



MOBILE CRISIS
INTERVENTION SERVICES

Mobile Crisis Intervention Services 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)

QUARTERLY REPORT

FY2021: Quarter 1

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Executive Summary

Note: Due to COVID-19, schools were closed and stay-at-home orders were put in place for the non-essential workforce in Connecticut beginning in mid-March 2020. Mobile Crisis has continued to be operational, and as part of the essential workforce providers are working with families to respond to calls via telephone, video conferencing, and in-person responses with safety of the child, family, and clinicians as the top priority. Note that both video and in-person responses during this period may be reflected within the report as 'mobile' responses, which may affect the accuracy of mobility and response time data. While schools have partially re-opened, referrals to Mobile Crisis continue to be lower than usual. This decrease as well as other factors associated with COVID-19, including challenges with data collection, should be noted when reviewing this report.

Call and Episode Volume: In the first quarter of FY2021, **2-1-1 received 2,368 calls** including 1,790 calls (75.6%) handled by Mobile Crisis providers and 578 calls (24.4%) handled by 2-1-1 only (e.g., calls for other information or resources, calls transferred to 9-1-1). Of the 1,789 episodes of care, 1,613 (90.2%) were received during regular hours and 176 (9.8%) were handled after hours. There was one crisis response follow-up call. This quarter saw a 28.6% decrease in total call volume compared to the same quarter in FY2020 (3,316), and the total episodes decreased by 25.8% (2,410 in FY2020).

Among the **1,789 episodes of care** generated in Q1 FY21, episode volume ranged from 206 episodes including After Hours calls (Eastern service area) to 461 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 2.4, with service area rates ranging from 1.4 (Southwestern) to 3.2 (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 3.9 per 1,000 children in poverty, with service area rates ranging from 1.8 (Southwestern) to 5.8 (Hartford).

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, 7 of the 14 sites met this benchmark.

Demographics: Statewide this quarter, 56.1% of services were for children reported as female and 43.9% for those reported as males.¹ **Care for youth ages 13-15 years old comprised the largest portion of services (36.1%).** Additionally, 28.9% of services were for 9-12 year olds, 25.0% were for 16-18 year olds, 7.6% were for 6-8 year olds, and 2.0% were for five or younger. The majority of services were for White children (55.5%), while 16.7% were for African-American or Black children. Over one-third (36.4%) of services were for youth of Hispanic ethnicity. The majority of youth were insured by Husky A (61.4%) and private insurance (29.3%). Finally, the majority of clients (83.8%) were not DCF-involved.

Clinical Functioning: The most commonly reported primary presenting problems for clients statewide included: Disruptive Behavior (27.9%), Harm/Risk of Harm to Self (23.5%), Depression (13.0%), Anxiety (9.9%), Family Conflict (8.5%), and Harm/Risk of Harm to Others (5.6%). The top client primary diagnoses at intake this quarter were: Depressive Disorders (28.4%), Conduct Disorders (15.5%), Adjustment Disorders (14.7%), Trauma Disorders (13.2%), Anxiety Disorders (13.0%), and Attention Deficit/Hyperactivity Disorders (7.7%). This quarter, **71.4% 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 65.7%**, with service areas ranging from 43.9% (Southwestern) to 80.6% (Central). The most common types of trauma exposure reported at intake statewide were: Disrupted Attachment/Multiple Placements (22.7%), Witnessing Violence (20.9%), Victim of Violence (19.1%), and Sexual Victimization (14.8%).

¹ Per question regarding "Sex Assigned at Birth".

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 25.9%**, slightly higher compared to 24.7% in the same quarter last fiscal year. During an episode of care, 29.9% of children were evaluated in the Emergency Department at least once. The inpatient admission rate in the six months prior to Mobile Crisis referral was 15.5% statewide, which is higher than the rate in the Q1 FY2020 (14.1%). The admission rate to an inpatient unit during a mobile crisis episode was 14.2%, compared to a rate of 10.7% in the same quarter last fiscal year.

Referral Sources: Statewide, **64.2% of referrals were received from parents, families and youth.** Emergency Departments (EDs) accounted for 13.2% of all Mobile Crisis referrals. Only 9.2% of referrals came from schools. Two months of this quarter were summer months when school was not in session, and beginning in September many schools were only partially re-opened for in-person learning. This has led to fewer school referrals to Mobile Crisis. The remaining 13.4% of referrals came from a variety of other sources.

ED utilization of Mobile Crisis varies widely among hospitals in Connecticut. This quarter, a total of **237 Mobile Crisis referrals were received from EDs**, including 136 referrals for inpatient diversion and 101 referrals for routine follow-up. Regionally, the highest rate of ED referrals, as a percentage of total referrals, was observed in the Western service area (29.9%) and the lowest was in the Southwestern service area (0.9%). Statewide, 13.2% of all Mobile Crisis episodes came from ED referrals this quarter, higher than the rate from Q1 FY2020 (10.0%).

Mobility: The average **statewide mobility this quarter was 89.2%**, lower than the rate in Q1 FY2020 (90.7%) (Police referrals are excluded from mobility calculations). Three of the six service areas met the benchmark of 90% this quarter. Mobility rates among service areas ranged from 80.2% (Central) to 96.4% (New Haven). The range in mobility percentages widened slightly more among individual providers, from 72.2% (CFG: South) to 96.4% (Clifford Beers). Among the providers, 8 of the 14 surpassed the 90% benchmark.

Response Time: Statewide this quarter, **74.3% of mobile episodes received a face-to-face response in 45 minutes or less.** Performance on this indicator ranged from 62.1% (New Haven) to 87.5% (Central) with two of the six service areas above the 80% benchmark. Across the state, 6 of the 14 providers met the benchmark. In addition, the statewide median response time this quarter was 33.0 minutes, with two of the six service areas demonstrating a median response time of 30 minutes or less.

Length of Stay: Among discharged episodes statewide this quarter, 17.4% of Phone Only episodes exceeded one day, 30.6% of Face-to-Face episodes exceeded five days, and **0.8% of Stabilization Plus Follow-up episodes exceeded 45 days**, meeting the statewide benchmark of less than 5%. The statewide median LOS among discharged episodes was less than one day for Phone Only, 3.0 days for Face-to-Face episodes, and 9.0 days for *Stabilization Plus*.

Statewide, the median Length of Stay (LOS) for open episodes of care with a Crisis Response of Phone Only was 50.5 days and ranged from 0.0 days (Eastern) to 79.0 days (Western). The statewide median LOS for Face-to-Face was 38.0 days and ranged from 35.0 days (Eastern) to 110.5 days (Western). For *Stabilization Plus Follow-up*, the statewide median LOS was 38.0 days with a range from 36.0 days (Central, New Haven) to 49.0 days (Eastern). Across open episodes of care with phone and face-to-face crisis response categories during the first quarter of FY2021, 100% of episodes remained open beyond the benchmarks (1 day for Phone Only, 5 days for Face-to-Face). For open *Stabilization Plus Follow-up*, there was a wide range of cases remaining open past the benchmark (45 days). Statewide, 28.9% of these open cases exceeded the benchmark, while regionally this ranged from 0.0% (Central, New Haven) to 66.7% (Eastern). 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 (94.0%).** Statewide, the **top three reasons for client discharge** were: Met Treatment Goals (78.9%), Family Discontinued (11.0%), and Client Hospitalized: Psychiatrically (6.8%).

Statewide, clients were most likely to be **referred to their original provider (34.6%) or Outpatient Services (27.4%) at discharge.** Other care referrals at discharge included: Intensive In-Home Services (7.6%), Inpatient Hospital (5.1%), Other Community Based Services (3.6%), Intensive Outpatient Program (2.2%), Partial Hospital Program (2.1%), and Care Coordination (1.4%). An additional 13.1% of clients were reported as receiving no referral at discharge.

