highest rate of ED responses, as a percentage of total responses, was observed in the Western service area (18%) and the lowest were in the Eastern and Southwestern service areas (2%). Statewide, about 7% of all Mobile Crisis episodes came from ED referrals this quarter, 1% lower than Q2 FY2016.

Mobility: The average **statewide mobility this quarter was 94.3%**, a 1.1% increase in statewide mobility compared to the Q2 FY16 (Police referrals are excluded from mobility calculations). All six service areas met the benchmark of 90% this quarter. Mobility rates

among service areas ranged from 92.4% (Eastern) to 95.6% (Western). The range in mobility percentages narrowed among individual providers, from 90% (UCFS-EMPS:NE and Well-EMPS:Danbry) to 97% (Well-EMPS:Wtby). Of these providers, all either reached or surpassed the 90% benchmark.

Response Time: Statewide this quarter, **87% of mobile episodes received a face-to-face response in 45 minutes or less**. Performance on this indicator ranged from 80% (Western) to 93% (New Haven) with all six service areas having met the 80% benchmark. Across the state, 12 of the 14 providers met the same benchmark. In addition, the statewide median response time this quarter was 27 minutes, with all six service areas demonstrating a median response time of 29 minutes or less. These data suggest that Mobile Crisis service providers offer timely responses to crises in the community.

Length of Stay: Among discharged episodes statewide this quarter, 16% of Phone Only episodes exceeded one day, 36% of Face-to-face episodes exceeded five days, and **7% of Plus Stabilization Follow-up episodes exceeded 45 days**, a rate that did not meet the statewide benchmark (less than 5%). The statewide median LOS among discharged episodes was 0 days for Phone Only, 3.0 days for Face-to-face episodes, and 19.0 days for Plus Stabilization.

Statewide, the median Length of Stay (LOS) for open episodes of care with a Crisis Response of Phone Only was 99 days and ranged from 0 days (Eastern and New Haven) to 104 days (Western). The statewide median LOS for Face-to-face was 86 days and ranged from 0 days (Eastern) to 91 days (Hartford). For Plus Stabilization Follow-up, the statewide median LOS was 89 days with a range from 76.5 days (Eastern) to 111.5 days (Central). This tells us that families remain open for services beyond the benchmarks for each crisis response category. Cases that remain open for services for long periods of time can impact responsiveness as call volume continues to increase, and can compromise accurate and timely data entry practices.

Discharge Information: The overwhelming **majority of clients lived in a private residence at discharge from Mobile Crisis (97.3%)**. Statewide, the **top three reasons for client discharge** were: Met Treatment Goals (70.4%), Family Discontinued (20.6%), and Client Hospitalized: Psychiatrically (5.3%).

Statewide, clients were most likely to be **referred to Outpatient Services at discharge (44.5%)**. Other care referrals at discharge included: Intensive Outpatient Program (9.3%), Other: Community Based (6.5%), Inpatient Hospital (4.4%), Partial Hospital Program (3.1%), and Intensive In-Home Services (3.0%). An additional 24.2% of clients indicated "none" for discharge referrals, a category that includes referrals back to an existing provider.

Across the state, Ohio Scales showed overall decline of -0.52 points on parent-rated functioning but 1.45 points increase on worker-rated functioning. Decreases in problem scores of 0.92 points on parent-ratings and 1.99 points on worker-ratings were reported. Changes on the statewide Ohio Scales scores were statistically significant. Furthermore, parents and workers reported clinically meaningful decreases to youths' problem severity and improvement to youths' functioning. These findings suggest that Mobile Crisis may contribute to symptom improvement during the course of the brief intervention.

Completion rates collected at intake and discharge decreased when compared to the same quarter in FY2016. Worker problem and functioning at intake by 10% while at discharge both decreased by 1%. Parent problem severity and functioning scores at intake also decrease by 12% and 13%, respectively; while both parent scales decreased by 2% at discharge when compared to Q2 FY16.

Satisfaction: This quarter, 60 clients/families and 60 other referrers responded to the satisfaction survey; both groups gave favorable ratings to 211 and Mobile Crisis services. On a 5-point scale, **clients' average ratings of 211 and Mobile Crisis providers were 4.83 and 4.81**, respectively. Among **other referrers (e.g. schools, hospitals, DCF, etc.)**, the **average ratings of 211 and Mobile Crisis were 4.83 and 4.75**, respectively. Qualitative comments (see Section IX) varied from very satisfied to minor dissatisfaction.

Training Attendance: The **statewide average percentage of trainings completed by all active staff as of December 31, 2016 is 14%**. The percentage of trainings completed increased when compared to Q2 FY16 (2%).

Community Outreach: Outreach numbers ranged from 0 (Wheeler-EMPS:Htfd, Wheeler-EMPS:Meridn, Well-EMPS:Dnby, and Well-EMPS:Torr) to 10 (CHR-EMPS and UCFS-EMPS:NE).

Section I: SFY 2017 Q2 RBA Report Card: Mobile Crisis Intervention Services

Quality of Life Result: Connecticut’s children will live in stable environments, safe, healthy and ready to lead successful lives.

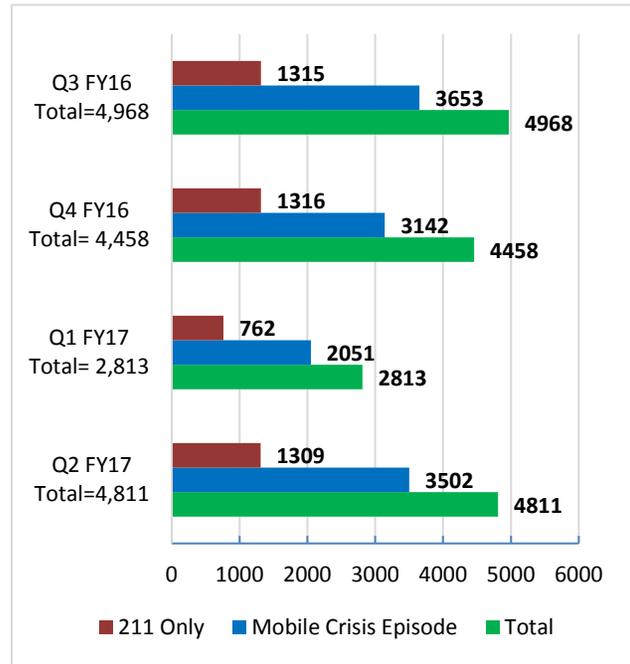
Contribution to the Result: EMPS Mobile Crisis Intervention Services are available for all Connecticut children and adolescents experiencing a mental health or behavioral crisis. Mobile crisis directly contributes to the result since it supports maintaining the safety and functional stability of children in the home and community. This is done through a rapid face to face crisis response with follow-up involvement and referral to community services as needed. The mobile crisis services provide an alternative, community based intervention, to youth visits to hospital emergency rooms, inpatient hospitalizations and police calls that could remove them from their home and potentially negatively impact their growth and success.

Program Expenditures: Estimated SFY 2017

State Funding: \$10,743,631

How Much Did We Do?

Total Call and Episode Volume



Story Behind the Baseline: In SFY 2017 Q2 there were 4,811 total calls to the 211 Call Center, which was a 5.6% increase in call volume compared to SFY 2016 Q2. Also the number of Mobile Crisis episodes was 3.4% higher in SFY 2017 Q2 than in SFY 2016 Q2. The differences in total calls and Mobile Crisis episodes between SFY 2017 Q1 and Q2 reflect seasonal differences seen in prior years, with a decrease in calls in Q1 when school is out. Calls for Mobile Crisis services overall continue to increase.

Trend: ↑

How Much Did We Do?

Episode per Child

	DCF Child	Non-DCF Child	Total
Q3 FY16			
1	327 (14.8%)	1886 (85.2%)	2,213
2	25 (18.9%)	107 (81.1%)	132
3	7 (20.0%)	28 (80.0%)	35
4 or more	1 (12.5%)	7 (87.5%)	8
Q4 FY16			
1	324 (17.2%)	1555 (82.8%)	1,879
2	31 (29.2%)	75 (70.8%)	106
3	4 (28.6%)	10 (71.4%)	14
4 or more	1 (20.0%)	4 (80.0%)	5
Q1 FY17			
1	194 (17.8%)	896 (82.2%)	1,090
2	27 (26.7%)	74 (73.3%)	101
3	5 (38.5%)	8 (61.5%)	13
4 or more	1 (12.5%)	7 (87.5%)	8
Q2 FY17			
1	272 (13.6%)	1721 (86.4%)	1,993
2	37 (19.3%)	155 (80.7%)	192
3	6 (28.6%)	15 (71.4%)	21
4 or more	0 (0.0%)	12 (100.0%)	12

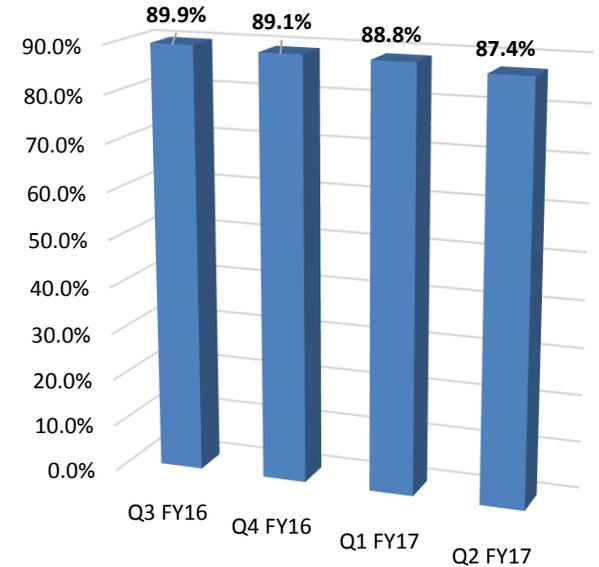
Story Behind the Baseline: In SFY 2017 Q2, of the 2,218* Mobile Crisis episodes of care 89.9% (1,993) only involved one response for a child, and 98.5% (2,185) involved one or two responses; compared to 91.6% (2,053) and 98.4% (2,206) respectively for SFY 2016 Q2. This indicates that the initial Mobile Crisis involvement with a youth and their family continues to significantly reduce the need for additional Mobile Crisis services.

*Note: Only children that had their DCF or non DCF status identified were reported.

Trend: →

How Well Did We Do?

Statewide Response Time Under 45 Minutes

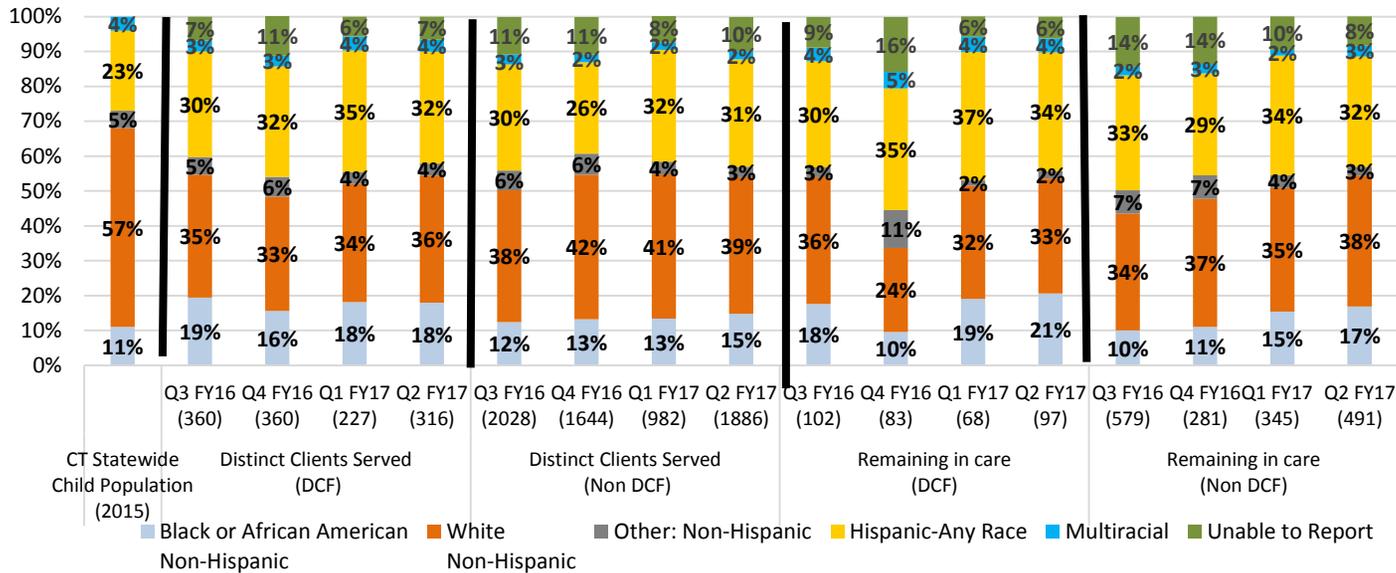


Story Behind the Baseline: Since SFY 2011 Mobile Crisis has consistently exceeded the 80% benchmark for a 45 minute or less mobile response to a crisis. In SFY 2017 Q2 87.4% of all mobile responses achieved the 45 minute mark compared to 87.3% for SFY 2016 Q2. **The median response time for SFY 2017 Q2 was 27 minutes.** This reflects a highly responsive statewide Mobile Crisis service system that is immediately present to engage and deescalate a crisis and return stability to the child and setting (family, school, etc.).

Trend: ↑

How Well Did We Do?

Race & Ethnicity of DCF & Non DCF Clients Served in SFY 2017



Story Behind the Baseline: Hispanic and Black DCF and Non-DCF involved children^{1,2} access Mobile Crisis services at rates higher than the CT general population, while white DCF and Non-DCF involved children access the service at lower rates. White Non-DCF involved children utilize Mobile Crisis at higher rates than their DCF involved counterpart. Both Hispanic and Black DCF involved children utilize Mobile Crisis at higher rates than Non-DCF children. Non-DCF involved white children had the highest rates for remaining in care³ at the end of SFY 2017 Q2.³Note: Only children that had their DCF or non DCF status identified were reported. ²Note: For the Distinct Clients served some had multiple episodes as identified above in Episodes per Child. ³Note: Remaining in Care represents an open Mobile Crisis episode at the end of the respective quarter.

Trend: →

Is Anyone Better Off?

% Clinically Meaningful Change For Statewide Ohio Scale Scores

	Q3 FY16	Q4 FY16	Q1 FY17	Q2 FY17
Statewide Ohio Scale Scores (based on paired intake and discharge scores)	† .05-.10 * P < .05 **P < 0.01			
Parent Functioning	17.0% (n=47)*	4.1% (n=49)†	12.5% (n=32)	3.1%(n=65)
Worker Functioning	7.0% (n=604)**	8.5% (n=578) **	7.8% (n=307)**	7.2%(n=614)**
Parent Problem Severity	15.6% (n=45)	12.2% (n=49) †	15.6% (n=32)**	6.3% (n=64)
Worker Problem Severity	7.3% (n=603)**	10.0% (n=573)**	10.4% (n=307)**	7.6% (n=608)**
Total N	1299	1249	678	1351

Story Behind the Baseline: The Ohio Youth Problems, Functioning, and Satisfaction Scales (Ohio Scales) has demonstrated clinically significant positive changes for children following a Mobile Crisis response. The parent ratings for SFY 2017 Q2 showed an average 3.1% improvement in child functioning and 6.3% decline in child problem severity following Mobile Crisis involvement. This represents overall decreases in parent ratings compared to previous quarters. The 2017 Q2 worker ratings for both functioning and problem severity were also lower than the previous quarter, but slightly higher than the same quarter in 2016. Despite the variability between quarters and the relative short time of service engagement by Mobile Crisis the Ohio Scales reflect the continued effectiveness of Mobile Crisis services in diffusing the immediate crisis and supporting the subsequent positive growth and success of youth. (The smaller quarterly samples, where more variable scores can influence the total score, may result in greater variability in the % of Clinically Meaningful Change between quarters).

Trend: →

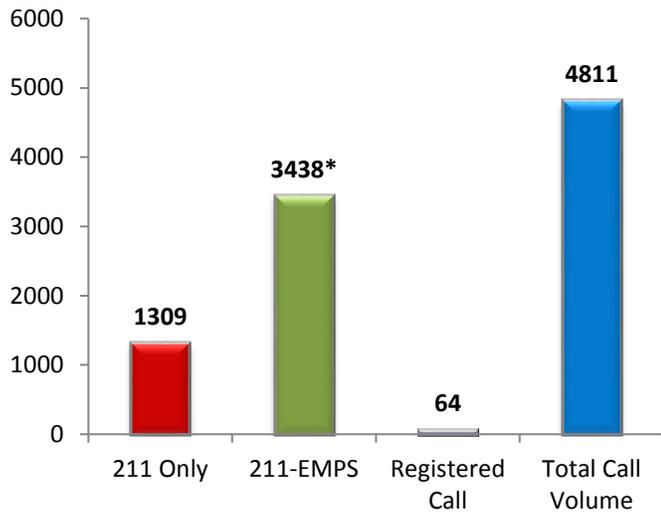
Note: Asterisk () represents statistical significance

Proposed Actions to Turn the Curve: Continue direct outreach between Mobile Crisis providers and all school districts and charter schools in their service area to complete the MOA's. Continue to develop data regarding school district and individual school utilization of mobile crisis. Continue to increase the parent completion rates for the Ohio Scales.

Data Development Agenda: Each Mobile Crisis provider now receives an RBA report card each quarter that contains the same data as this report card. The providers receive the RBA data and are responsible for providing the story for the data. Each provider's report card data and stories behind the baseline are reviewed with them during their quarterly Performance Improvement Plan meeting. Each report card review focuses on strengths and successes identified in the data as well as challenges and the steps to be taken to address them. In particular, each report card review highlights the need to understand the racial and ethnic distributions of the children served by Mobile Crisis. To support this focus we are working to include regional demographics for race and ethnicity in each provider's report card.