Across the state, Ohio Scales showed an average improvement on parent and worker rated functioning of 2.48 and 1.54 points respectively. Decreases in problem scores of 4.01 points on parent ratings and 2.72 points on worker ratings were reported. Changes on all scales were statistically significant.

Completion rates of the Ohio Scales at discharge for the Worker Functioning and Problem Severity scores increased by 3.0 percentage points when compared to the same quarter in FY2020. The completion rate for Parent Functioning and Problem Severity scores increased 16.0 percentage points compared to FY2020 Q1.

Satisfaction: This quarter, 55 clients/families and 61 other referrers were surveyed regarding their satisfaction with the service; both groups gave favorable ratings to 2-1-1 and Mobile Crisis services. On a 5-point scale, **clients' average ratings of 2-1-1 and Mobile Crisis were 4.03 and 4.12**, respectively. Among **other referrers (e.g. schools, hospitals, DCF, etc.)**, **the average ratings of 2-1-1 and Mobile Crisis were both 4.25**. Qualitative comments (see Section X) varied from very satisfied to dissatisfied.

Training Attendance: The **statewide percentage of all thirteen trainings completed by full-time active staff as of March 2020 is 7%**. While this is lower than previous years, note that two new trainings were added in FY2020: a training on Problem Sexual Behavior and a training on School Refusal. The majority of staff have not had the opportunity to attend these new trainings yet.

Community Outreach: Due to restrictions related to COVID-19, many providers did not complete any outreaches this quarter. Of those who did, the number of outreaches ranged from 1 (Clifford Beers; UCFS: SE) to 5 (Wellmore: Waterbury). In addition, providers in each region reached out to school districts in their catchment area to remind them that Mobile Crisis is still operational and offer support as schools re-opened for the start of the new school year. This involved significant effort from the providers, with many emails, phone calls, and zoom meetings to discuss the schools' COVID policies and determine the best way for Mobile Crisis to help.

SFY 2021 Q1 RBA Report Card: Mobile Crisis Intervention Services

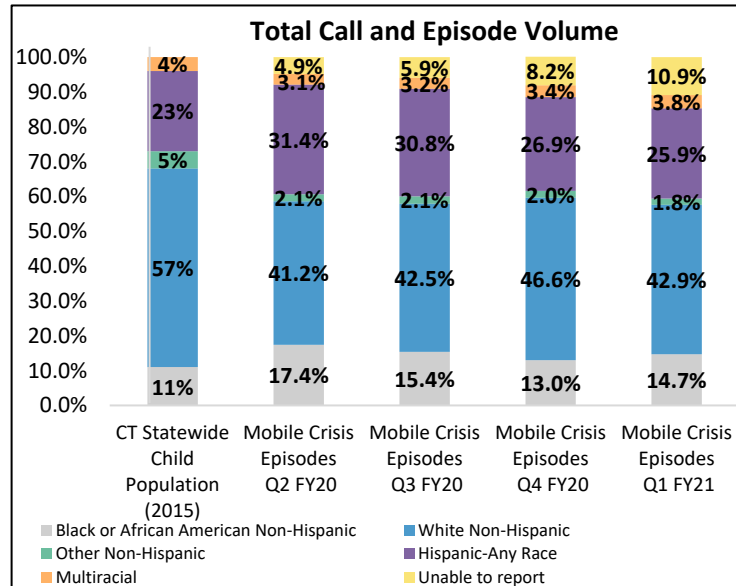
Quality of Life Result: Connecticut's children will live in stable environments, safe, healthy and ready to lead successful lives.

Contribution to the Result: 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. Mobile Crisis providers are expected to respond to all episodes of care. Partners with DCF include Child and Health Development Institute (CHDI) as the Performance Improvement Center.

Program Expenditures: Estimated SFY 2020

State Funding: \$11,970,297

How Much Did We Do?



	Q2 FY20	Q3 FY20	Q4 FY20	Q1 FY21
Mobile Crisis Episode	4,102	4,072	1,499	1,790
2-1-1 Only	1,518	1,430	600	578
Total	5,620	5,502	2,109	2,368

Story Behind the Baseline: In SFY 21 Q1 there were 2,368 total calls to the 2-1-1 Call Center resulting in 1,790 episodes of care. Compared to the same quarter in SFY 20 this represents a decrease in 2-1-1 calls of 28.6% (948 fewer calls) and a decrease in mobile episodes of 25.8% (621 fewer episodes). This quarter continued to be affected by the COVID-19 pandemic. Though Mobile Crisis was still operational, there remained a decrease in call volume, though not to the same extent as during FY20 Q4. The percentages of both Black and Hispanic children served is higher than the statewide population percentages, while the percentage of White children is lower. Compared to SFY 19 Q4, the racial composition percentages of children served are similar.

Trend: ↓

Episodes Per Child

Episode	SFY 2020 Q2			SFY 2020 Q3			SFY 2020 Q4			SFY 2021 Q1		
	DCF Child	Non-DCF Child	Total	DCF Child	Non-DCF Child	Total	DCF Child	Non-DCF Child	Total	DCF Child	Non-DCF Child	Total
1	272 (82.7%)	1,918 (89.9%)	2,190	304 (86.1%)	1,923 (91.3%)	2,227	62 (91.2%)	363 (93.8%)	425	110 (85.3%)	660 (91.0%)	770
2	46 (14.0%)	170 (8.0%)	216	37 (10.5%)	146 (6.9%)	183	5 (7.4%)	21 (5.4%)	26	16 (12.4%)	54 (7.4%)	70
3	10 (3.0%)	33 (1.5%)	43	9 (2.5%)	32 (1.5%)	41	0 (0.0%)	1 (0.3%)	1	3 (2.3%)	7 (1.0%)	10
4 or more	1 (0.3%)	12 (0.6%)	13	3 (0.8%)	6 (0.3%)	9	1 (1.5%)	2 (0.5%)	3	0 (0.0%)	4 (0.6%)	4

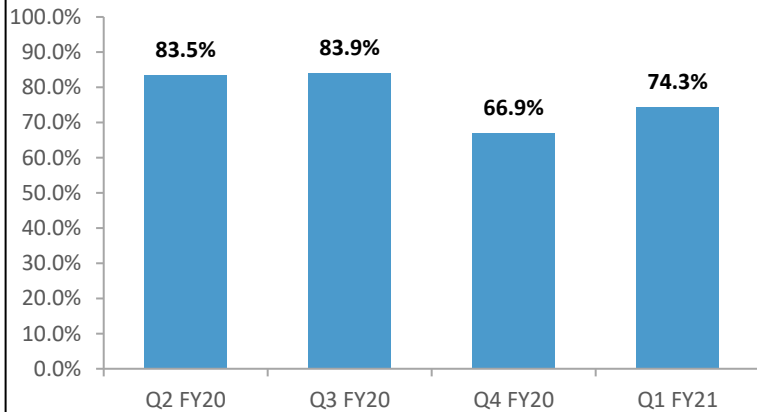
Story Behind the Baseline: In SFY 21 Q1 of the 854* children served by Mobile Crisis, 90.2% (770) received only one episode of care, and 98.4% (840) received one or two episodes of care; compared to 88.5% (1,245) and 97.4% (1,370) respectively for SFY 20 Q1. The proportion of children with four or more is slightly lower than SFY 20 Q1. The data indicates that Mobile Crisis involvement with a youth and their family continues to significantly reduce the need for additional Mobile Crisis services.

Trend: →

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

How Well Did We Do?

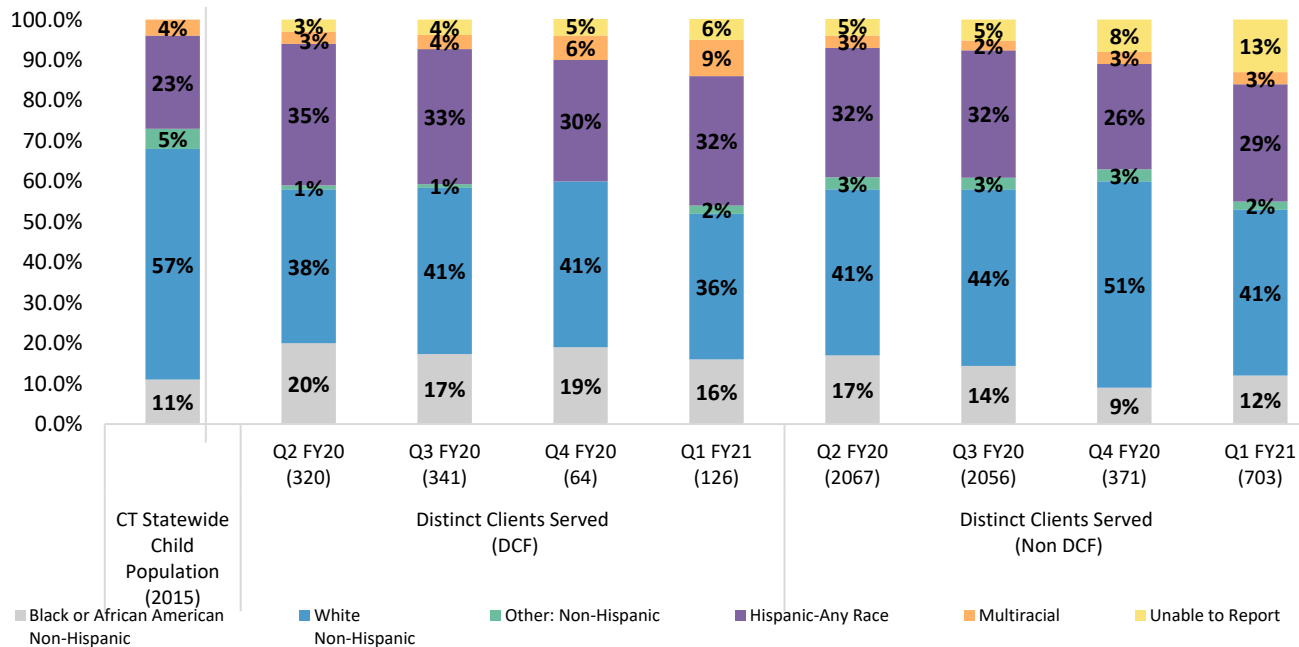
Statewide Response Time Under 45 Minutes



Story Behind the Baseline: In SFY 21 Q1 74.3% of all mobile responses achieved the 45 minute mark compared to 86.4% for SFY 20 Q1. **The median response time for SFY 20 Q1 was 33 minutes.** While providers continued to offer mobile responses in homes and community settings, many episodes received a phone or video telehealth response due to COVID-19 related concerns and closures. Additionally, for those episodes where clinicians did go into homes or the community, it often took extra time to coordinate with families in order to take proper precautions. Clinicians were also responding from their homes due to office closures, often resulting in longer travel times. Multiple challenges resulting from the COVID-19 pandemic, including the lack of an effective way to capture telehealth in the data, make it inadvisable to compare response times and rates across quarters. Despite these challenges, Mobile Crisis continues to be a highly responsive statewide service system that is immediately present to engage and deescalate a crisis and return stability to the child and family, school or other setting they are in.

Trend: ↓

Race & Ethnicity of DCF & Non DCF Clients Served



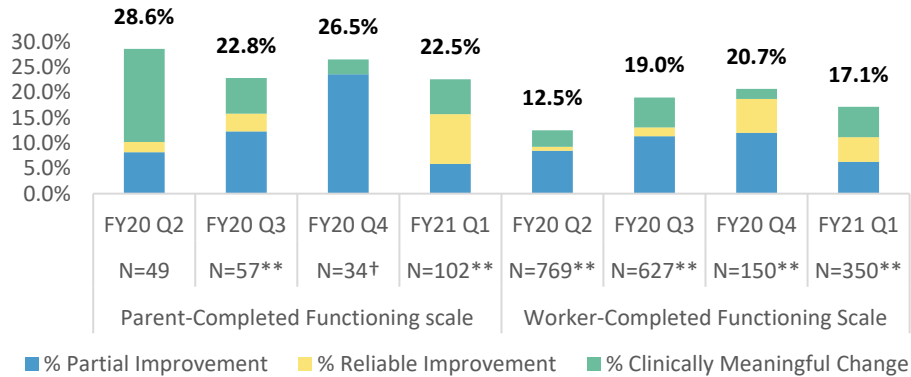
Story Behind the Baseline: In SFY 21 Q1 Hispanic and Black DCF involved children^{1,2} accessed Mobile Crisis services at rates higher than the CT general population. Both DCF and Non-DCF-involved White children accessed the service at lower rates. White Non-DCF-involved children utilized Mobile Crisis at higher rates than their DCF-involved counterparts. Both Hispanic and Black DCF-involved children utilized Mobile Crisis at higher rates than Hispanic and Black Non-DCF involved children.

Notes: ¹Only children having their DCF or non-DCF status as well as race/ethnicity identified were included. ²For the Distinct Clients served some had multiple episodes as identified above in Episodes per Child.

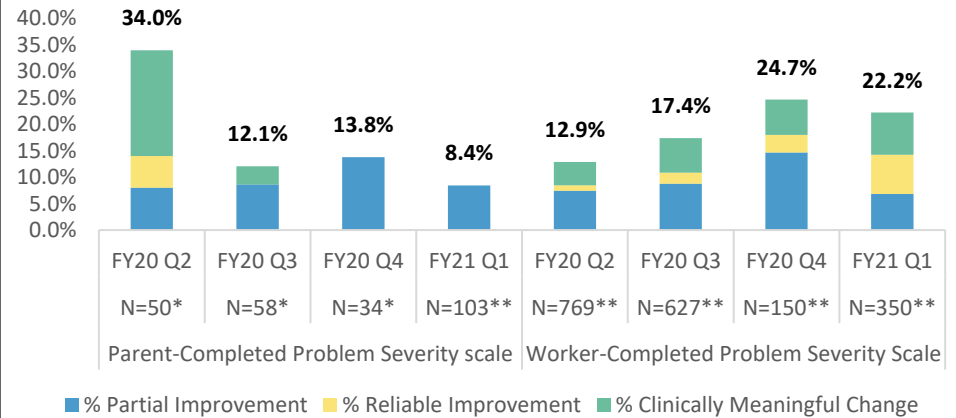
Trend: →

Is Anyone Better Off?

Improvement in Functioning as Measured by the Ohio Scales



Improvement in Problem Severity as Measured by the Ohio Scales



Story Behind the Baseline: The Ohio Scales have demonstrated clinically significant positive changes for children following a Mobile Crisis response. For SFY 21 Q1 all scales showed statistically significant change. Despite the relative short time of service engagement, the Ohio Scales reflect the continued effectiveness of Mobile Crisis in diffusing the immediate crisis and supporting the positive growth and success of youth. Note that the drop in the number of some Ohio Scales collected may be related to the decrease in call and episode volume and other challenges related to COVID-19.

Trend: →

Proposed Actions to Turn the Curve:

- Mobile Crisis providers will work with schools and Emergency Departments to reduce school utilization of ED's and increase utilization of Mobile Crisis.
- Continue outreach to Police Departments to support their ongoing collaboration with Mobile Crisis.
- Continue to increase the parent completion rates for the Ohio Scales.
- Review with each provider their self-care activities to support their clinical staff in being continuously effective in delivering Mobile Crisis services.
- Continue to review RBA report cards on a quarterly basis with each Mobile Crisis provider, with a focus on the racial and ethnic distributions of the children served in each region.
- Continue to monitor how providers are addressing COVID-19 challenges and providing additional supports or resources if needed.

Data Development Agenda:

- Utilize Mobile Crisis data to assess utilization and delivery of services across racial and ethnic groups and to identify opportunities to improve health equity.
- Work with providers to identify and accurately capture changes in volume and service delivery due to COVID-19.