Section II: Mobile Crisis Statewide/Service Area Dashboard

Figure 1. Total Call Volume by Call Type



*Note: 12 Episode is a Crisis-Response follow-up

Figure 2. Total Call Volume per Quarter by Call Type

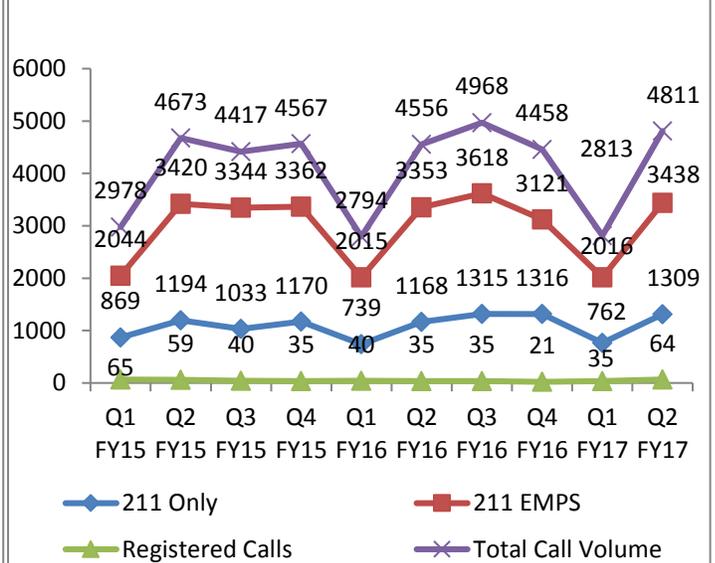
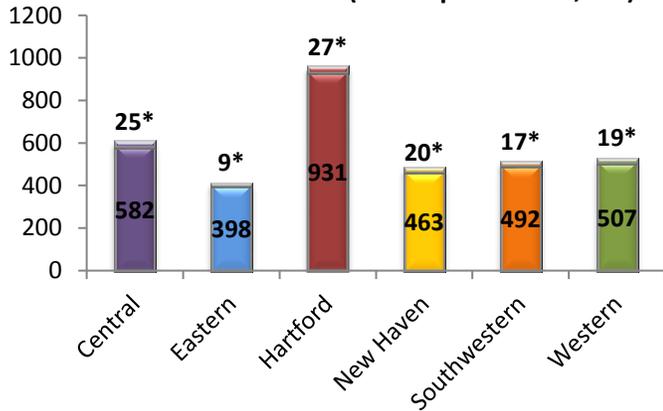


Figure 3. Mobile Crisis Response Episodes by Service Area (Total Episodes = 3,490)



*After Hours Calls

Figure 4. Mobile Crisis Episodes per Quarter by Service Area

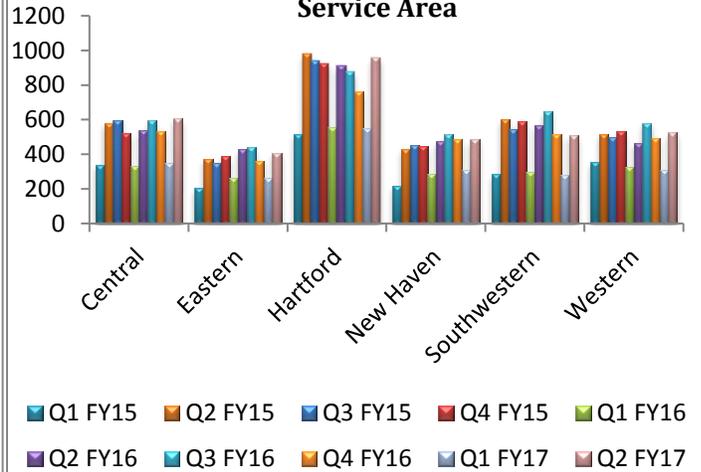


Figure 5. Number Served Per 1,000 Children (Current Quarter)

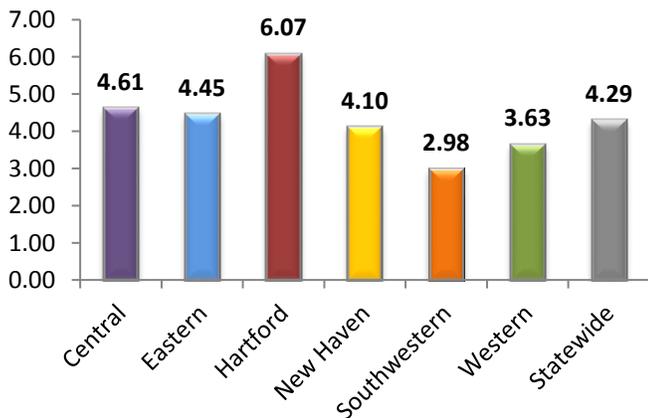


Figure 6. Number Served per 1,000 Children per Quarter by Service Area

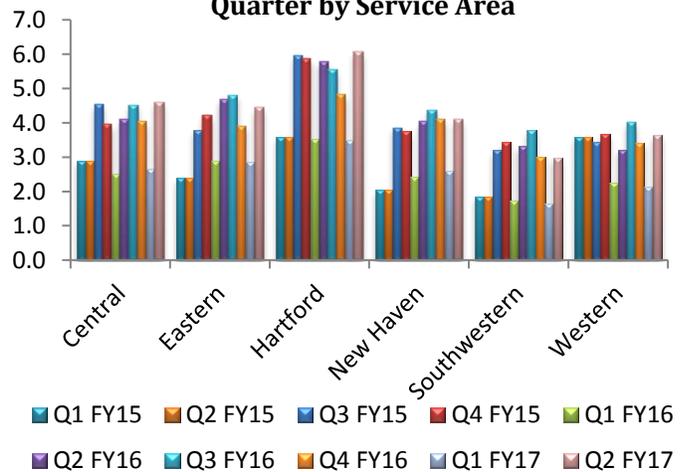


Figure 7. Number Served Per 1,000 Children in Poverty (Current Quarter)

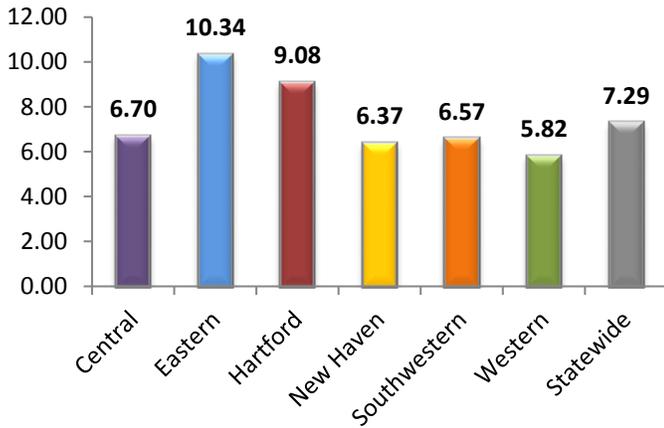


Figure 8. Number Served Per 1,000 Children in Poverty

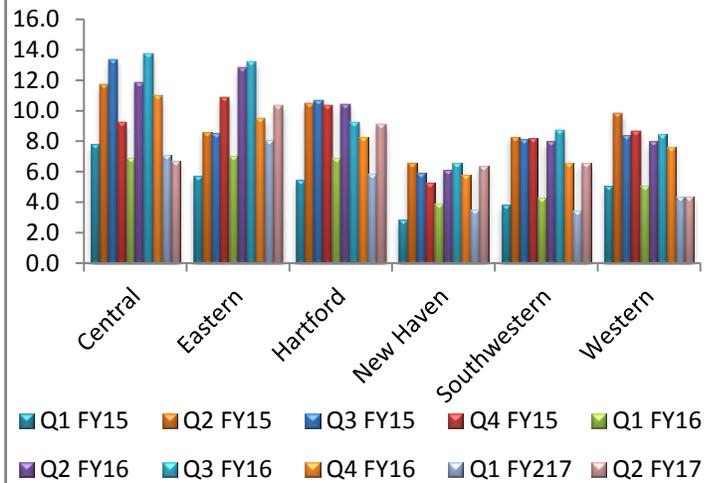


Figure 9. Mobile Response (Mobile and Deferred Mobile) by Service Area (Current Quarter)

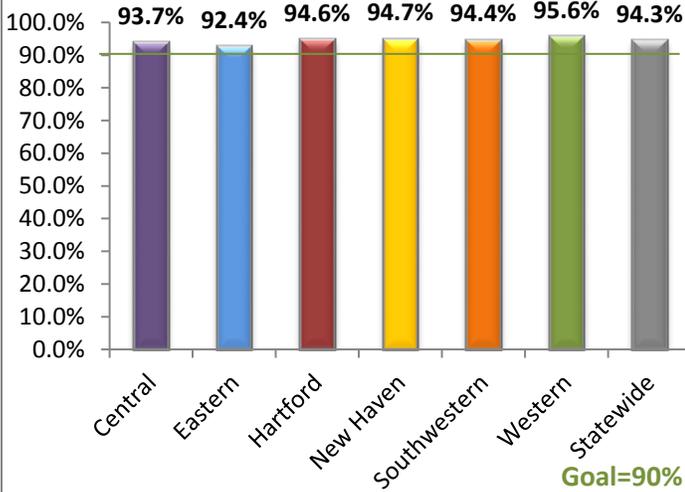


Figure 10. Mobile Response (Mobile and Deferred Mobile) by Service Area (Current Quarter)

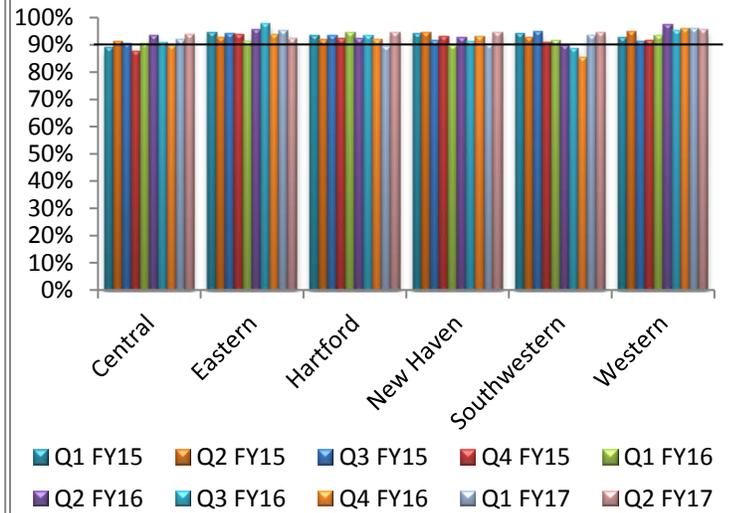


Figure 11. Total Mobile Episodes with a Response Time Under 45 Minutes (Current Quarter)

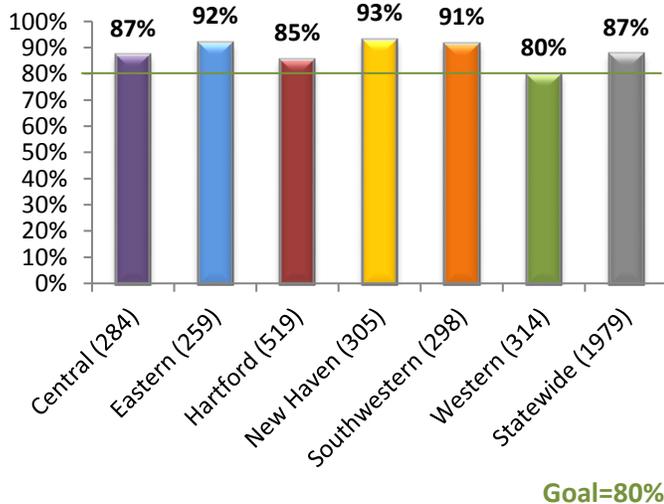


Figure 12. Total Mobile Episodes with a Response Time Under 45 Minutes per Quarter by Service Area

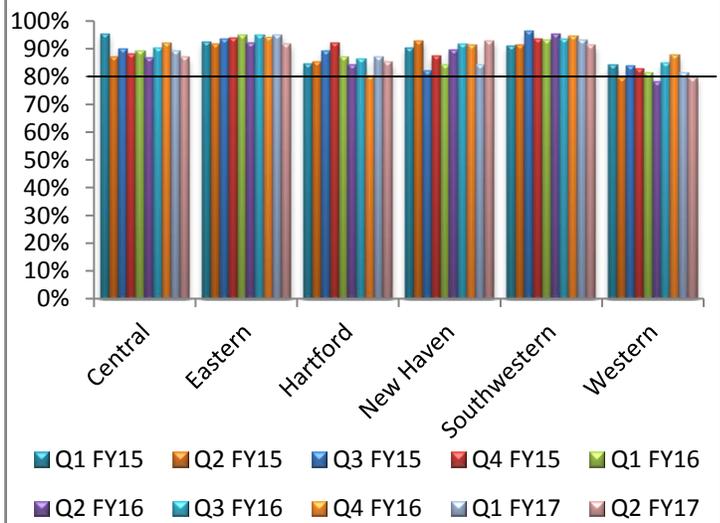
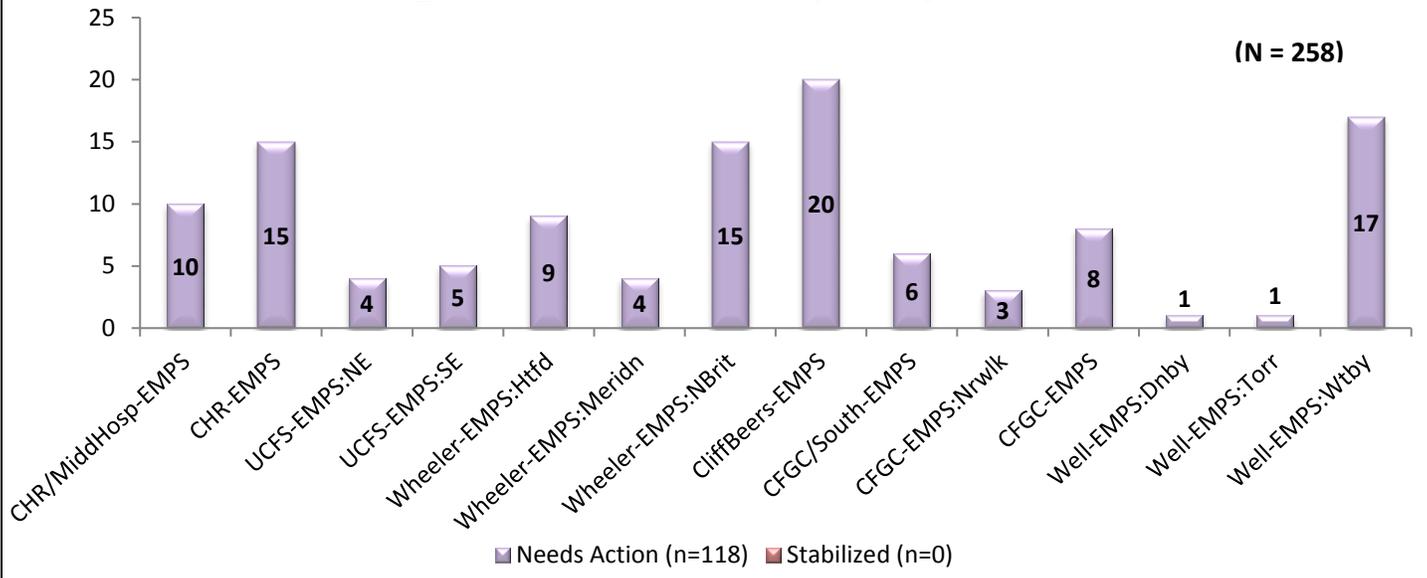


Figure 13. After Hours Follow-up Calls by Provider



Section III: Mobile Crisis Response

Figure 14. Total Call Volume by Call Type

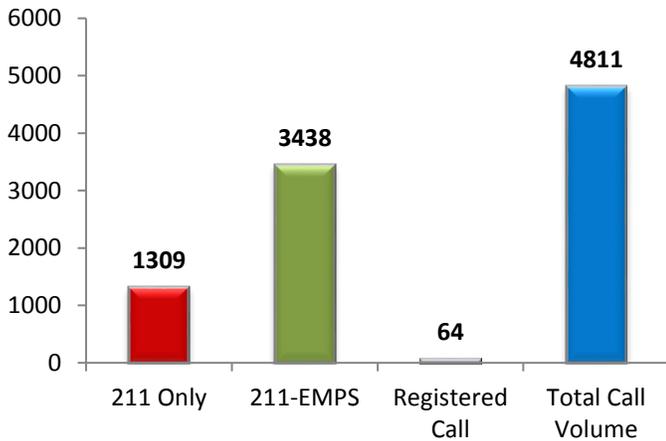


Figure 15. Statewide 211 Disposition Frequency

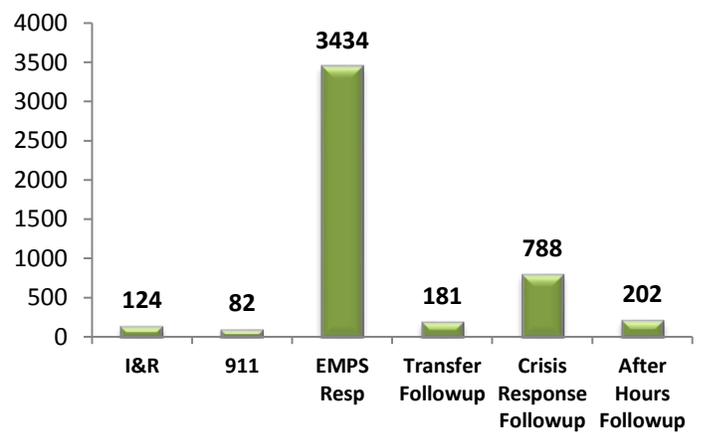


Figure 16. Mobile Crisis Response Episodes by Provider

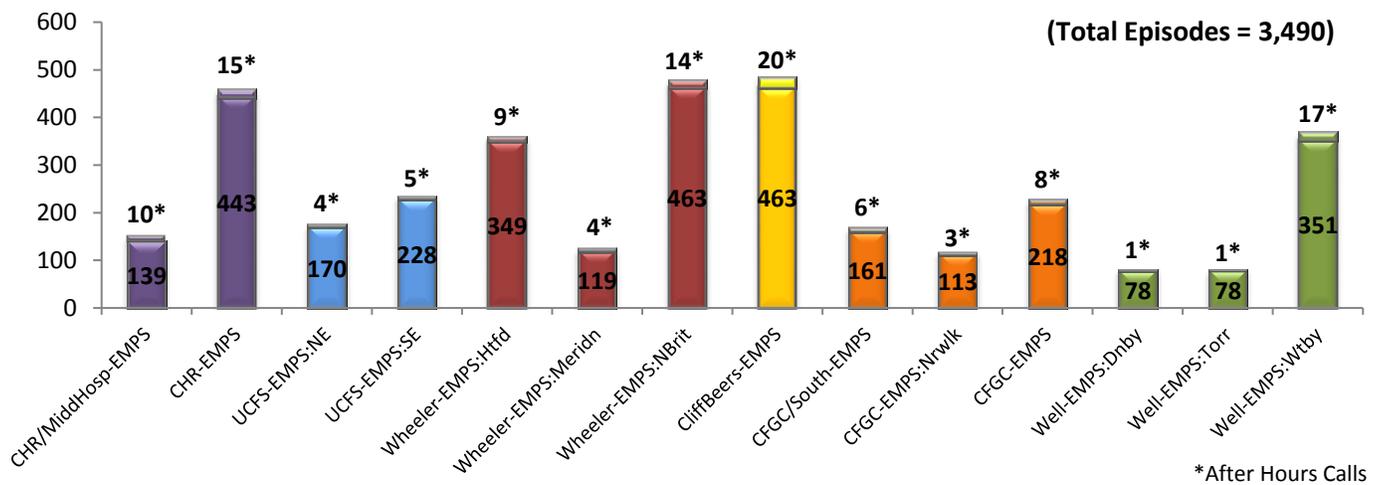


Figure 17. Number Served Per 1,000 Children by Provider (Current Quarter)