Section II: Mobile Crisis Statewide/Service Area Dashboard

Figure 1. Total Call Volume by Call Type

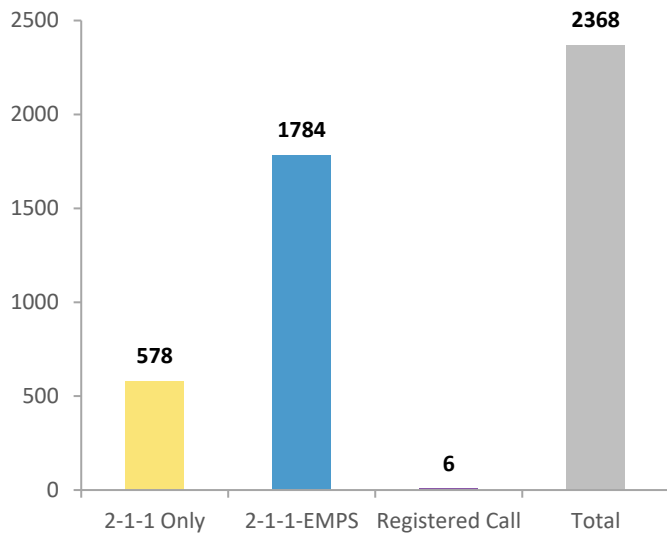


Figure 2. Total Call Volume per Quarter by Call Type

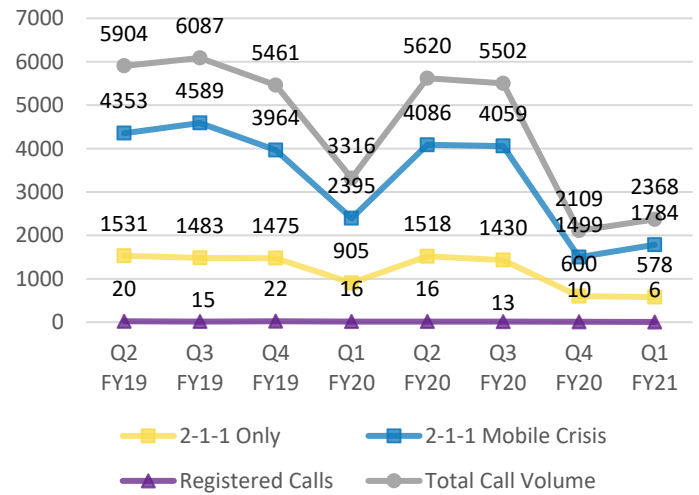
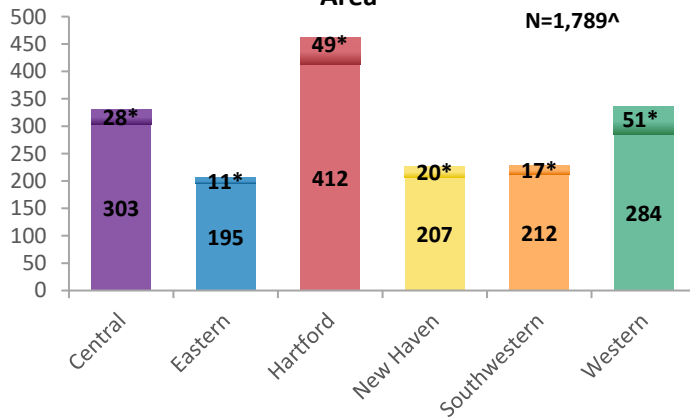


Figure 3. Mobile Crisis Episodes by Service Area



^1 Crisis-Response Follow-Up Call

Figure 4. Mobile Crisis Episodes per Quarter by Service Area

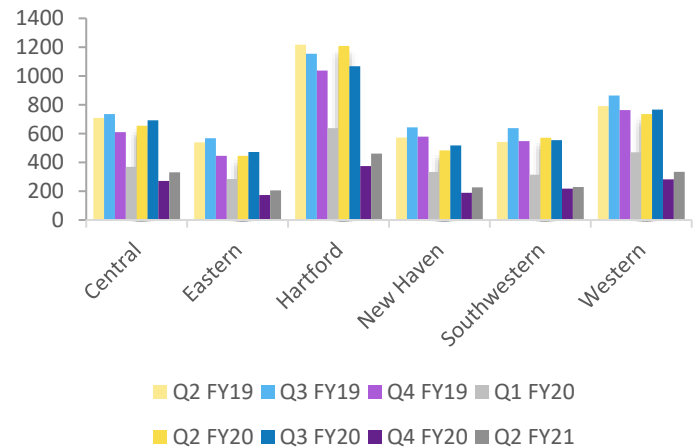


Figure 5. Number Served Per 1,000 Children

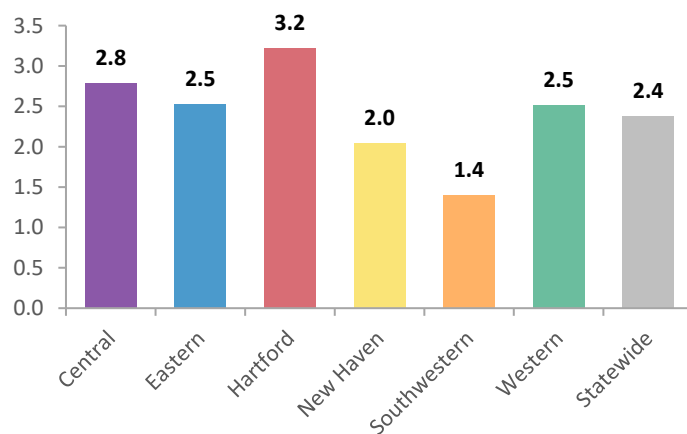


Figure 6. Number Served per 1,000 Children per Quarter by Service Area

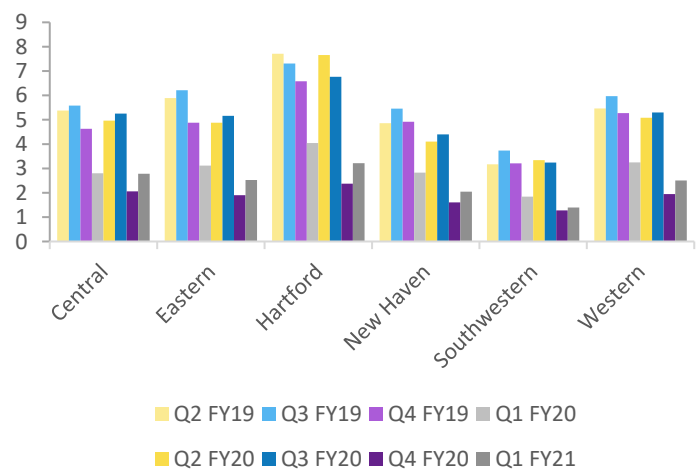


Figure 7. Number Served per 1,000 Children in Poverty

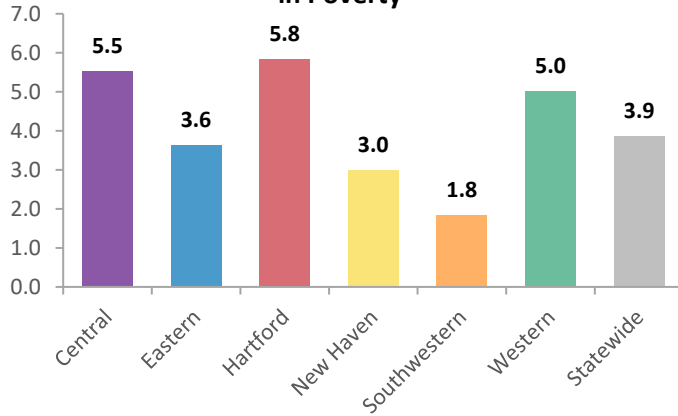


Figure 8. Number Served per 1,000 Children in Poverty per Quarter by Service Area