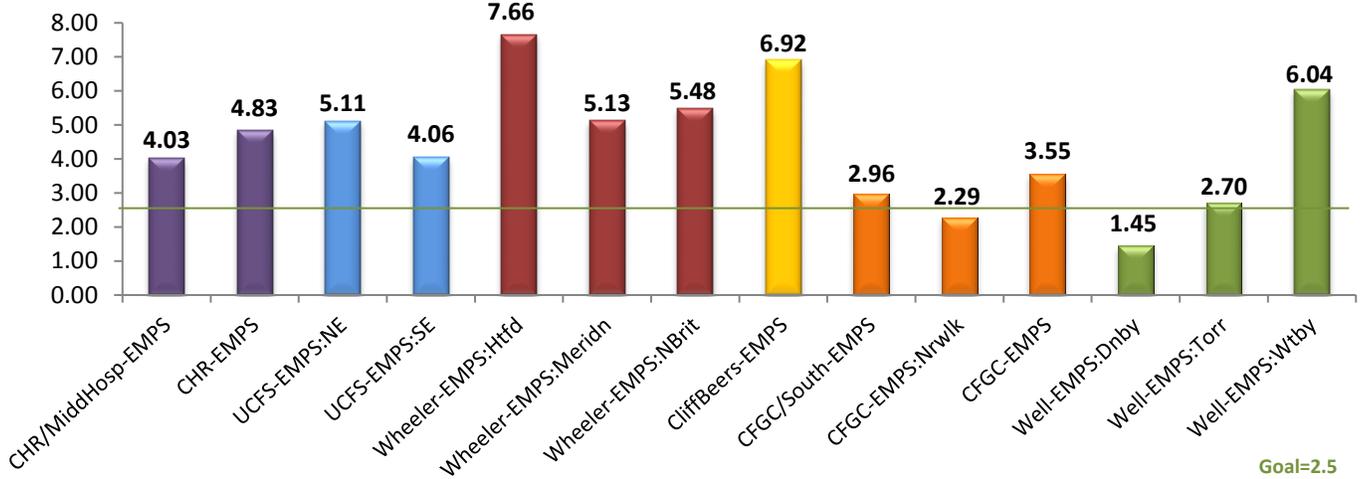


Figure 18. Episode Intervention Crisis Response Types by Service Area

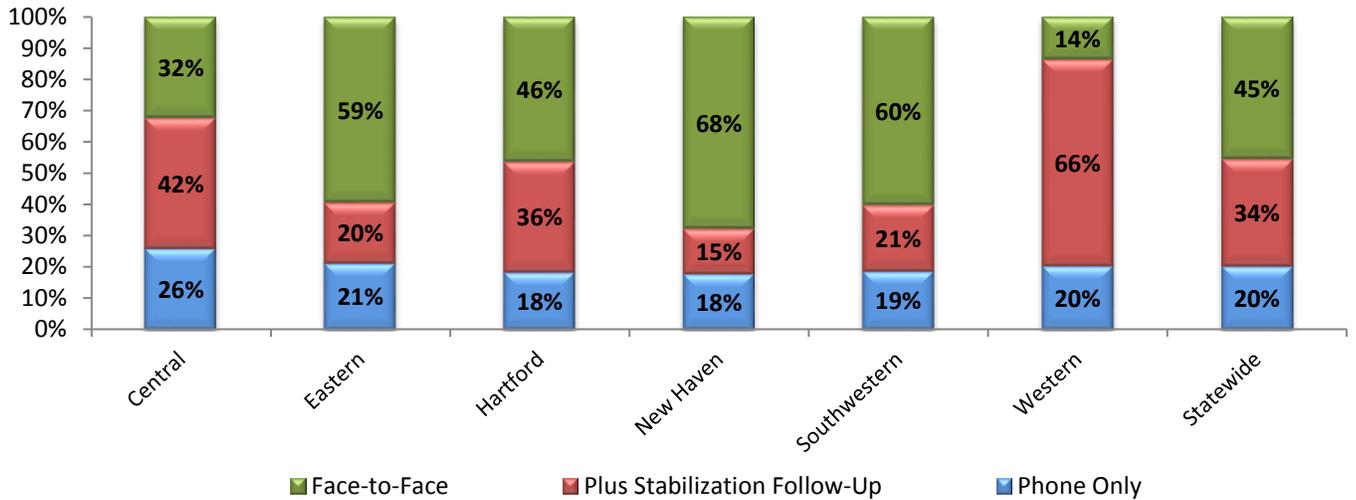
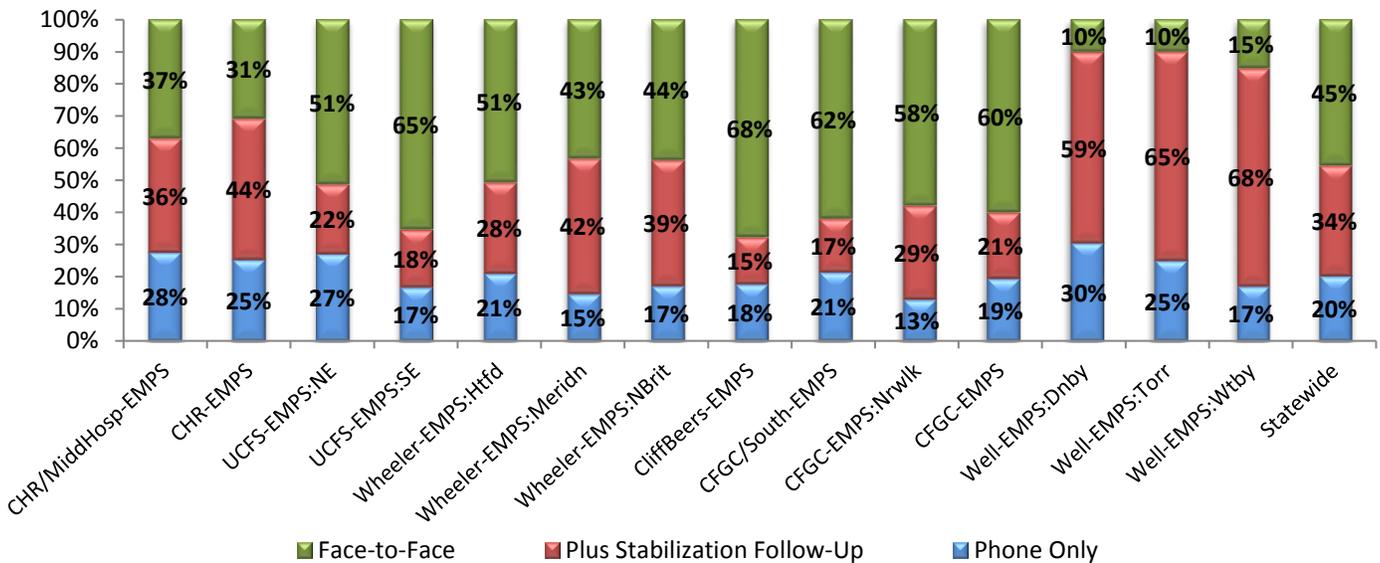


Figure 19. Episode Intervention Crisis Response Type by Provider



Section IV: Demographics

Figure 20. Gender of Children Served Statewide

(N = 3,502)

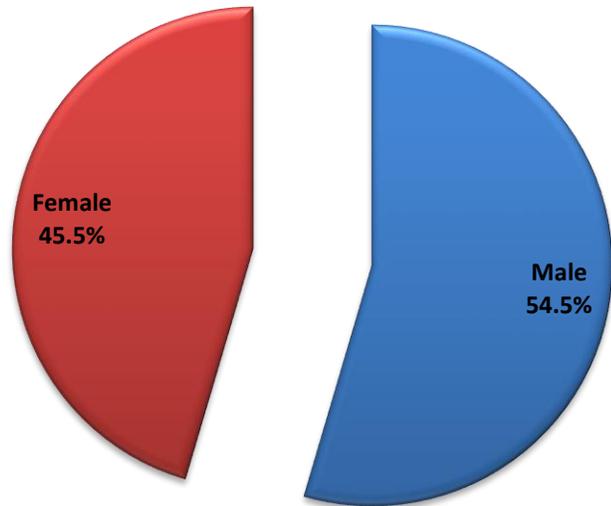


Figure 21. Age Groups of Children Served Statewide

(N = 3,502)

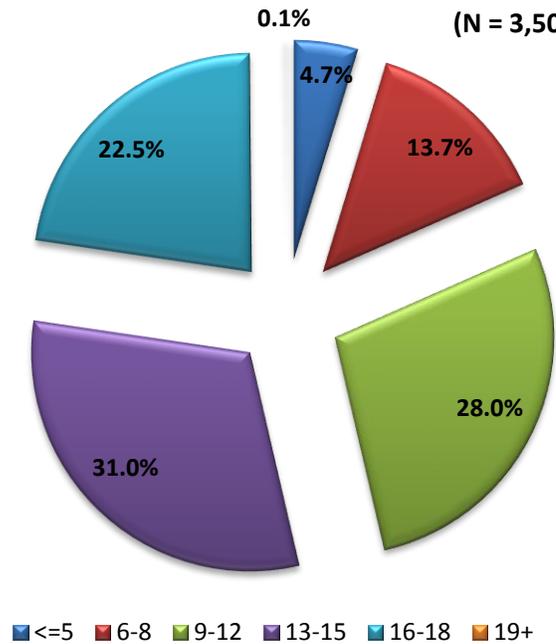


Figure 22. Ethnic Background of Children Served Statewide

(N = 3,208)

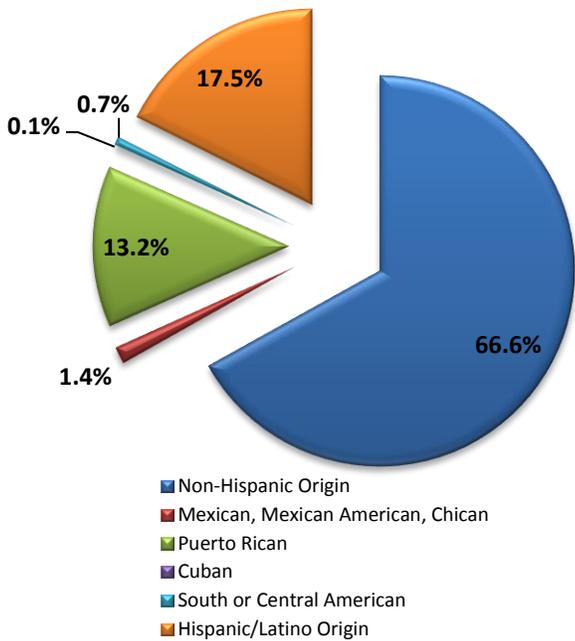
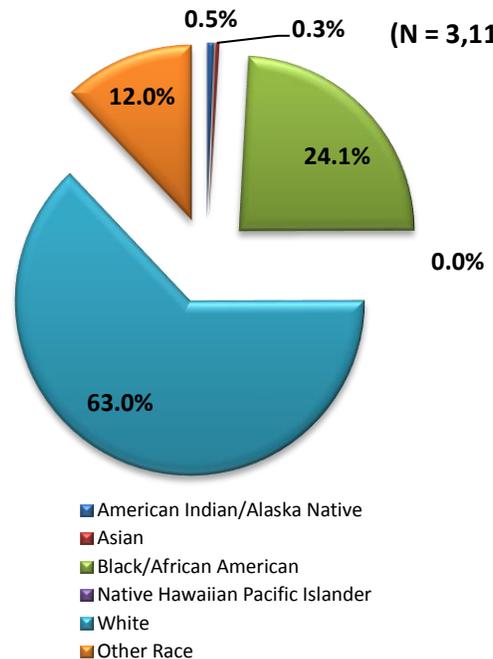


Figure 23. Race of Children Served Statewide

(N = 3,113)



Note: Clients may self-identify more than one Race.

Note: According to the U.S. Census Bureau, “[P]eople who identify their origin as Spanish, Hispanic, or Latino may be of any race...[R]ace is considered a separate concept from Hispanic origin (ethnicity) and, wherever possible, separate questions should be asked on each concept.”

Figure 24. Client's Type of Health Insurance at Intake Statewide

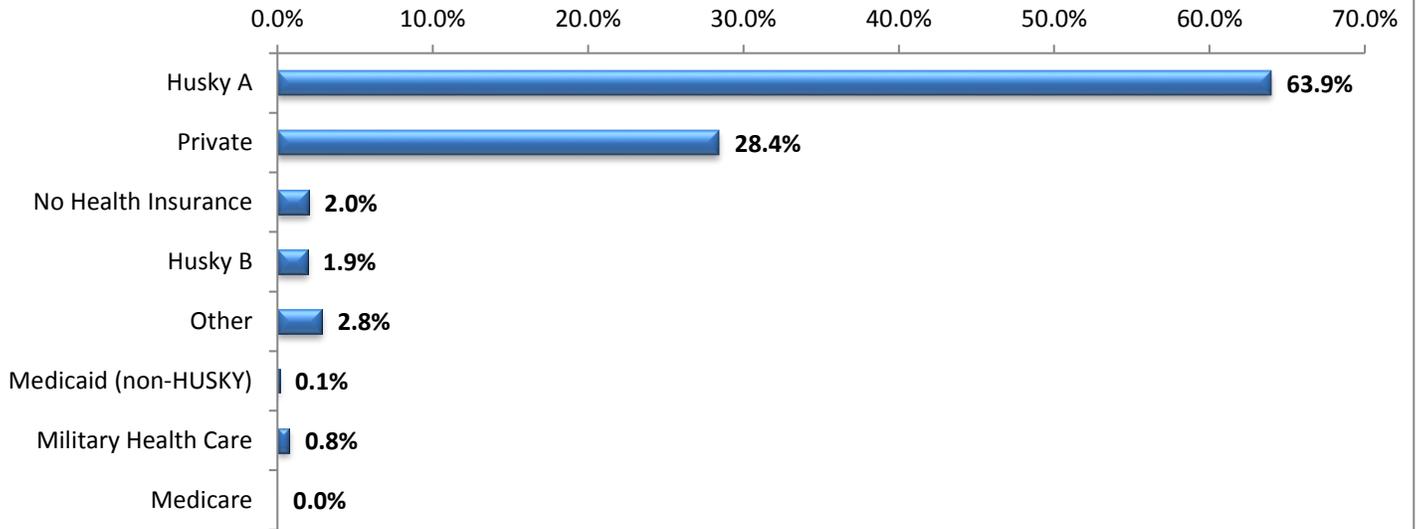
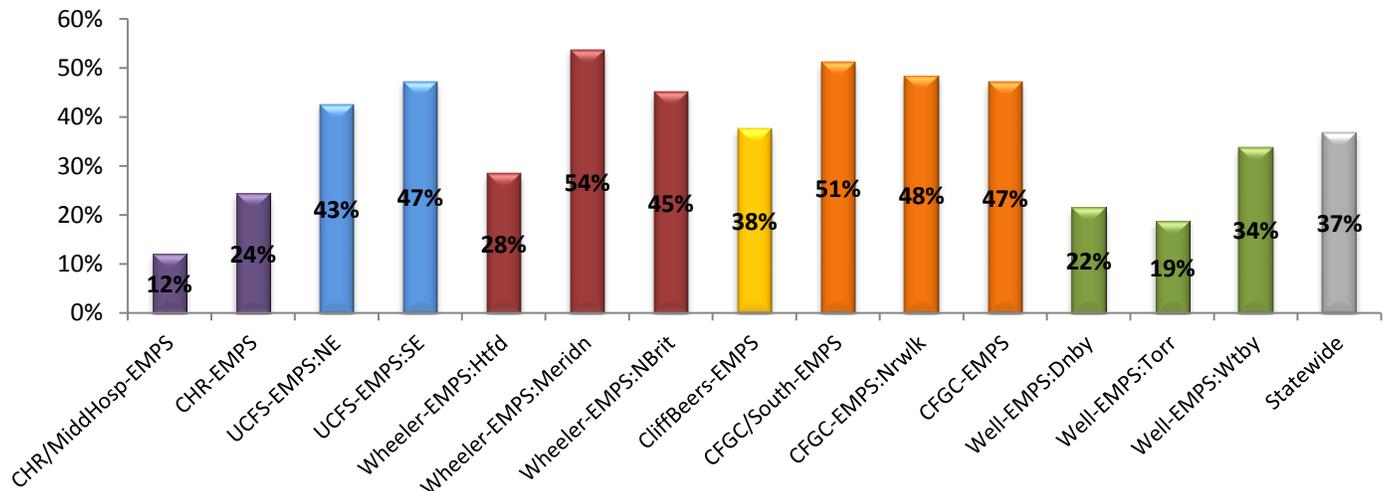
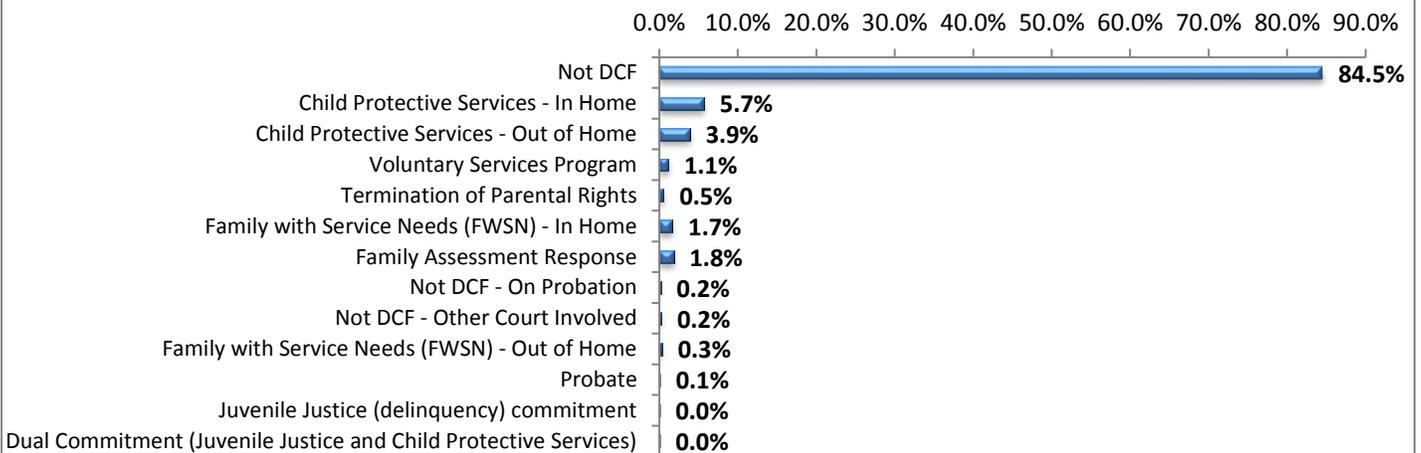