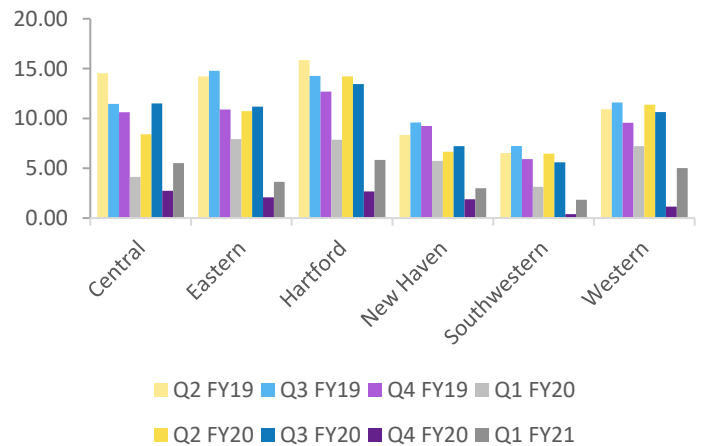
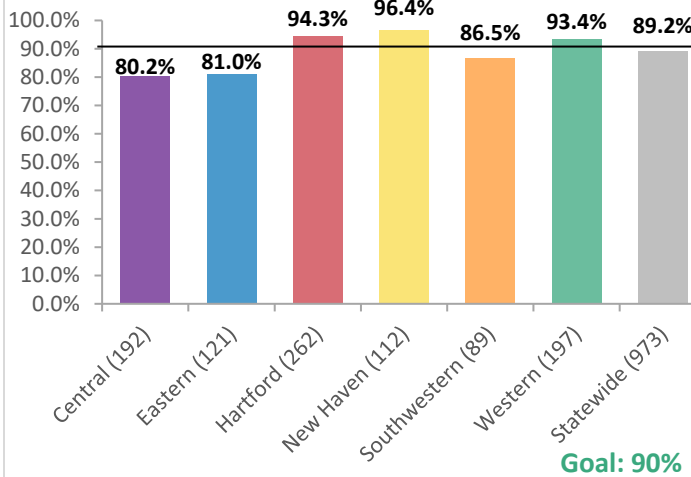


Figure 9. Mobile Response (Mobile and Deferred Mobile) by Service Area



Note: Total counts of 2-1-1 Mobile response recommendations are in parenthesis.

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

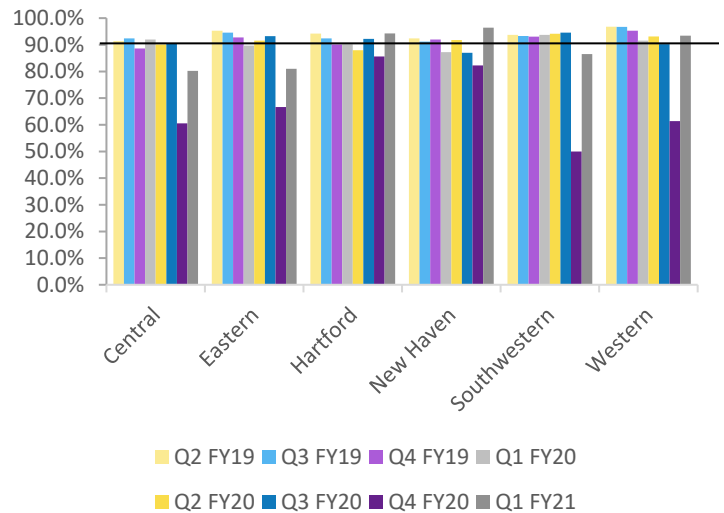
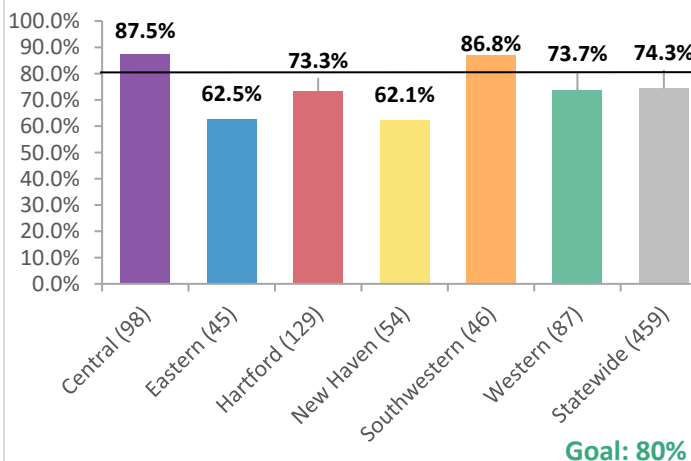


Figure 11. Total Mobile Episodes with a Response Time Under 45 Minutes



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

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

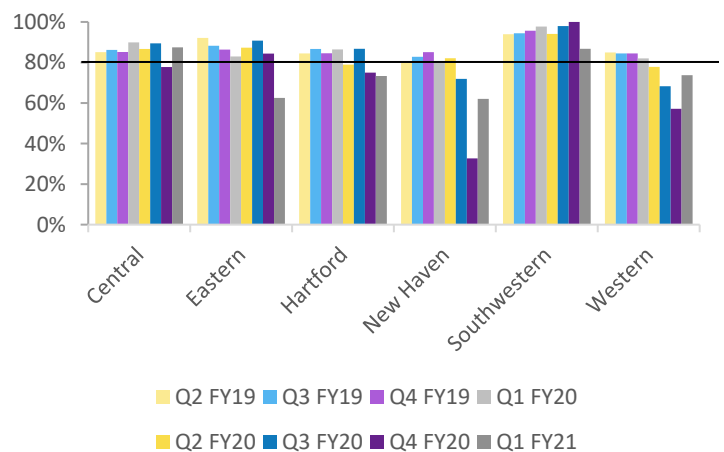
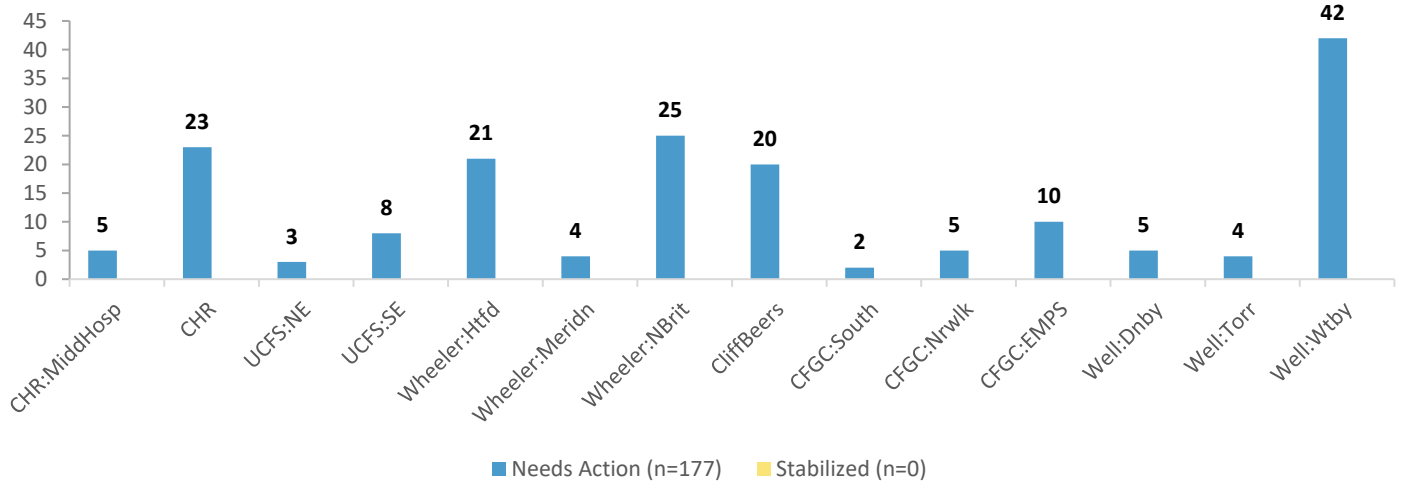