Figure 25. Families that Answered "Yes" TANF* Eligible



*TANF=Temporary Assistance for Needy Families

Figure 26. Client DCF* Status at Intake Statewide



*DCF=Department of Children and Families

Section V: Clinical Functioning

Figure 27. Top Six Client Primary Presenting Problems by Service Area

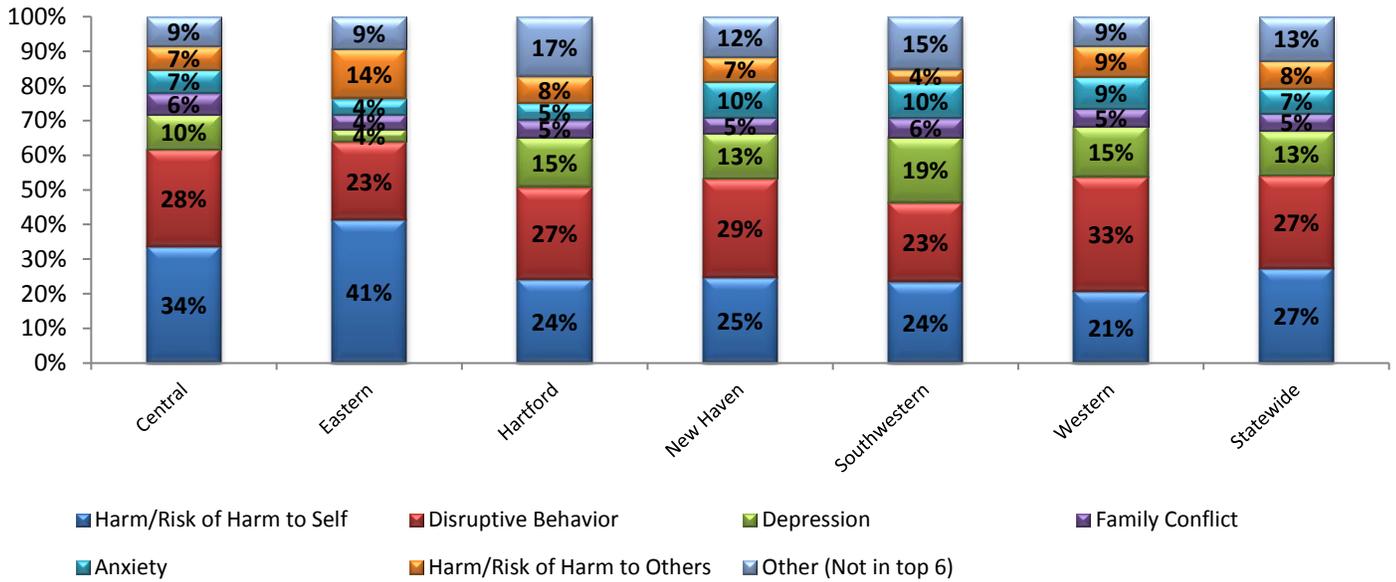
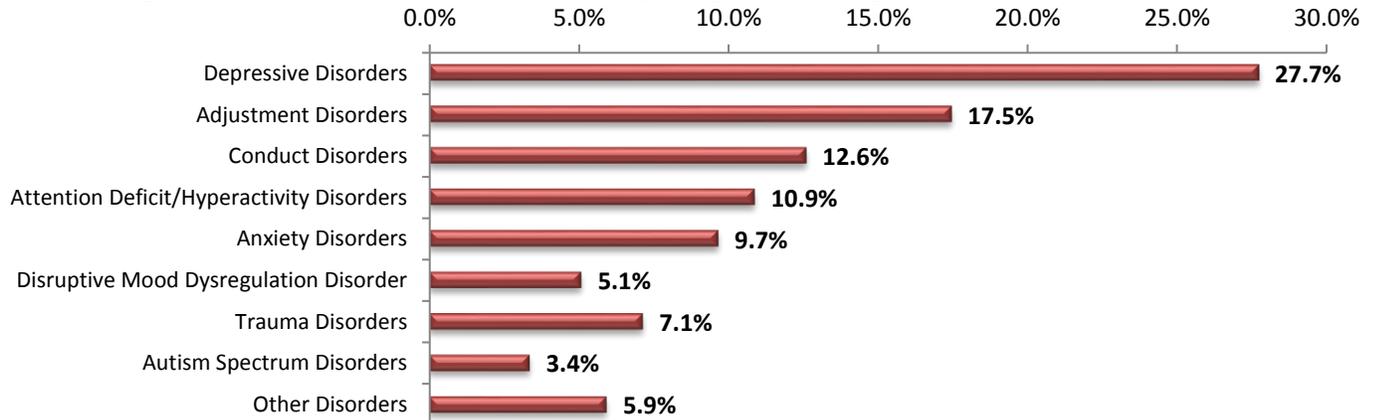
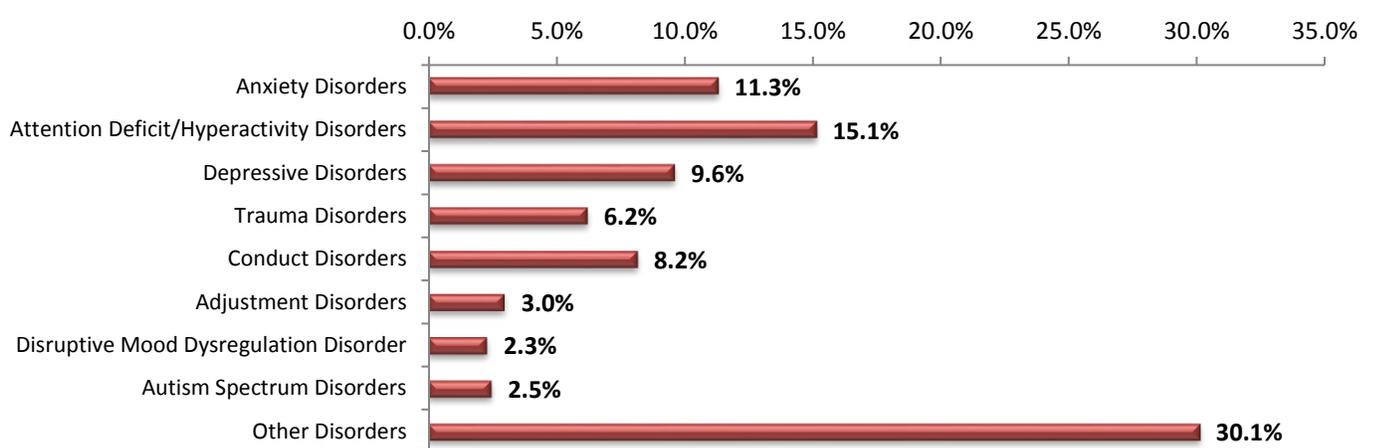


Figure 28. Distribution of Client Primary Diagnostic Categories at Intake Statewide



Note: Excludes missing data

Figure 29. Distribution of Client Secondary Diagnostic Categories at Intake Statewide



Note: Excludes missing data

Figure 30. Top 6 Client Primary Diagnostic Categories at Intake by Service Area

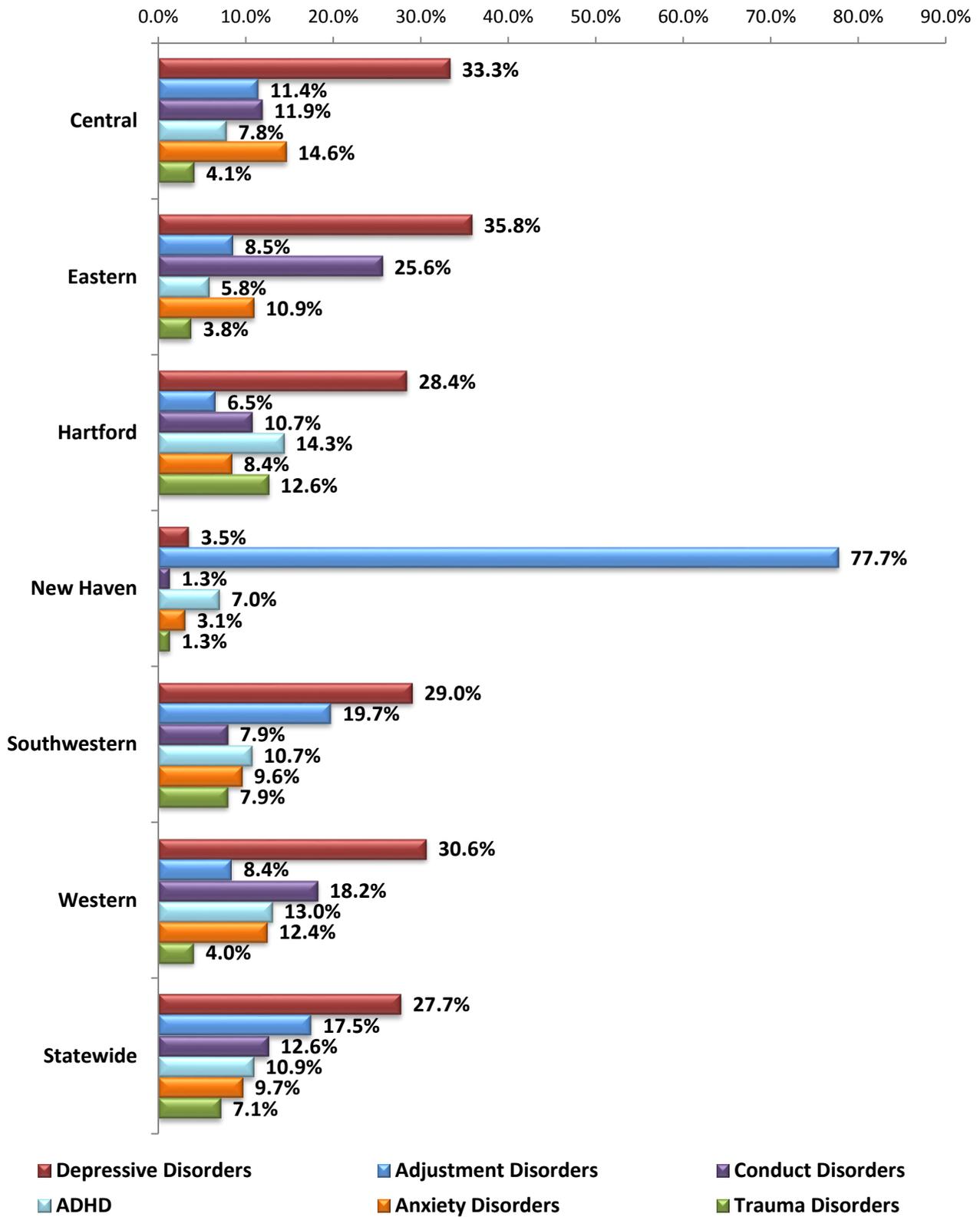


Figure 31. Top 6 Client Secondary Diagnostic Categories at Intake by Service Area

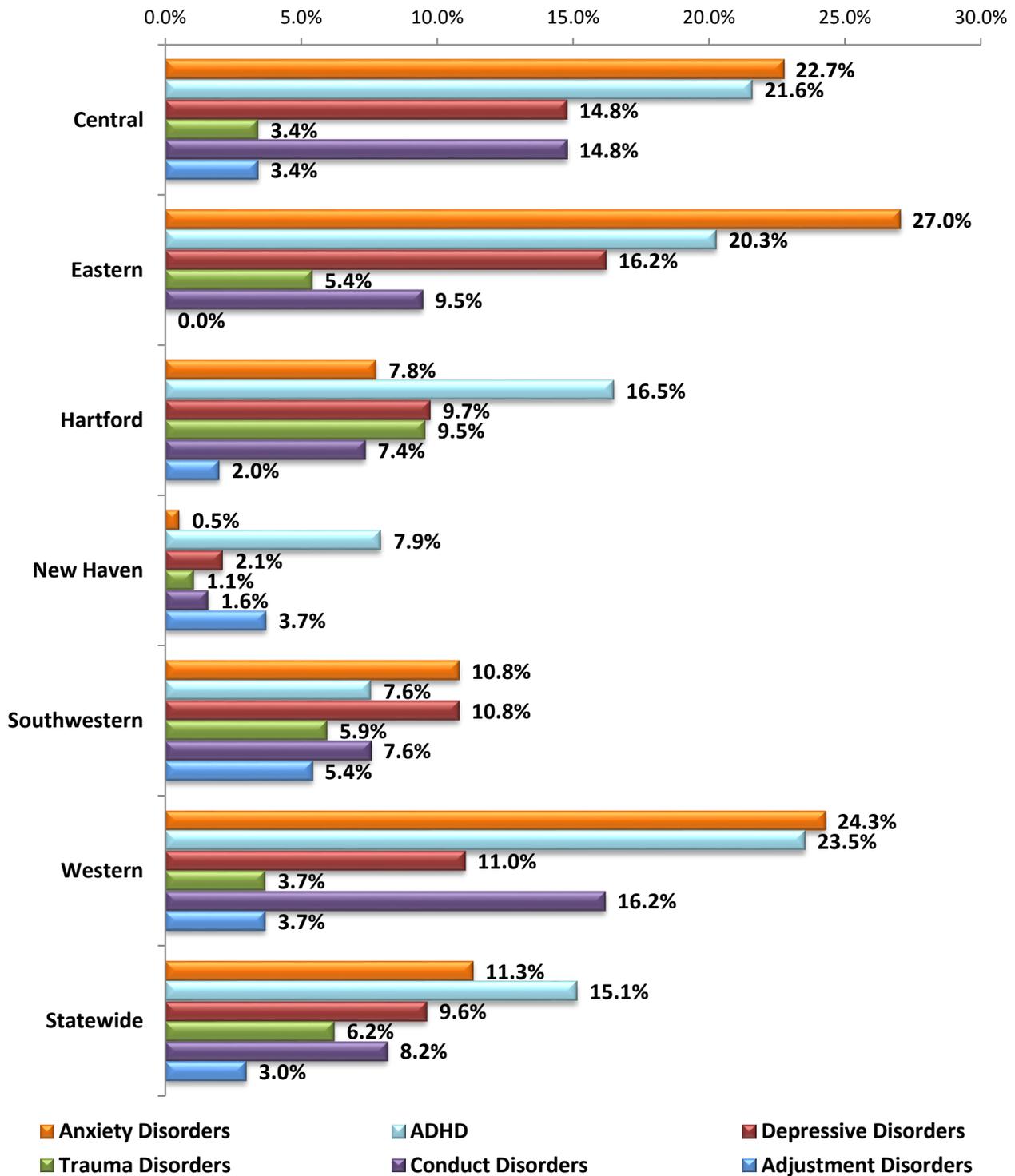


Figure 32. Children Meeting SED* Criteria by Service Area

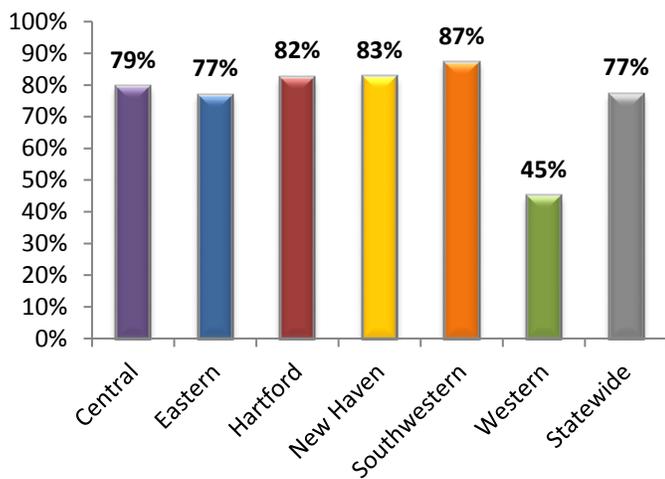


Figure 33. Children with Trauma Exposure Reported at Intake by Service Area

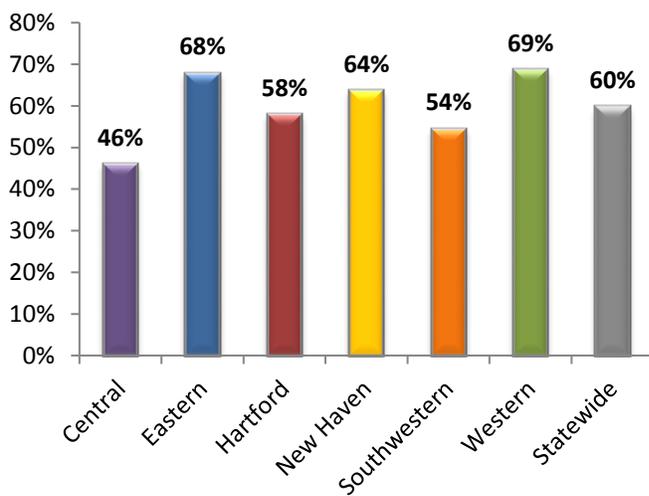


Figure 34. Type of Trauma Reported at Intake by Service Area

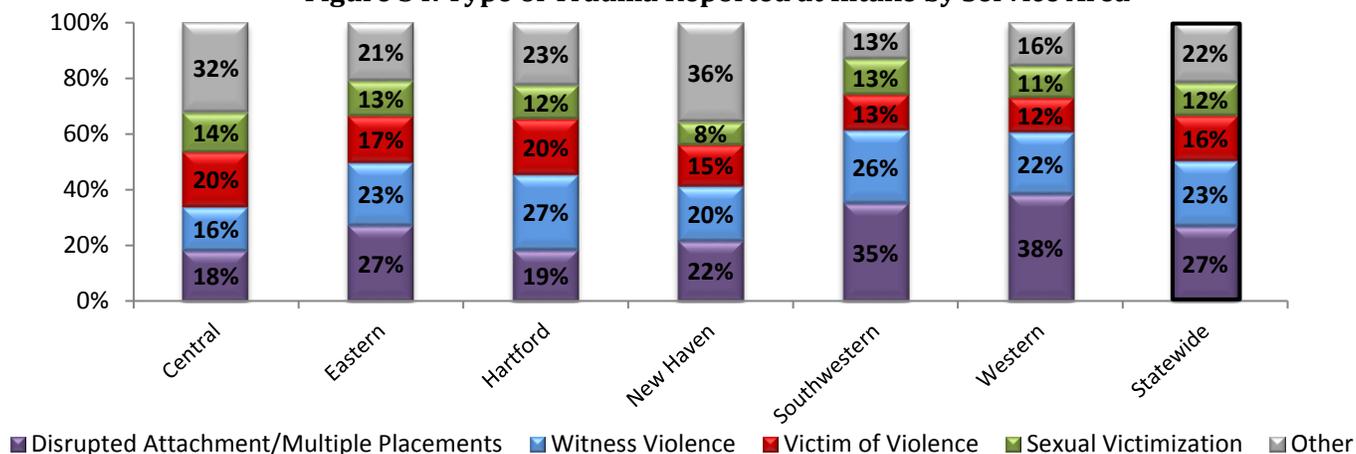


Figure 35. Clients Evaluated in an Emergency Dept. One or More Times in the Six Months Prior and During an Episode of Care