Figure 13. After Hours Follow-up Calls by Provider



Section III: Mobile Crisis Response

Figure 14. Total Call Volume by Call Type

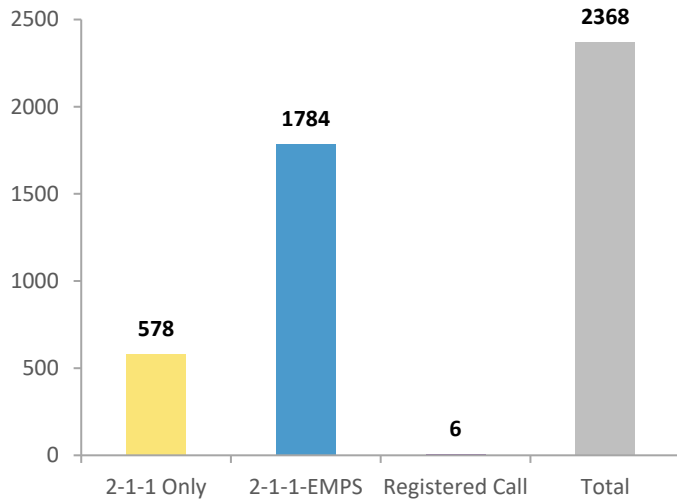


Figure 15. Statewide 2-1-1 Disposition Frequency

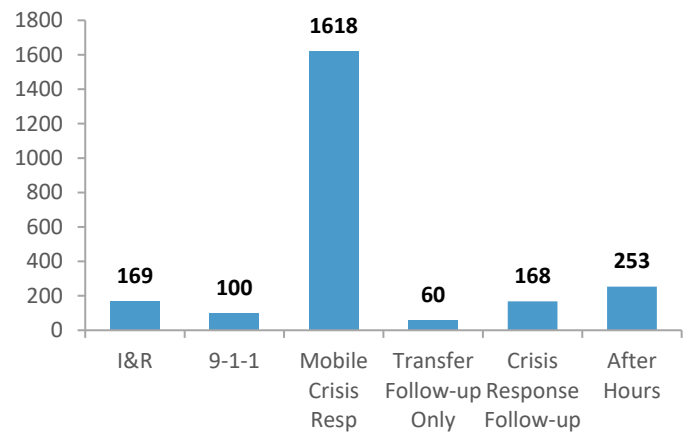
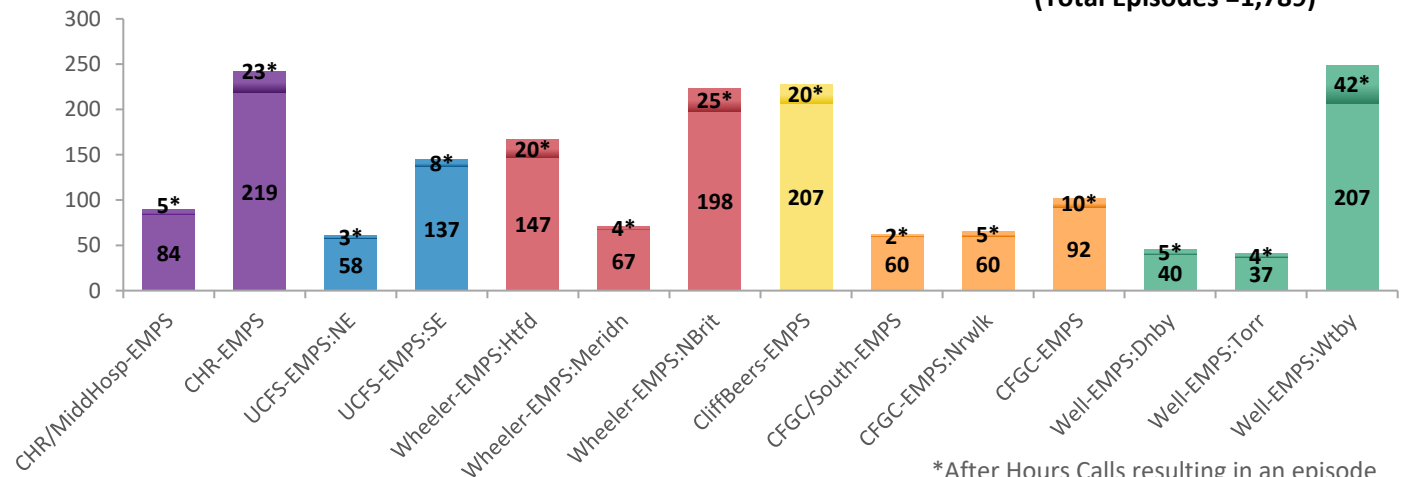


Figure 16. Mobile Crisis Response Episodes by Provider

(Total Episodes =1,789)