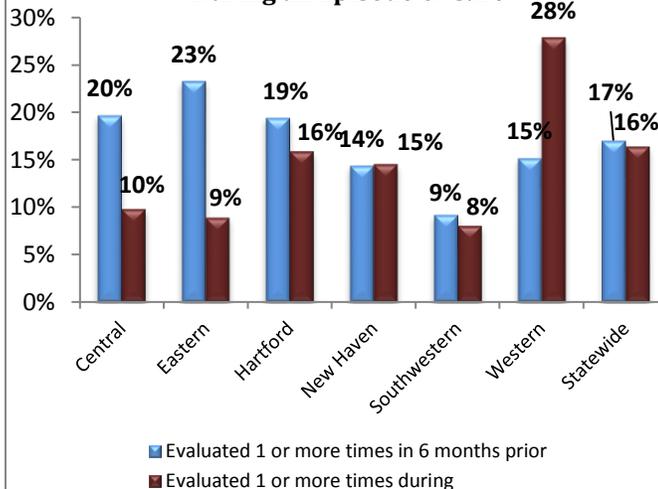
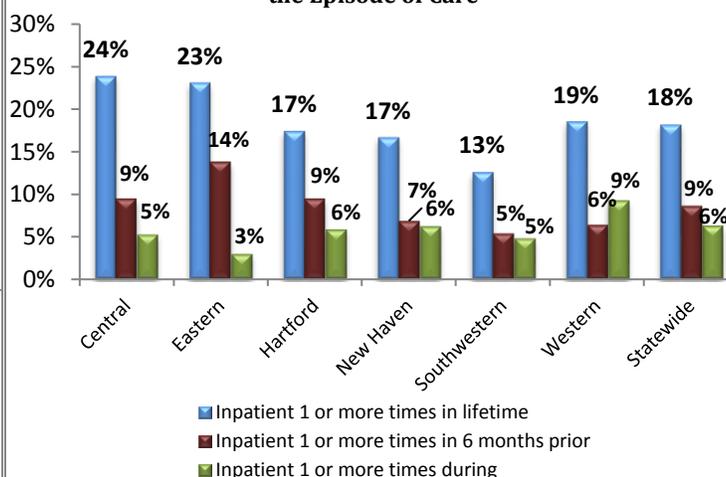


Figure 36. Clients Admitted to a Hospital (Inpatient) for Psychiatric or Behavioral Health Reasons One or More Times in His/Her Lifetime, in Six Months Prior and During the Episode of Care



Section VI: Referral Sources

Figure 37. Referral Sources Statewide (Current Quarter)

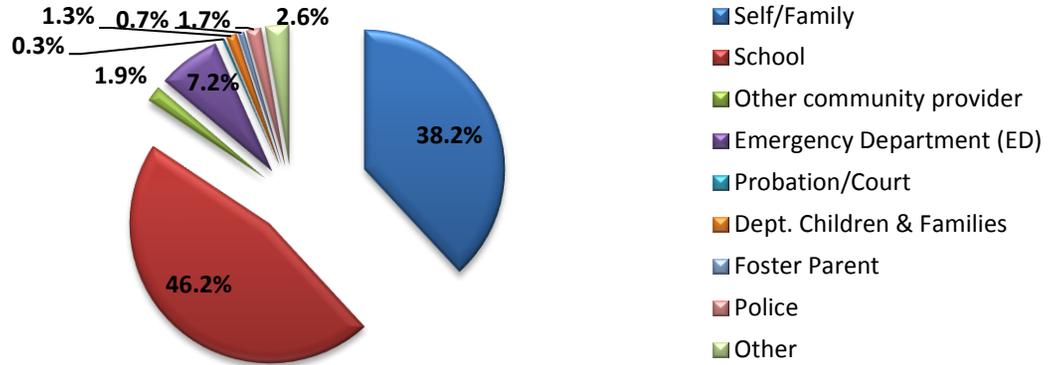
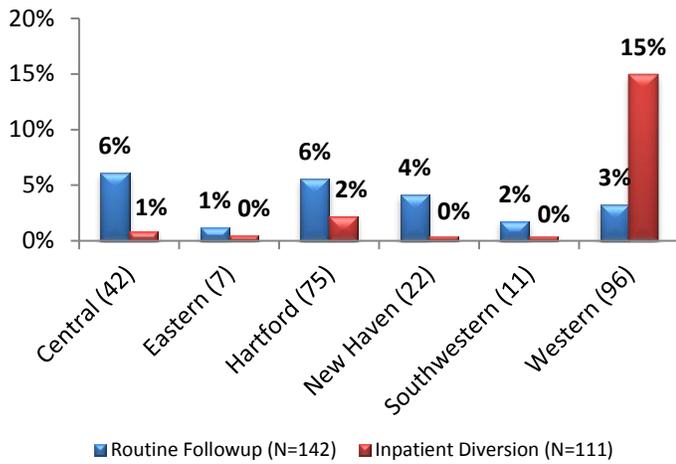


Table 1. Referral Sources (Q2 FY 2017)

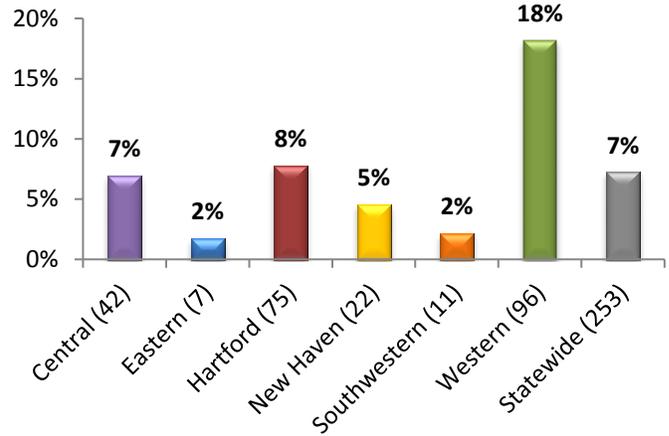
	Self/ Family	Family Adv.	School	Info- Line (211)	Other Prog. w/in Agency	Other Comm. Provider	Emer Dept. (ED)	Prob. or Court	Dept. of Child & Families (DCF)	Psych Hospital	Cong. Care Facility	Foster Parent	Police	Phys.	Comm. Nat. Supp.	Other State Agency
STATEWIDE	38.2%	0.3%	46.2%	0.0%	0.3%	1.9%	7.2%	0.3%	1.3%	1.3%	0.2%	0.7%	1.7%	0.5%	0.0%	0.0%
CENTRAL	41.3%	0.7%	34.5%	0.0%	0.3%	1.8%	6.9%	0.3%	1.3%	2.5%	0.3%	0.8%	8.6%	0.7%	0.0%	0.0%
CHR/MiddHosp-EMPS	49.0%	0.0%	37.6%	0.0%	0.7%	0.7%	9.4%	0.0%	0.7%	0.0%	0.7%	0.0%	0.0%	1.3%	0.0%	0.0%
CHR-EMPS	38.8%	0.9%	33.6%	0.0%	0.2%	2.2%	6.1%	0.4%	1.5%	3.3%	0.2%	1.1%	11.3%	0.4%	0.0%	0.0%
EASTERN	47.4%	0.2%	44.7%	0.0%	0.5%	2.0%	1.7%	0.0%	1.2%	0.2%	0.5%	0.5%	0.0%	0.7%	0.2%	0.0%
UCFS-EMPS:NE	54.0%	0.6%	39.7%	0.0%	0.6%	1.7%	1.1%	0.0%	0.6%	0.0%	0.0%	0.6%	0.0%	1.1%	0.0%	0.0%
UCFS-EMPS:SE	42.5%	0.0%	48.5%	0.0%	0.4%	2.1%	2.1%	0.0%	1.7%	0.4%	0.9%	0.4%	0.0%	0.4%	0.4%	0.0%
HARTFORD	35.1%	0.3%	47.3%	0.0%	0.5%	2.7%	7.8%	0.1%	1.6%	2.7%	0.3%	0.7%	0.1%	0.8%	0.0%	0.0%
Wheeler-EMPS:Htfd	26.8%	0.6%	51.9%	0.0%	0.6%	3.0%	9.1%	0.3%	0.6%	4.7%	0.6%	0.8%	0.3%	0.8%	0.0%	0.0%
Wheeler-EMPS:Meridn	37.4%	0.0%	51.2%	0.0%	0.8%	1.6%	5.7%	0.0%	0.8%	0.8%	0.0%	0.8%	0.0%	0.8%	0.0%	0.0%
Wheeler-EMPS:NBrit	40.7%	0.2%	42.8%	0.0%	0.4%	2.7%	7.3%	0.0%	2.5%	1.7%	0.2%	0.6%	0.0%	0.8%	0.0%	0.0%
NEW HAVEN	39.9%	0.0%	51.4%	0.0%	0.2%	1.7%	4.5%	0.2%	0.6%	0.2%	0.0%	1.0%	0.0%	0.2%	0.0%	0.0%
CliffBeers-EMPS	39.9%	0.0%	51.4%	0.0%	0.2%	1.7%	4.5%	0.2%	0.6%	0.2%	0.0%	1.0%	0.0%	0.2%	0.0%	0.0%
SOUTHWESTERN	37.4%	0.2%	55.6%	0.0%	0.2%	1.2%	2.2%	0.2%	1.2%	0.0%	0.0%	0.8%	1.2%	0.0%	0.0%	0.0%
CFGC/South-EMPS	36.3%	0.0%	60.1%	0.0%	0.6%	0.6%	0.0%	0.0%	1.2%	0.0%	0.0%	0.0%	1.2%	0.0%	0.0%	0.0%
CFGC-EMPS:Nrwik	35.3%	0.0%	53.4%	0.0%	0.0%	1.7%	3.4%	0.9%	1.7%	0.0%	0.0%	0.0%	3.4%	0.0%	0.0%	0.0%
CFGC-EMPS	39.2%	0.4%	53.3%	0.0%	0.0%	1.3%	3.1%	0.0%	0.9%	0.0%	0.0%	1.8%	0.0%	0.0%	0.0%	0.0%
WESTERN	32.4%	0.2%	44.7%	0.0%	0.0%	1.1%	18.2%	0.9%	1.3%	0.4%	0.2%	0.4%	0.0%	0.2%	0.0%	0.0%
Well-EMPS:Dnby	44.3%	1.3%	48.1%	0.0%	0.0%	0.0%	1.3%	2.5%	2.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Well-EMPS:Torr	42.5%	0.0%	48.8%	0.0%	0.0%	1.3%	5.0%	0.0%	0.0%	2.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Well-EMPS:Wtby	27.6%	0.0%	43.1%	0.0%	0.0%	1.4%	24.7%	0.8%	1.4%	0.0%	0.3%	0.5%	0.0%	0.3%	0.0%	0.0%

Figure 38. Type of Emergency Dept. Referral (N = 253)



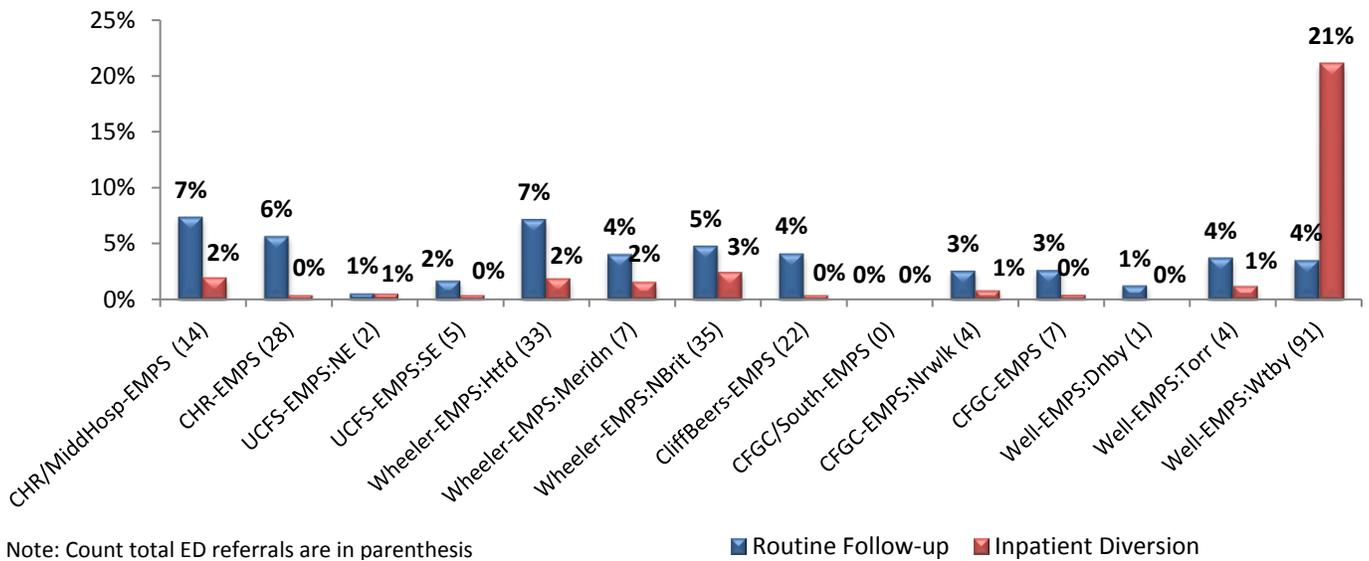
Note: Count total ED referrals are in parenthesis

Figure 39. Emergency Dept. Referral (% of Total Mobile Crisis Episodes)



Note: Count total ED referrals are in parenthesis

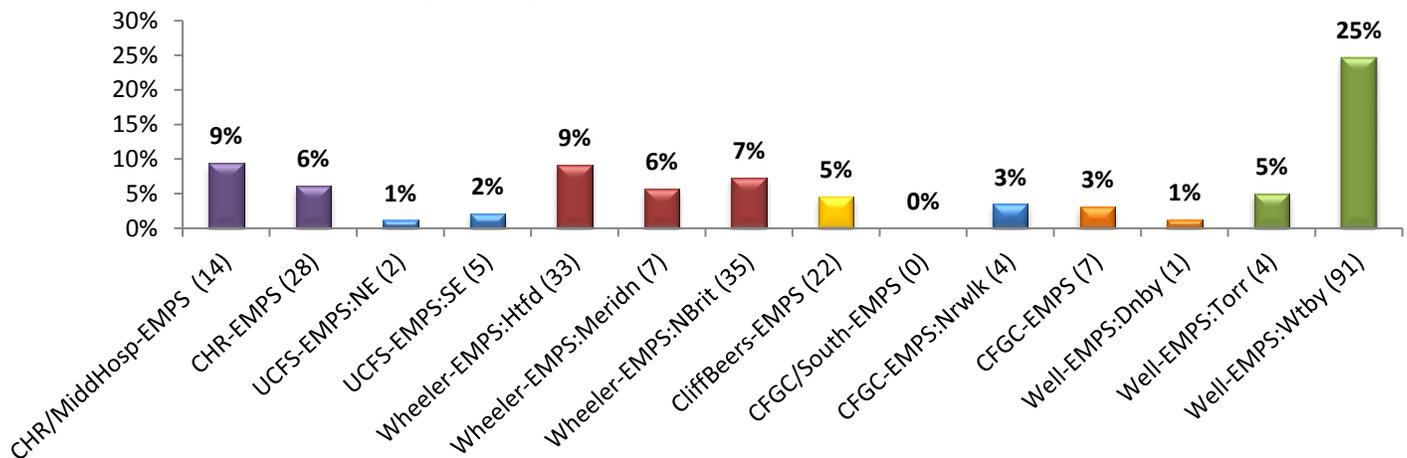
Figure 40. Type of Emergency Department Referrals by Provider



Note: Count total ED referrals are in parenthesis

■ Routine Follow-up ■ Inpatient Diversion

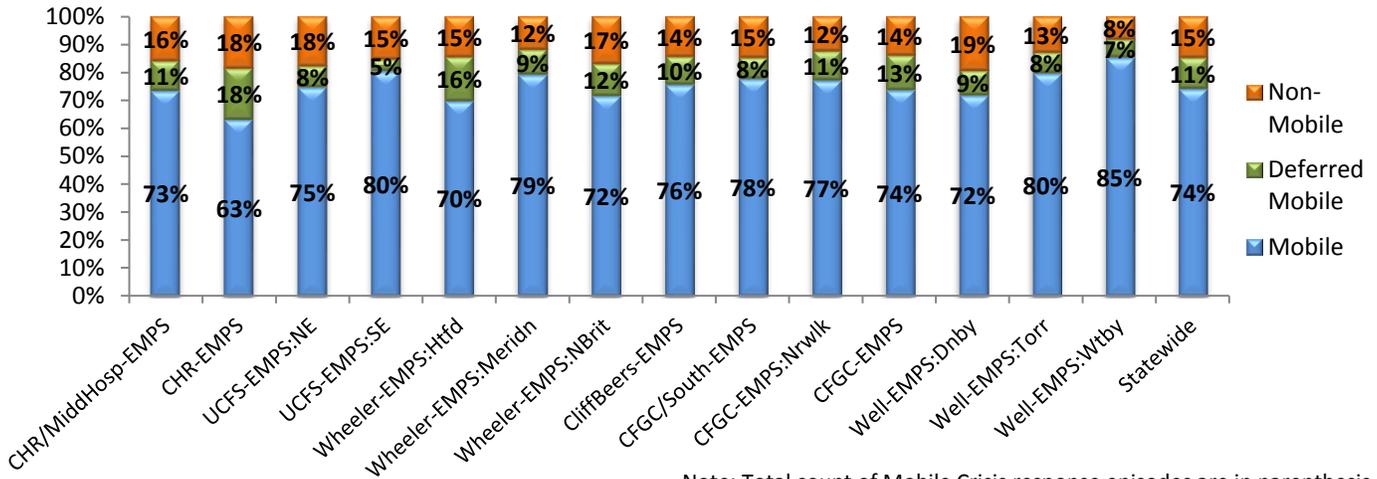
Figure 41. Emergency Dept. Referral (% of Total Mobile Crisis Episodes) by Provider



Note: Count total ED referrals are in parenthesis

Section VII: 211 Recommendations and Mobile Crisis Response

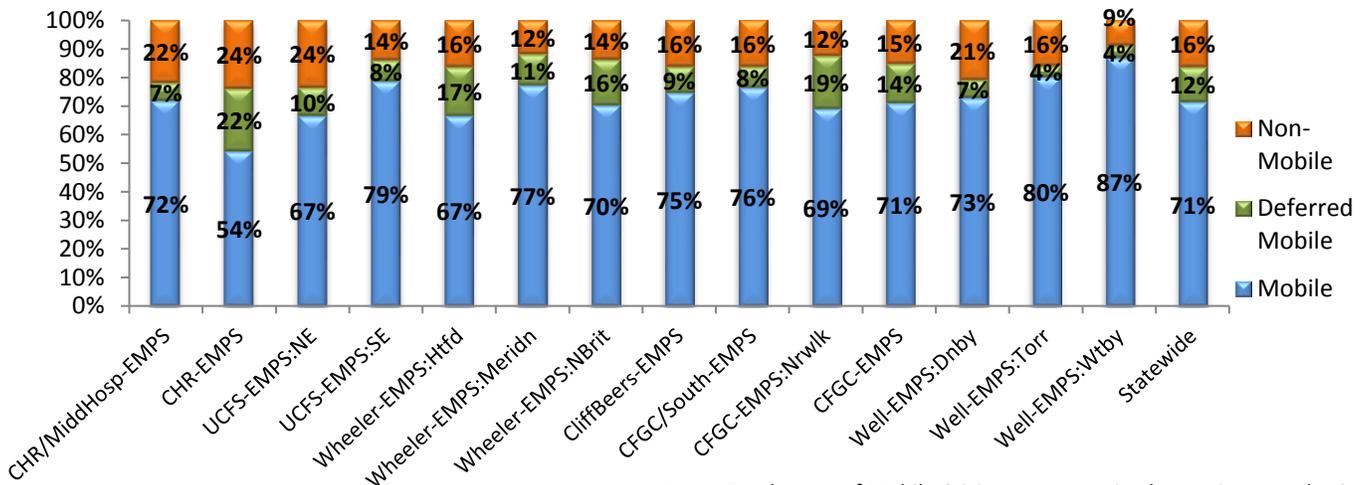
Figure 42. 211 Recommended Initial Response



Note: Total count of Mobile Crisis response episodes are in parenthesis

Note: Total count 211 Rec of Mobile are in parenthesis

Figure 43. Actual Initial Mobile Crisis Provider Response



Note: Total count of Mobile Crisis response episodes are in parenthesis

Figure 44. 211 Recommended Mobile Response Where Actual Mobile Crisis Response was Non-Mobile or Deferred Mobile

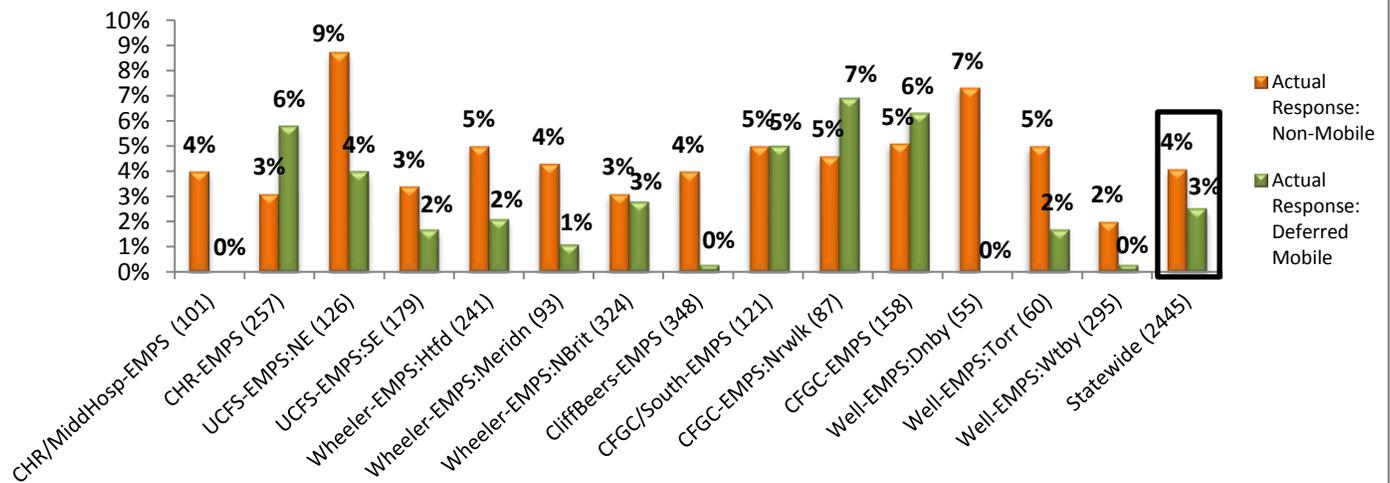


Figure 45. 211 Recommended Non-Mobile Response Where Actual Mobile Crisis Response was Mobile or Deferred Mobile

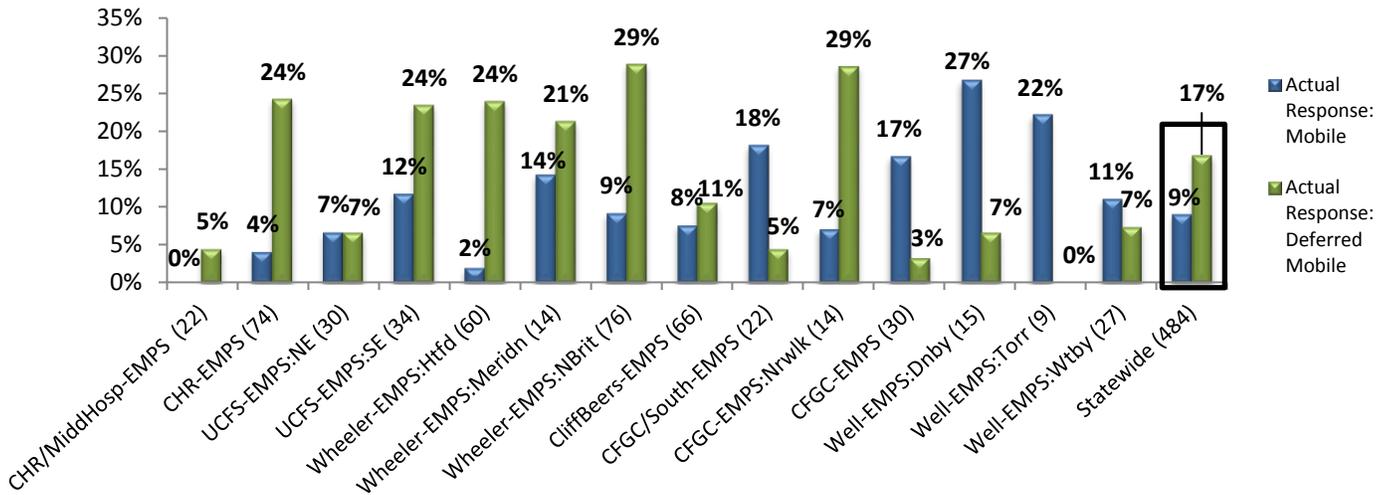


Figure 46. Mobile Response (Mobile & Deferred Mobile) By Service Area

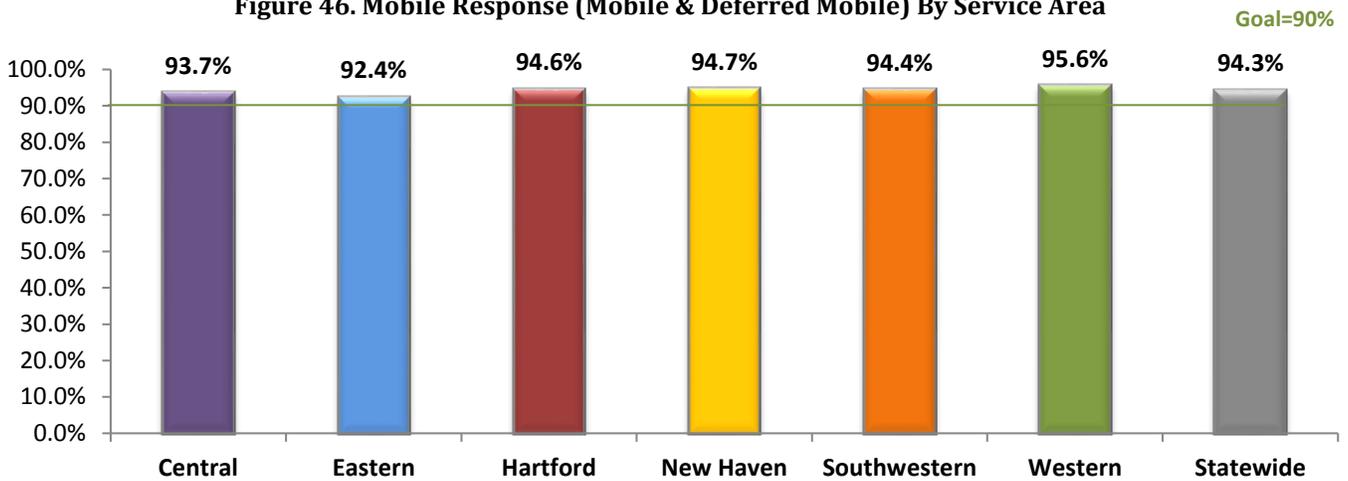
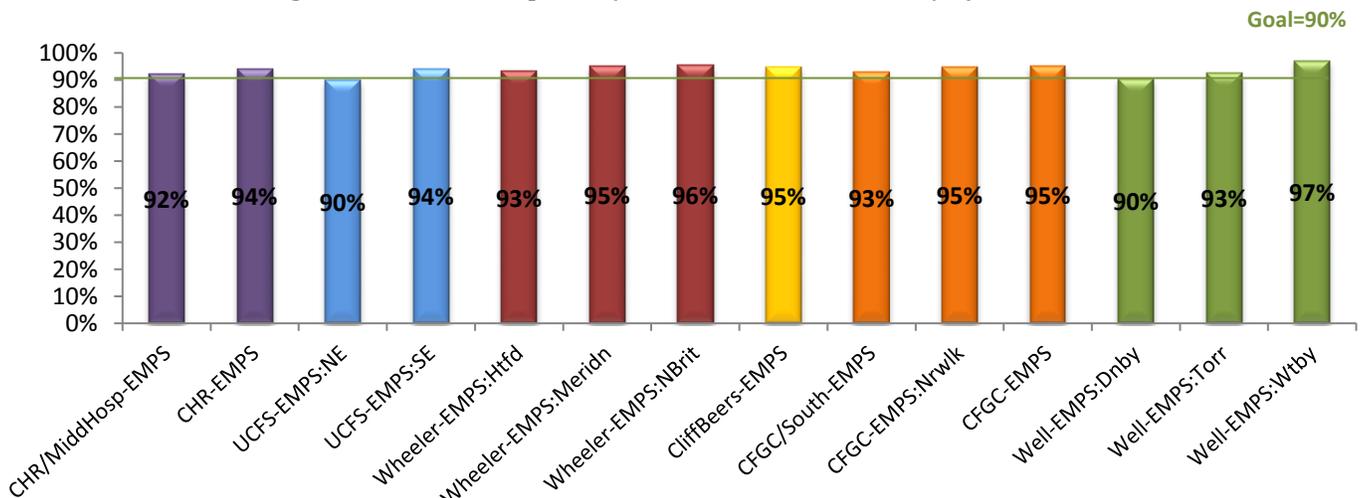
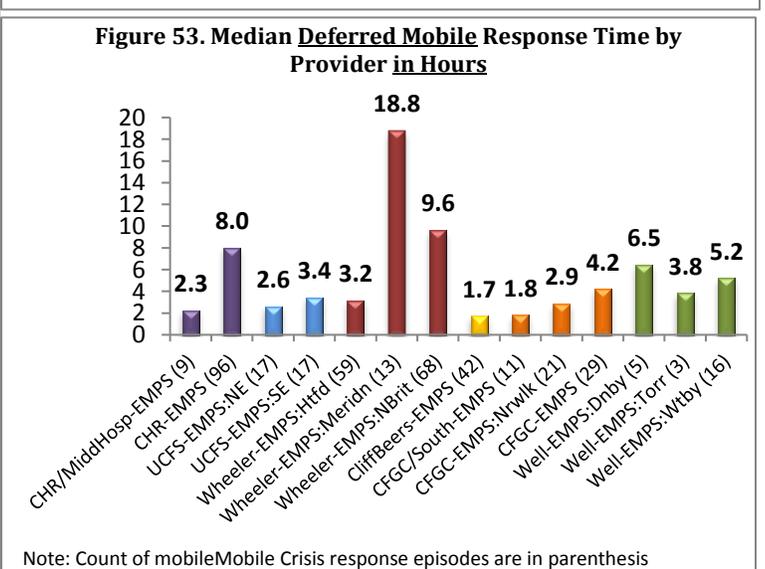
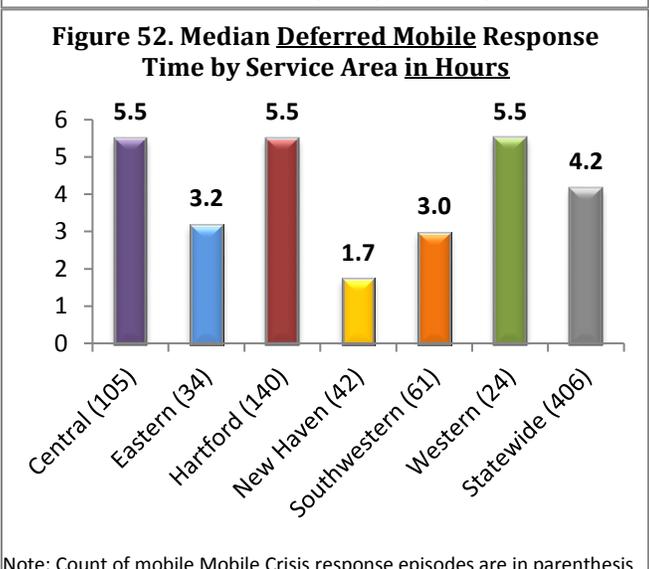
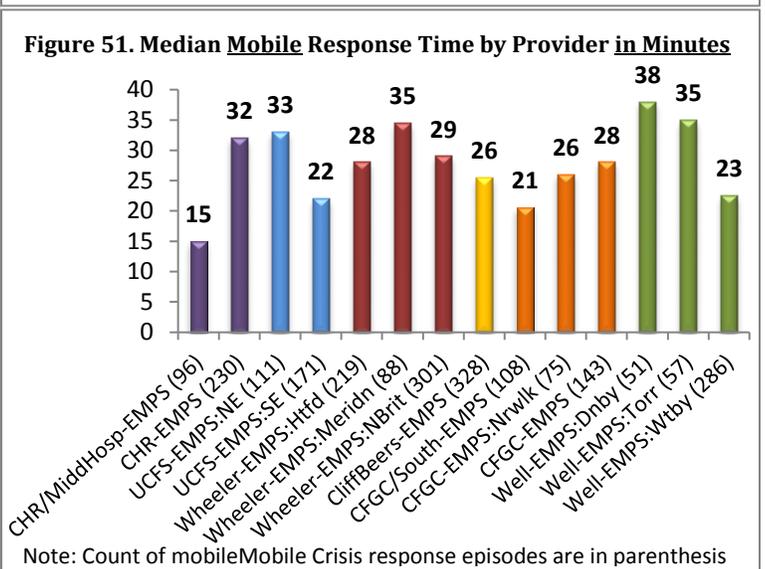
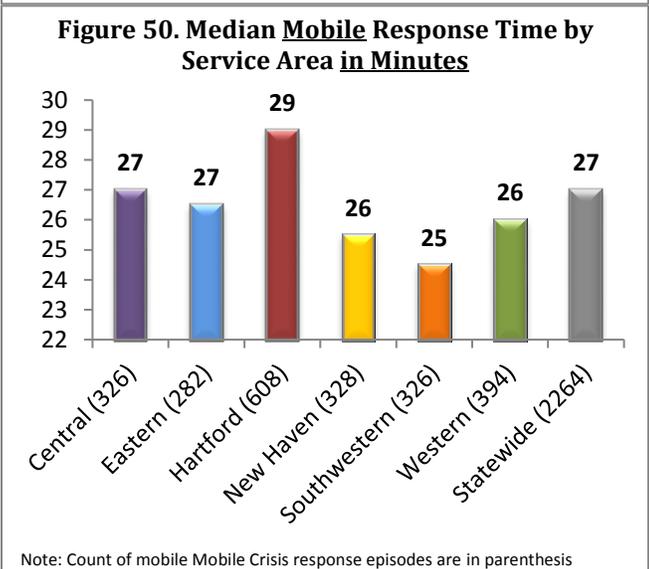
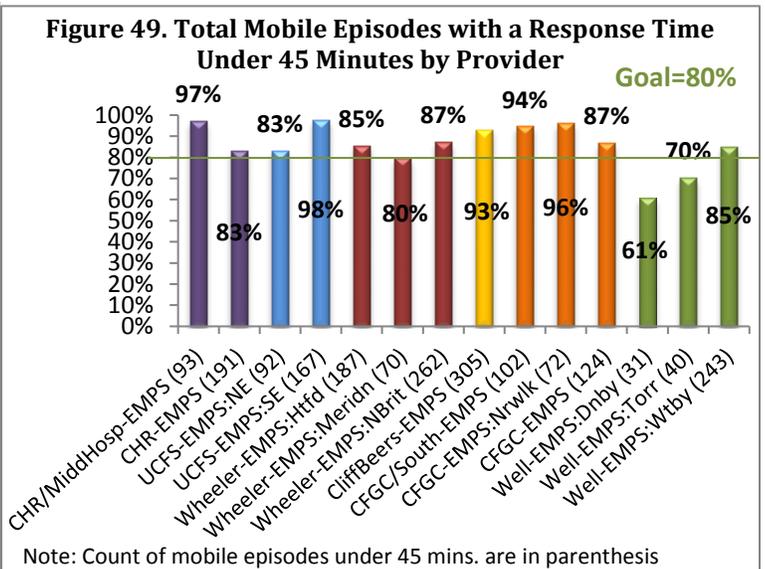
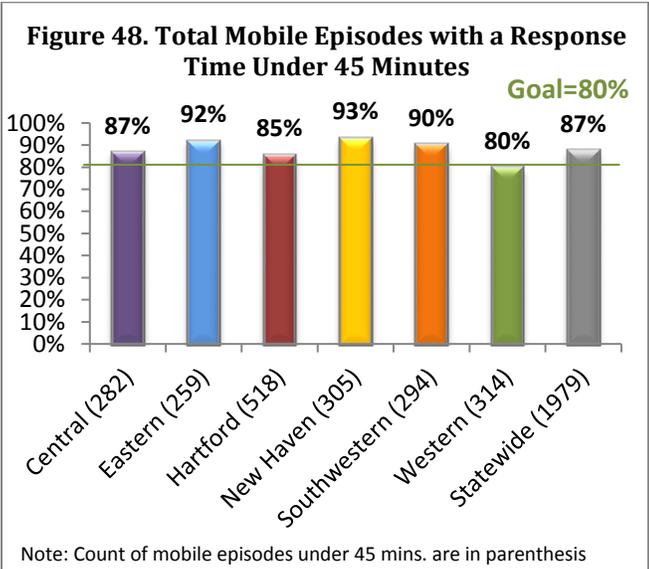