*After Hours Calls resulting in an episode

Figure 17. Number Served per 1,000 Children by Provider

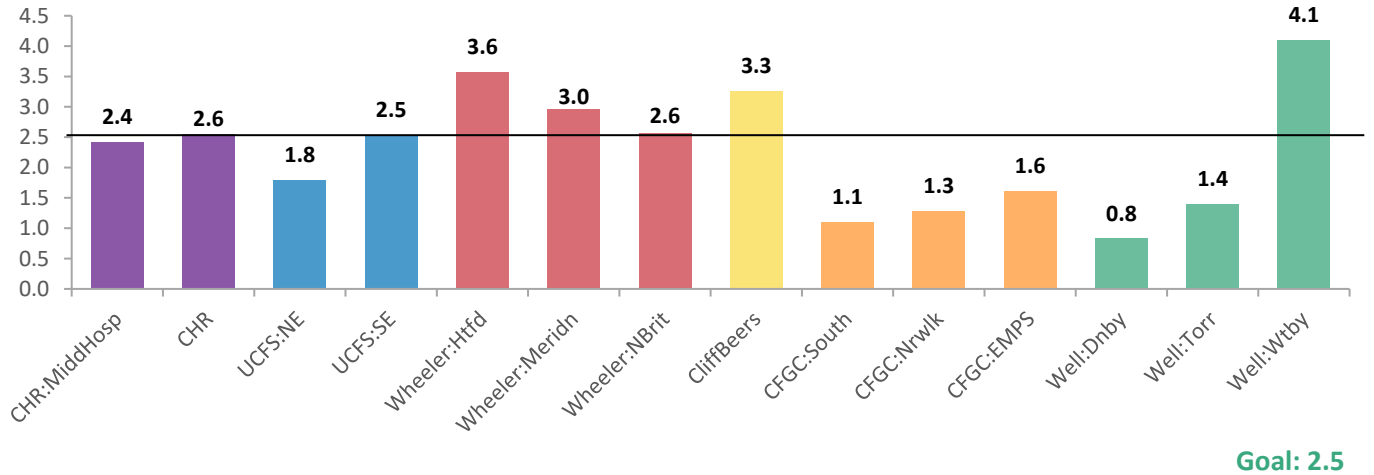


Figure 18. Episode Intervention Crisis Response Types by Service Area

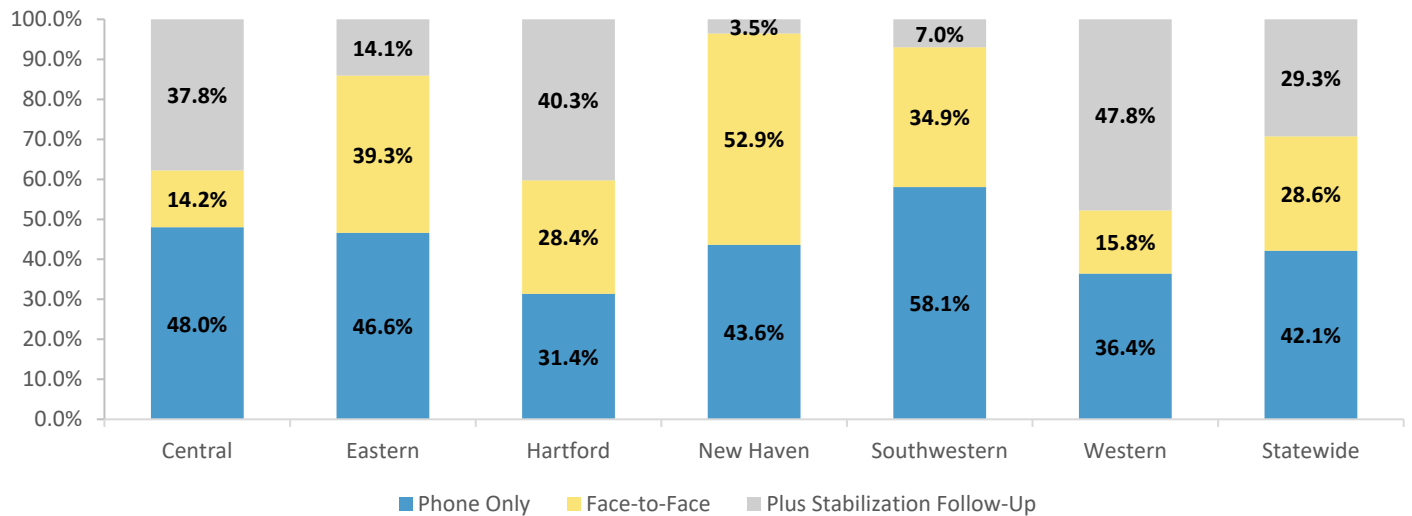
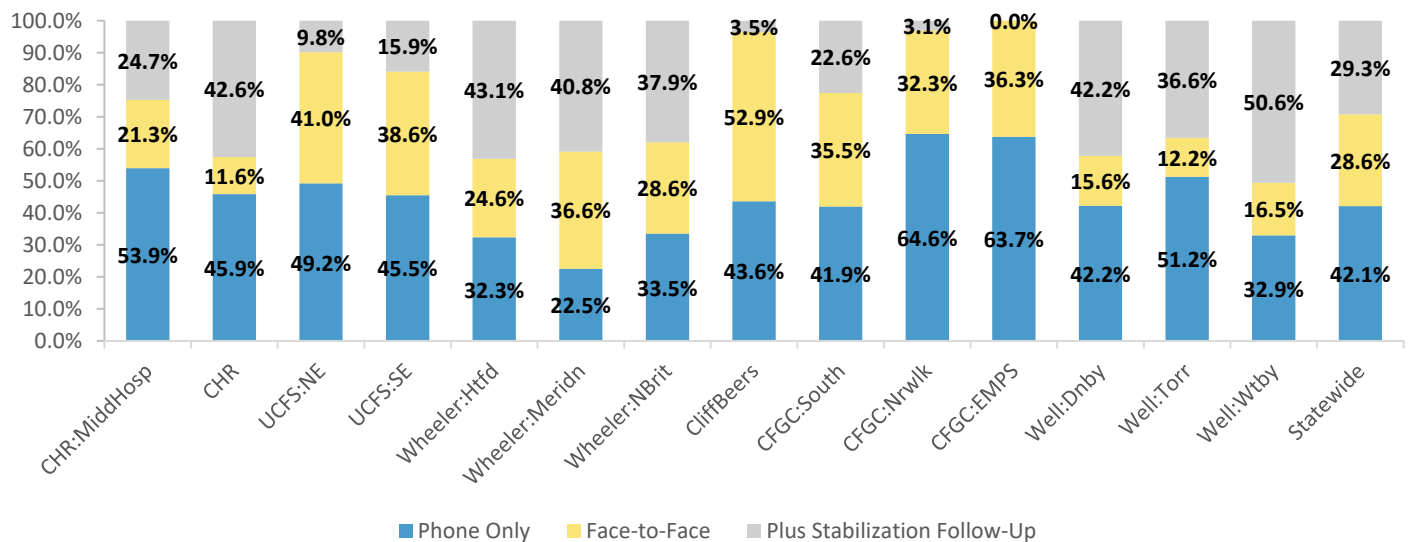


Figure 19. Episode Intervention Crisis Response Type by Provider



Section IV: Demographics

Figure 20. Sex of Children Served Statewide
(N = 1,790)

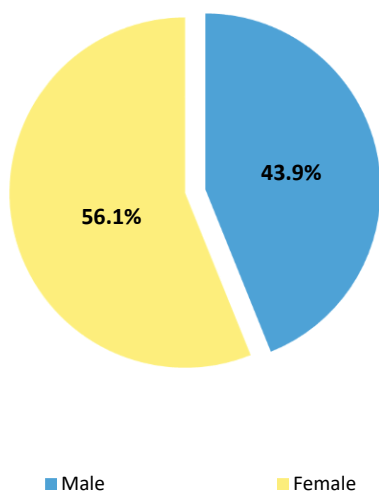


Figure 21. Age Groups of Children Served Statewide
(N = 1,790)

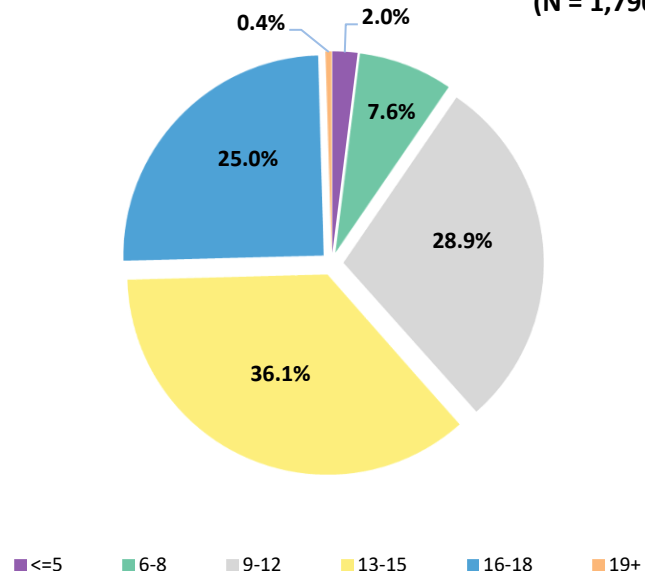


Figure 22. Ethnic Background of Children Served Statewide
(N = 1,763)

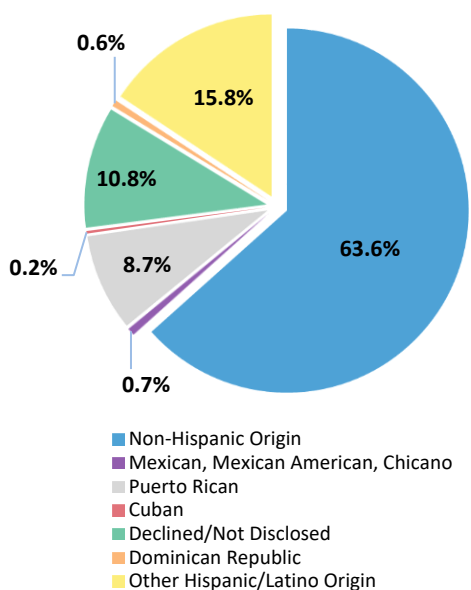
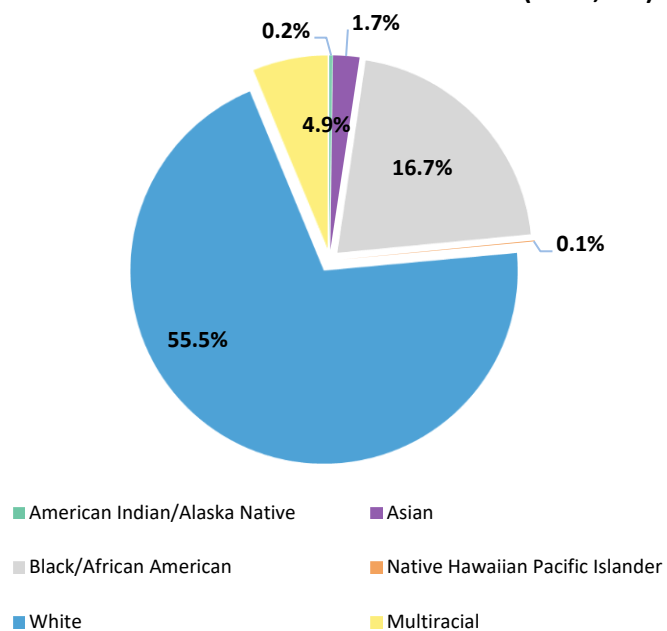