Figure 47. Mobile Response (Mobile & Deferred Mobile) By Provider



Section VIII: Response Time



Section IX: Length of Stay and Discharge Information

Table 2. Length of Stay for Discharged Episodes of Care in Days

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	
	<i>Discharged Episodes for Current Reporting Period</i>									<i>Cumulative Discharged Episodes*</i>									
	Mean			Median			Percent			Mean			Median			Percent			
	LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	
1	STATEWIDE	1.4	7.3	21.1	0.0	3.0	19.0	16%	36%	7%	1.3	6.5	19.4	0.0	2.0	16.0	15%	32%	5%
2	Central	2.1	8.6	23.9	0.0	3.0	19.0	34%	41%	10%	2.0	8.1	21.9	0.0	3.0	16.0	35%	40%	8%
3	CHR/MidHosp-EMPS	3.9	4.4	12.7	3.0	3.0	10.0	64%	32%	2%	3.7	4.4	12.5	2.0	3.0	10.0	62%	27%	1%
4	CHR-EMPS	0.9	11.3	28.6	0.0	4.0	27.0	15%	47%	13%	1.0	10.5	25.8	0.0	4.0	23.0	19%	48%	11%
5	Eastern	0.1	2.2	19.4	0.0	2.0	15.0	3%	3%	3%	0.1	2.1	18.2	0.0	2.0	14.0	3%	2%	3%
6	UCFS-EMPS:NE	0.1	1.8	18.5	0.0	1.0	14.0	4%	1%	3%	0.2	1.8	17.2	0.0	1.0	13.5	5%	1%	2%
7	UCFS-EMPS:SE	0.1	2.5	20.1	0.0	2.0	15.0	3%	4%	2%	0.1	2.3	19.1	0.0	2.0	15.0	1%	3%	4%
8	Hartford	1.4	9.0	16.7	0.0	6.0	14.0	15%	52%	4%	1.1	8.2	15.9	0.0	5.0	14.0	14%	48%	4%
9	Wheeler-EMPS:Htfd	2.0	9.4	15.8	0.0	5.5	14.0	20%	50%	4%	1.4	7.4	14.0	0.0	2.0	13.0	14%	44%	3%
10	Wheeler-EMPS:Meridn	1.7	8.6	17.5	0.0	6.0	14.0	20%	52%	6%	1.0	7.5	17.0	0.0	5.0	14.0	10%	47%	4%
11	Wheeler-EMPS:NBrit	0.7	9.0	16.9	0.0	6.0	14.0	10%	52%	4%	1.0	9.1	16.5	0.0	6.0	14.0	16%	51%	4%
12	New Haven	0.3	7.3	27.9	0.0	1.0	28.0	6%	39%	12%	0.3	6.5	26.2	0.0	1.0	25.0	5%	35%	11%
13	CliffBeers-EMPS	0.3	7.3	27.9	0.0	1.0	28.0	6%	39%	12%	0.3	6.5	26.2	0.0	1.0	25.0	5%	35%	11%
14	Southwestern	0.5	9.1	24.7	0.0	1.5	26.0	4%	40%	2%	0.4	7.9	23.2	0.0	1.0	25.0	4%	36%	3%
15	CFGC/South-EMPS	0.0	1.1	25.4	0.0	0.0	26.0	0%	3%	7%	0.1	0.8	22.7	0.0	0.0	21.0	2%	3%	7%
16	CFGC-EMPS:Nrwlk	0.3	17.0	27.3	0.0	12.0	28.0	0%	77%	0%	0.6	15.3	26.7	0.0	9.0	27.5	7%	74%	3%
17	CFGC-EMPS	0.9	11.8	22.7	0.0	6.0	22.0	9%	53%	0%	0.5	10.9	21.4	0.0	5.0	21.5	5%	49%	0%
18	Western	4.0	5.9	21.6	0.0	3.0	20.5	30%	32%	8%	4.0	5.9	19.3	0.0	3.0	18.0	28%	34%	6%
19	Well-EMPS:Dnby	3.0	13.0	21.8	0.0	8.0	15.0	18%	67%	14%	2.7	13.1	19.9	0.0	6.5	15.0	14%	50%	11%
20	Well-EMPS:Torr	4.3	5.9	22.6	0.0	8.0	22.0	22%	55%	3%	4.8	4.4	20.0	0.0	4.0	21.0	26%	42%	2%
21	Well-EMPS:Wtby	4.3	5.4	21.3	0.0	2.5	21.0	40%	24%	8%	4.2	5.5	19.0	0.0	3.0	17.0	35%	30%	6%

* Discharged episodes with end dates from July 1, 2016 to the end of the current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

Definitions:

- LOS: Phone Length of Stay in Days for Phone Only
- LOS: FTF Length of Stay in Days for Face To Face Only
- LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only
- Phone > 1 Percent of episodes that are phone only that are greater than 1 day
- FTF > 5 Percent of episodes that are face to face that are greater than 5 days
- Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Table 3. Number of Episodes for Discharged Episodes of Care

	A	B	C	D	E	F	G	H	I	J	K	L	
	<i>Discharged Episodes for Current Reporting Period</i>						<i>Cumulative Discharged Episodes*</i>						
	N used Mean/Median			N used for Percent			N used Mean/Median			N used for Percent			
	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	
1	STATEWIDE	604	1378	994	95	492	65	1098	2118	1417	168	683	77
2	Central	99	143	190	34	58	19	189	230	265	66	91	21
3	CHR/MiddHosp-EMPS	39	57	56	25	18	1	71	89	77	44	24	1
4	CHR-EMPS	60	86	134	9	40	18	118	141	188	22	67	20
5	Eastern	86	246	72	3	7	2	137	404	105	4	8	3
6	UCFS-EMPS:NE	47	90	31	2	1	1	65	151	48	3	1	1
7	UCFS-EMPS:SE	39	156	41	1	6	1	72	253	57	1	7	2
8	Hartford	156	320	303	24	165	13	297	480	456	43	230	17
9	Wheeler-EMPS:Htfd	71	100	78	14	50	3	132	184	116	19	81	3
10	Wheeler-EMPS:Meridn	15	50	51	3	26	3	39	68	70	4	32	3
11	Wheeler-EMPS:NBrit	70	170	174	7	89	7	126	228	270	20	117	11
12	New Haven	87	317	67	5	125	8	175	469	89	8	164	10
13	CliffBeers-EMPS	87	317	67	5	125	8	175	469	89	8	164	10
14	Southwestern	93	296	104	4	119	2	156	431	137	7	155	4
15	CFGC/South-EMPS	35	103	27	0	3	2	52	160	41	1	4	3
16	CFGC-EMPS:Nrwlk	15	60	30	0	46	0	28	76	38	2	56	1
17	CFGC-EMPS	43	133	47	4	70	0	76	195	58	4	95	0
18	Western	83	56	258	25	18	21	144	104	365	40	35	22
19	Well-EMPS:Dnby	22	3	35	4	2	5	35	8	47	5	4	5
20	Well-EMPS:Torr	18	11	38	4	6	1	31	19	59	8	8	1
21	Well-EMPS:Wtby	43	42	185	17	10	15	78	77	259	27	23	16

* Discharged episodes with end dates from July 1, 2016 to the end of the current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

Definitions:

- LOS: Phone Length of Stay in Days for Phone Only
- LOS: FTF Length of Stay in Days for Face To Face Only
- LOS: Stab. Length of Stay in Days for Stabilization Plus Follow-up Only
- Phone > 1 Percent of episodes that are phone only that are greater than 1 day
- FTF > 5 Percent of episodes that are face to face that are greater than 5 days
- Stab. > 45 Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Table 4. Length of Stay for Open Episodes of Care in Days

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	
	<i>Episodes Still in Care*</i>									<i>N of Episodes Still in Care*</i>						
	Mean			Median			Percent			N used Mean/Median			N used for Percent			
	LOS: Phone	LOS: FTF	LOS: Stab.	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	LOS: Phone	LOS: FTF	LOS: Stab.	Phone > 1	FTF > 5	Stab. > 45	
1	STATEWIDE	108.8	98.7	103.0	106.0	93.0	96.0	100%	100%	100%	107	297	417	107	297	417
2	Central	111.6	100.4	115.0	107.0	97.0	118.5	100%	100%	100%	57	65	110	57	65	110
3	CHR/MiddHosp-EMPS	0.0	0.0	87.5	0.0	0.0	87.5			100%	0	0	2	0	0	2
4	CHR-EMPS	111.6	100.4	115.5	107.0	97.0	119.0	100%	100%	100%	57	65	108	57	65	108
5	Eastern	0.0	0.0	83.2	0.0	0.0	83.5			100%	0	0	14	0	0	14
6	UCFS-EMPS:NE	0.0	0.0	87.4	0.0	0.0	85.0			100%	0	0	8	0	0	8
7	UCFS-EMPS:SE	0.0	0.0	77.7	0.0	0.0	77.0			100%	0	0	6	0	0	6
8	Hartford	100.5	102.7	97.3	96.0	98.0	90.0	100%	100%	100%	21	156	111	21	156	111
9	Wheeler-EMPS:Htfd	112.5	106.1	106.5	105.5	101.0	101.0	100%	100%	100%	6	92	39	6	92	39
10	Wheeler-EMPS:Meridn	93.0	95.4	90.7	92.0	88.0	90.0	100%	100%	100%	3	12	17	3	12	17
11	Wheeler-EMPS:NBrit	96.3	98.4	92.7	97.0	88.0	86.0	100%	100%	100%	12	52	55	12	52	55
12	New Haven	0.0	87.3	99.4	0.0	85.0	95.0		100%	100%	0	23	16	0	23	16
13	CliffBeers-EMPS	0.0	87.3	99.4	0.0	85.0	95.0		100%	100%	0	23	16	0	23	16
14	Southwestern	82.5	86.1	86.4	82.5	86.0	85.0	100%	100%	100%	2	29	21	2	29	21
15	CFGC/South-EMPS	69.0	94.0	88.1	69.0	94.0	85.0	100%	100%	100%	1	1	8	1	1	8
16	CFGC-EMPS:Nrwk	0.0	81.1	85.6	0.0	79.0	86.0		100%	100%	0	8	9	0	8	9
17	CFGC-EMPS	96.0	87.7	84.8	96.0	86.5	83.5	100%	100%	100%	1	20	4	1	20	4
18	Western	111.1	94.9	103.1	111.0	90.0	99.0	100%	100%	100%	27	24	145	27	24	145
19	Well-EMPS:Dnby	120.3	104.8	95.1	114.0	92.0	90.0	100%	100%	100%	3	5	21	3	5	21
20	Well-EMPS:Torr	118.7	0.0	104.6	119.0	0.0	98.5	100%		35%	3	0	26	3	0	26
21	Well-EMPS:Wtby	108.8	92.3	104.4	108.0	84.0	102.0	100%	100%	100%	21	19	98	21	19	98

* Data includes episodes still in care with referral dates from July 1, 2016 to end of current reporting period.

Note: Blank cells indicate no data was available for that particular inclusion criteria

Definitions:

LOS: Phone

Length of Stay in Days for Phone Only

LOS: FTF

Length of Stay in Days for Face To Face Only

LOS: Stab.

Length of Stay in Days for Stabilization Plus Follow-up Only

Phone > 1

Percent of episodes that are phone only that are greater than 1 day

FTF > 5

Percent of episodes that are face to face that are greater than 5 days

Stab. > 45

Percent of episodes that are stabilization plus follow-up that are greater than 45 days

Figure 54. Top Six Reasons for Client Discharge Statewide

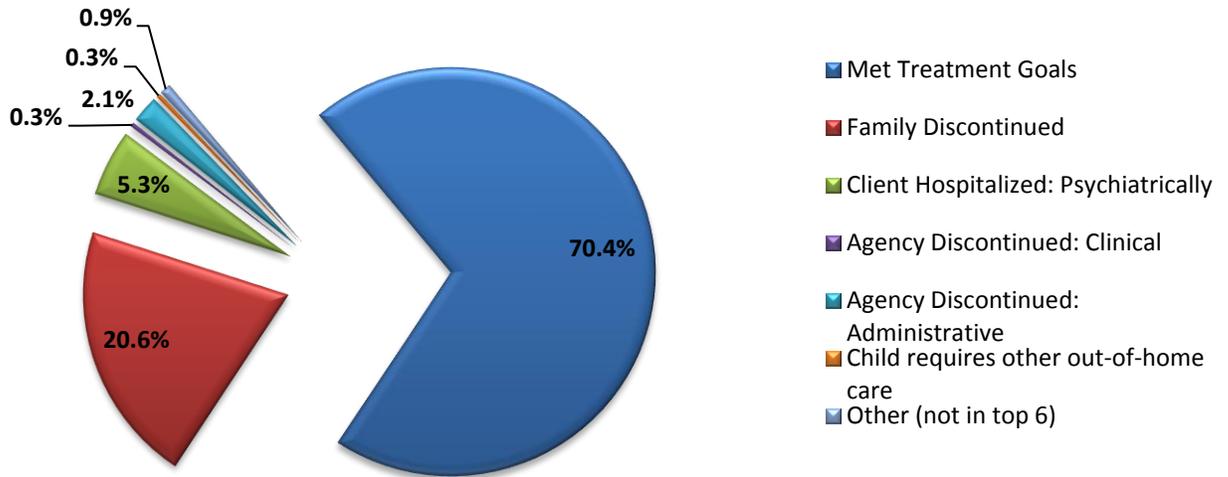


Figure 55. Top Six Places Clients Live at Discharge Statewide

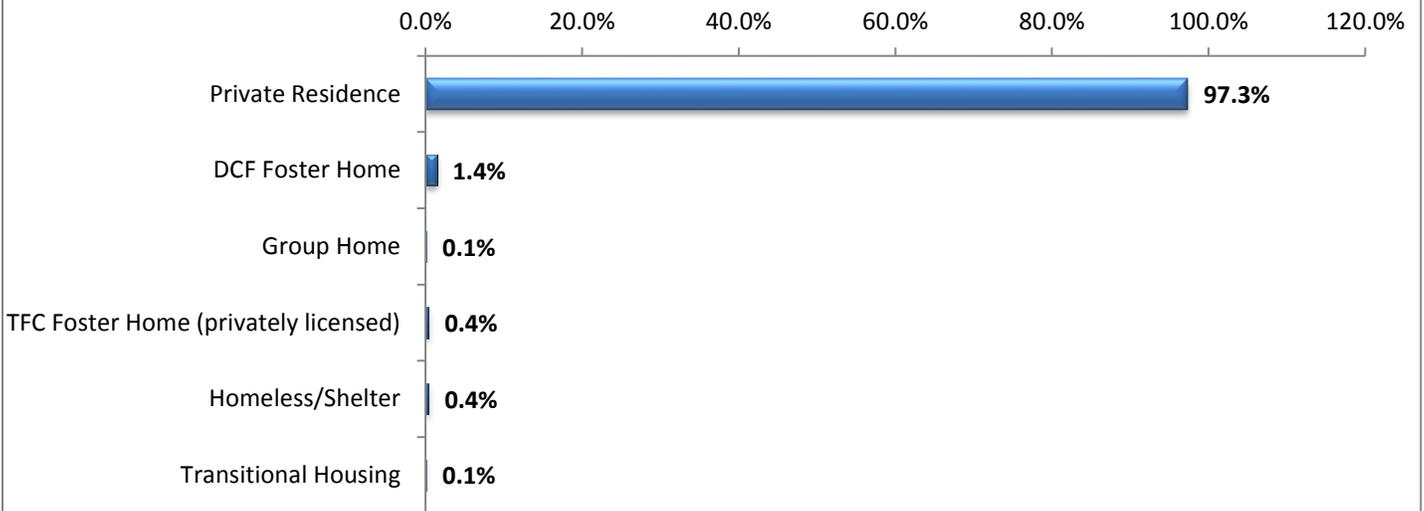
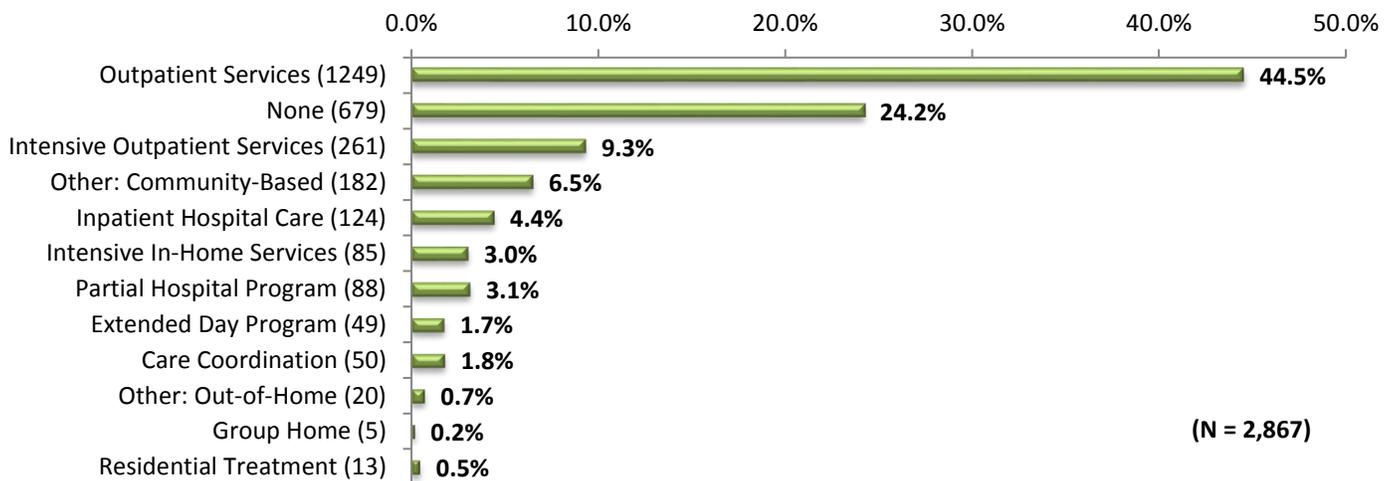


Figure 56. Type of Services Client Referred* to at Discharge Statewide



Note: Count for each type of service referral is in parenthesis

* Data include clients referred to more than one type of service

** May include referrals back to existing providers

Table 5. Ohio Scales Scores by Service Area

Service Area	<i>N</i> (paired [†] intake & discharge)	Mean (paired [†] intake)	Mean (paired [†] discharge)	Mean Difference (paired [†] cases)	<i>t</i> -score	Sig.	† .05-.10 * <i>P</i> < .05 ** <i>P</i> < .01
STATEWIDE							
Parent Functioning Score	65	37.43	36.91	-0.52	-0.60	0.547	
Worker Functioning Score	614	43.96	45.42	1.45	4.65	0.000	**
Parent Problem Score	64	16.70	15.78	-0.92	-1.48	0.144	
Worker Problem Score	608	27.74	25.75	-1.99	-6.78	0.000	**
Central							
Parent Functioning Score	8	46.38	43.75	-2.63	-1.00	0.351	
Worker Functioning Score	104	46.25	48.85	2.60	5.84	0.000	**
Parent Problem Score	8	26.88	28.13	1.25	1.00	0.351	
Worker Problem Score	104	26.12	23.96	-2.15	-4.86	0.000	
Eastern							
Parent Functioning Score	20	52.45	52.80	0.35	0.20	0.844	
Worker Functioning Score	60	43.97	46.75	2.78	3.73	0.000	**
Parent Problem Score	20	18.65	16.10	-2.55	-1.63	0.119	
Worker Problem Score	60	27.40	24.43	-2.97	-3.27	0.002	**
Hartford							
Parent Functioning Score	4	56.25	52.00	-4.25	-0.86	0.453	
Worker Functioning Score	187	42.16	42.45	0.29	0.41	0.681	
Parent Problem Score	4	15.25	17.25	2.00	0.74	0.514	
Worker Problem Score	187	28.40	27.16	-1.24	-1.84	0.067	+
New Haven							
Parent Functioning Score	0						N/A
Worker Functioning Score	49	44.14	42.55	-1.59	-1.41	0.166	
Parent Problem Score	0						**
Worker Problem Score	49	28.63	25.12	-3.51	-2.63	0.012	*
Southwestern							
Parent Functioning Score	4	37.00	43.50	6.50	1.87	0.158	
Worker Functioning Score	36	44.72	48.81	4.08	2.45	0.020	*
Parent Problem Score	4	37.00	30.00	-7.00	-1.93	0.149	
Worker Problem Score	33	24.36	21.48	-2.88	-1.71	0.096	+
Western							
Parent Functioning Score	29	22.07	21.07	-1.00	-1.00	0.326	
Worker Functioning Score	178	44.31	46.18	1.87	3.76	0.000	**
Parent Problem Score	28	9.71	9.79	0.07	1.00	0.326	
Worker Problem Score	175	28.52	26.76	-1.76	-5.18	0.000	**

paired[†] = Number of cases with both intake and discharge scores

† .05-.10,

* *P* < .05,

***P* < .01

Section X: Client & Referral Source Satisfaction

Table 6. Client and Referrer Satisfaction for 211 and Mobile Crisis (Current Quarter)*

211 Items	Clients (n=60)	Referrers (n=60)
The 211 staff answered my call in a timely manner	4.83	4.80
The 211 staff was courteous	4.87	4.83
The 211 staff was knowledgeable	4.87	4.83
My phone call was quickly transferred to the Mobile Crisis provider	4.77	4.83
Sub-Total Mean: 211	4.83	4.83
Mobile Crisis Items		
Mobile Crisis responded to the crisis in a timely manner	4.82	4.77
The Mobile Crisis staff was respectful	4.88	4.80
The Mobile Crisis staff was knowledgeable	4.87	4.78
The Mobile Crisis staff spoke to me in a way that I understood	4.87	X
Mobile Crisis helped my child/family get the services needed or made contact with my current service provider (if you had one at the time you called EMPS)	4.75	X
The services or resources my child and/or family received were right for us	4.72	X
The child/family I referred to Mobile Crisis was connected with appropriate services or resources upon discharge from Mobile Crisis	X	4.67
Overall, I am very satisfied with the way that Mobile Crisis responded to the crisis	4.77	4.73
Sub-Total Mean: Mobile Crisis	4.81	4.75
Overall Mean Score	4.82	4.80

* All items collected by 211, in collaboration with the PIC and DCF; measured on a scale of 5 (Strongly Agree) to 1 (Strongly Disagree)

Clients Comments:

- * She was very helpful. Every time an EMPS person needed to come out, they were always very professional and helpful.
- * They've always been very good.
- * I was thrilled with the service - they came out very quickly and were wonderful!
- * Very satisfied - thank you for the service.
- * 211 and EMPS were great.
- * Very helpful and kind.
- * EMPS is a great service.

- * It really was not of much help that night.
- * EMPS was good; they really just talked. They took some time to arrive.

Referrer Comments:

- * We are so grateful for the EMPS services.
- * Found it extremely helpful.
- * Very satisfied with the services - our school uses often.

- * I would have liked a follow up from the EMPS worker about how the student was doing.
- * It was a lengthy process.

Section XI: Training Attendance

Table 7. Trainings Completed for All Active* Staff

	DBHRN	Crisis API	DDS	CSSRS	Trauma	Violence	CRC	Str-Based	Emerg. Certificate	QPR	A-SBIRT	All 11 Trainings Completed	All 11 Completed for Full-Time Staff Only
Statewide (160)*	60%	61%	42%	36%	58%	54%	58%	58%	55%	24%	66%	10%	14%
CHR/MiddHosp-EMPS(13)*	62%	62%	31%	46%	62%	62%	62%	54%	62%	38%	54%	8%	25%
CHR-EMPS (12)*	50%	33%	42%	58%	42%	42%	50%	50%	17%	17%	67%	0%	0%
UCFS-EMPS:NE (8)*	38%	25%	38%	63%	0%	13%	25%	13%	25%	25%	100%	0%	0%
UCFS-EMPS:SE (14)*	64%	57%	14%	50%	36%	29%	29%	57%	57%	7%	64%	0%	0%
Wheeler-EMPS:Htfd (12)*	50%	50%	42%	0%	50%	42%	50%	50%	50%	33%	33%	0%	0%
Wheeler-EMPS:Meridn (8)*	50%	50%	50%	50%	63%	63%	38%	63%	50%	50%	38%	13%	0%
Wheeler-EMPS:NBrit (21)*	52%	52%	24%	10%	38%	38%	52%	62%	43%	0%	43%	0%	0%
CliffBeers-EMPS (21)*	81%	81%	76%	62%	81%	67%	76%	76%	67%	57%	76%	33%	37%
CFGC/South-EMPS (7)*	57%	43%	14%	14%	57%	14%	57%	43%	43%	0%	57%	0%	0%
CFGC-EMPS:Nrwk (5)*	60%	80%	20%	60%	100%	100%	80%	60%	60%	20%	60%	20%	25%
CFGC-EMPS (15)*	80%	87%	53%	60%	87%	87%	87%	80%	93%	40%	67%	33%	40%
Well-EMPS:Dnby (5)*	80%	60%	60%	20%	60%	60%	100%	60%	60%	20%	100%	20%	20%
Well-EMPS:Torr (2)*	50%	100%	100%	0%	100%	100%	100%	100%	50%	0%	100%	0%	0%
Well-EMPS:Wtby (17)*	47%	71%	47%	6%	65%	59%	65%	53%	65%	18%	88%	6%	11%
Full-Time Staff Only (106)	66%	67%	45%	46%	63%	57%	68%	64%	61%	29%	77%	14%	

Note: Count of active staff for each provider or category is in parenthesis; * Includes all active full-time, part-time and per diem staff

Training Title Abbreviations:

DBHRN=Disaster Behavioral Health Response Network

Crisis API = Crisis Assessment, Planning and Intervention

DDS= An Overview of Intellectual Developmental Disabilities and Positive Behavioral Supports

CSSRS=Columbia Suicide Severity Rating Scale

Trauma = Traumatic Stress and Trauma Informed Care

Violence = Violence Assessment and Prevention

Str Based = Strengths-Based Crisis Planning

CRC = 21st Century Culturally Responsive Mental Health Care

Emerg. Certificate= Emergency Certificate

QPR= Question, Persuade and Refer

A-SBIRT- Adolescent Screening, Brief Intervention and Referral to Treatment

Section XII: Data Quality Monitoring

Figure 57. Ohio Scales Collected at Intake by Provider

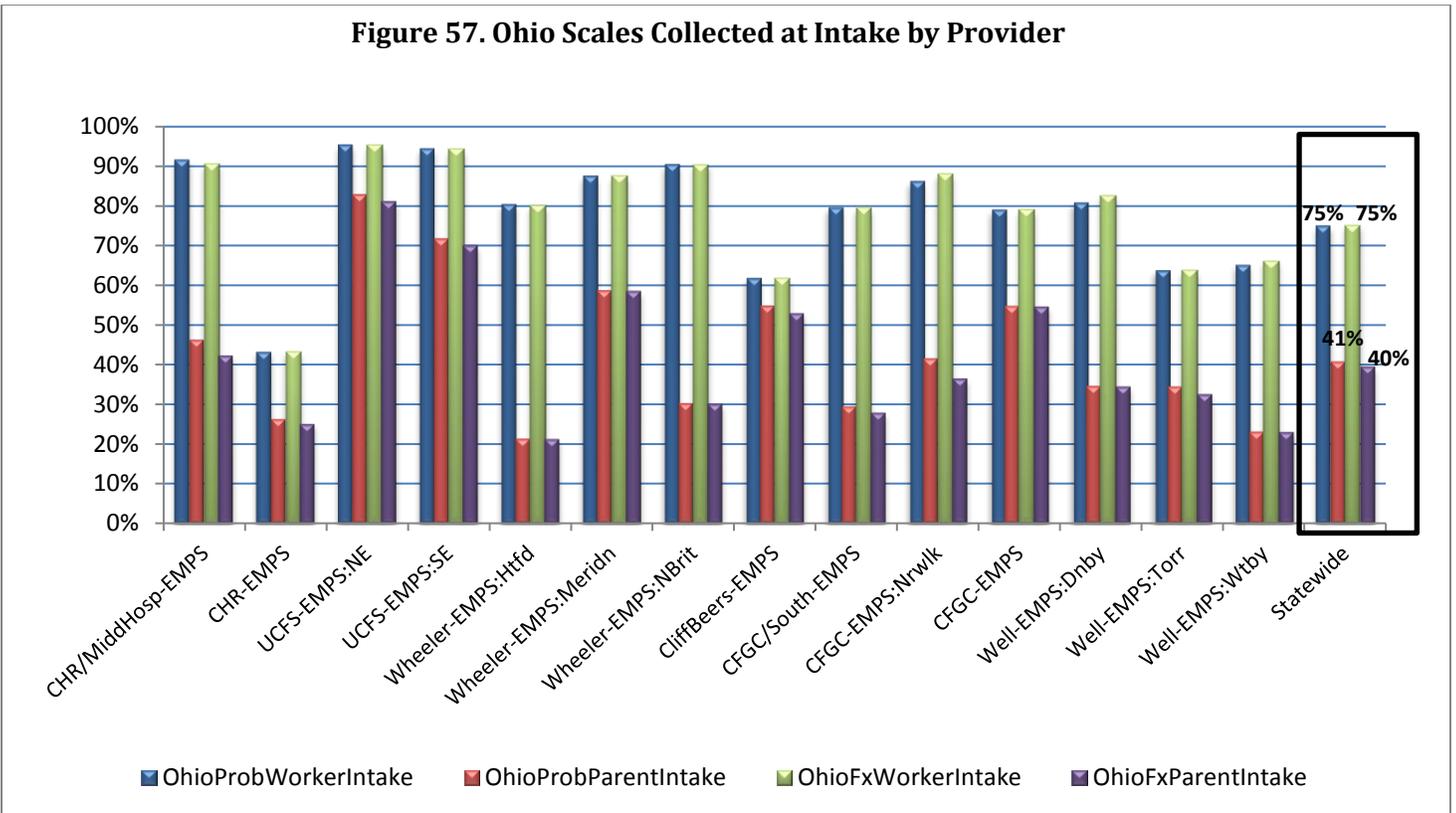
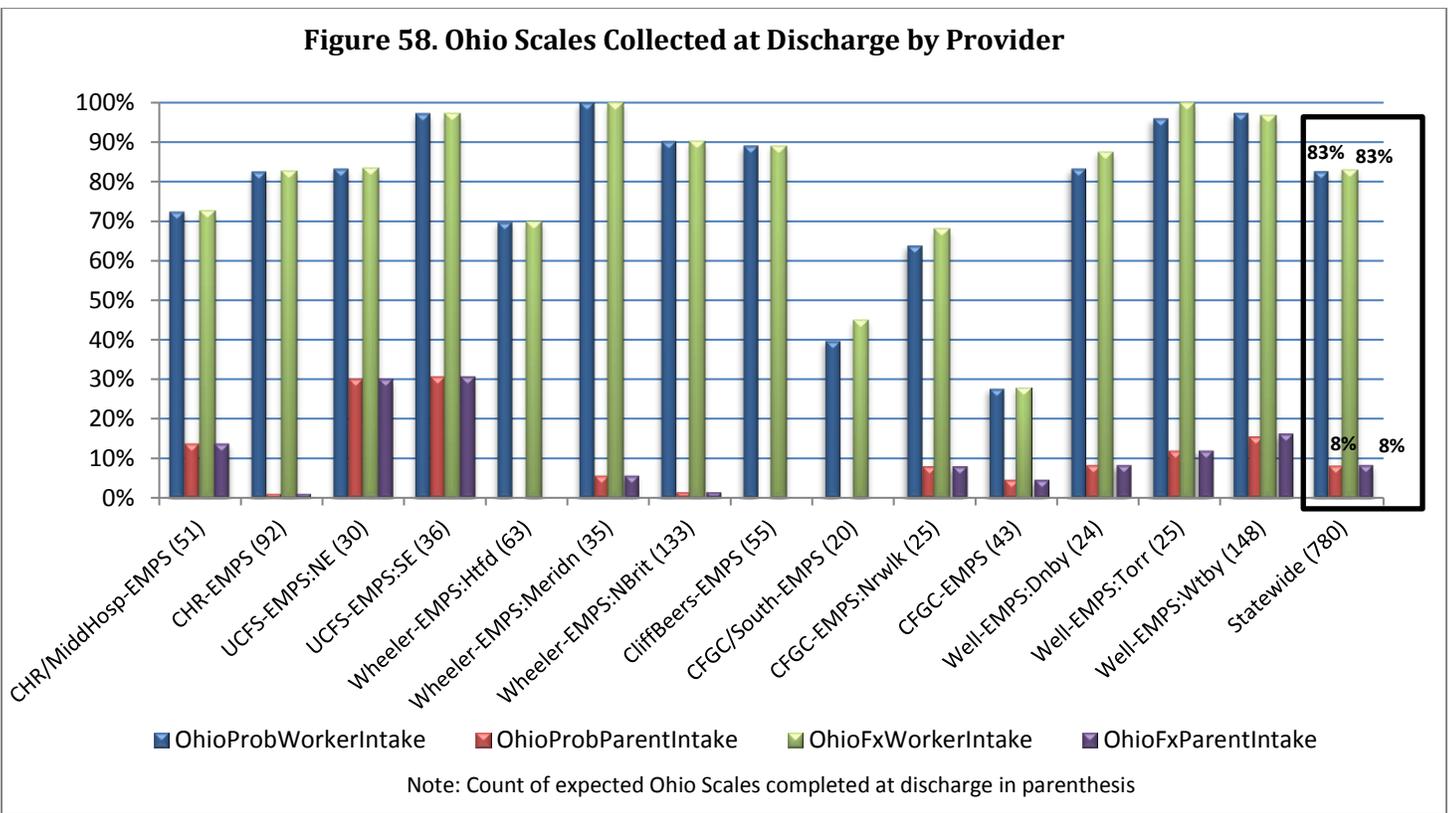
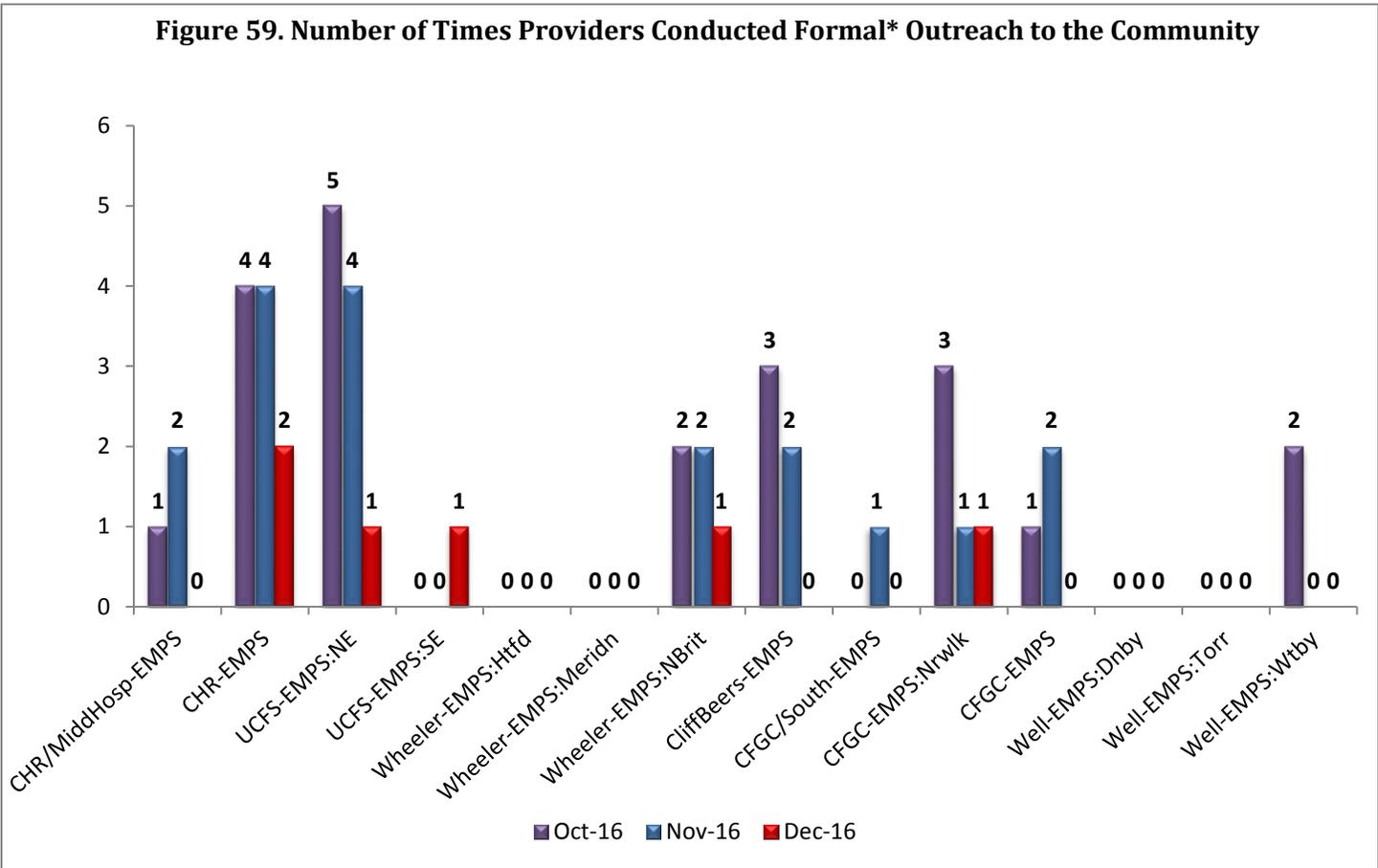


Figure 58. Ohio Scales Collected at Discharge by Provider



Section XIII: Provider Community Outreach

Figure 59. Number of Times Providers Conducted Formal* Outreach to the Community



*Formal outreach refers to: 1) In person presentations lasting 30 minutes, preferably more, using the Mobile Crisis PowerPoint slides and including distribution to attendees of marketing materials and other Mobile Crisis resources; 2) Outreach presentations that are in person that include workshops, conferences, or similar gatherings in which Mobile Crisis is discussed for at least an hour or more; 3) Outreach presentations that are not in person which may include workshops, conferences, or similar gatherings in which the Mobile Crisis marketing video, banner, and table skirt are set up for at least 2 hours with marketing materials made available to those who would like them; 4) The Mobile Crisis PIC considers other outreaches for inclusion on a case-by-case basis, as requested by Mobile Crisis providers.