Figure 23. Race of Children Served Statewide
(N = 1,739)



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

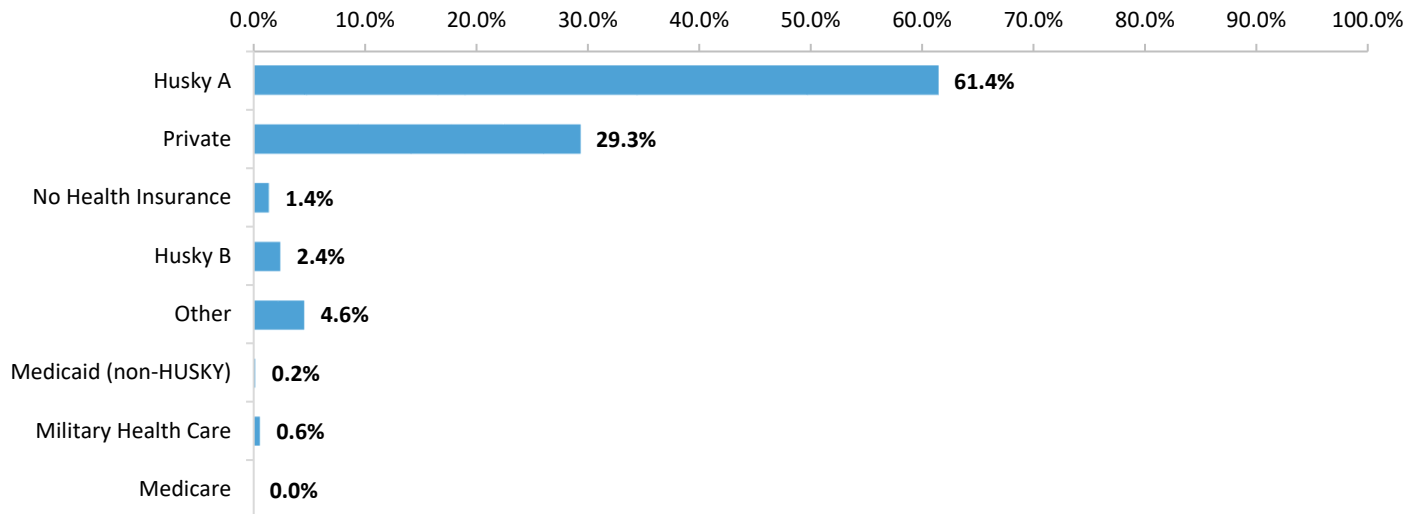
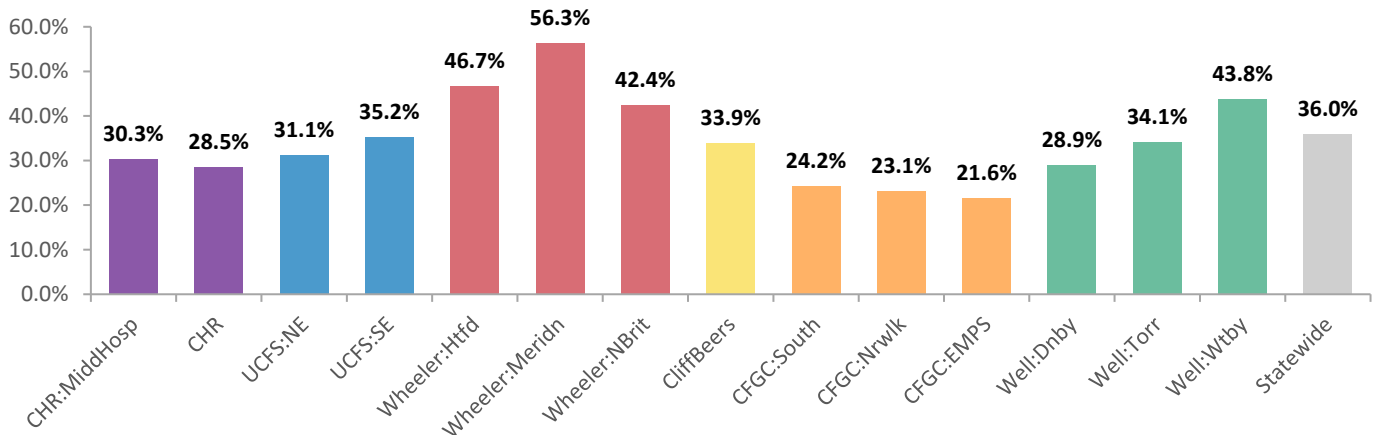
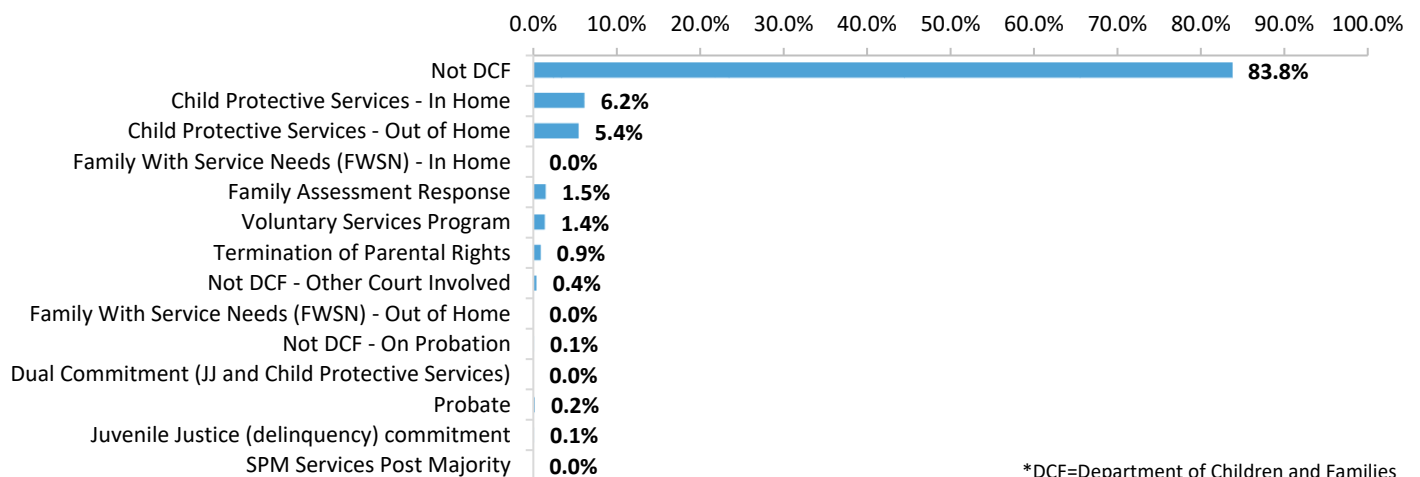


Figure 25. Families that Answered "Yes" TANF* Eligible



*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

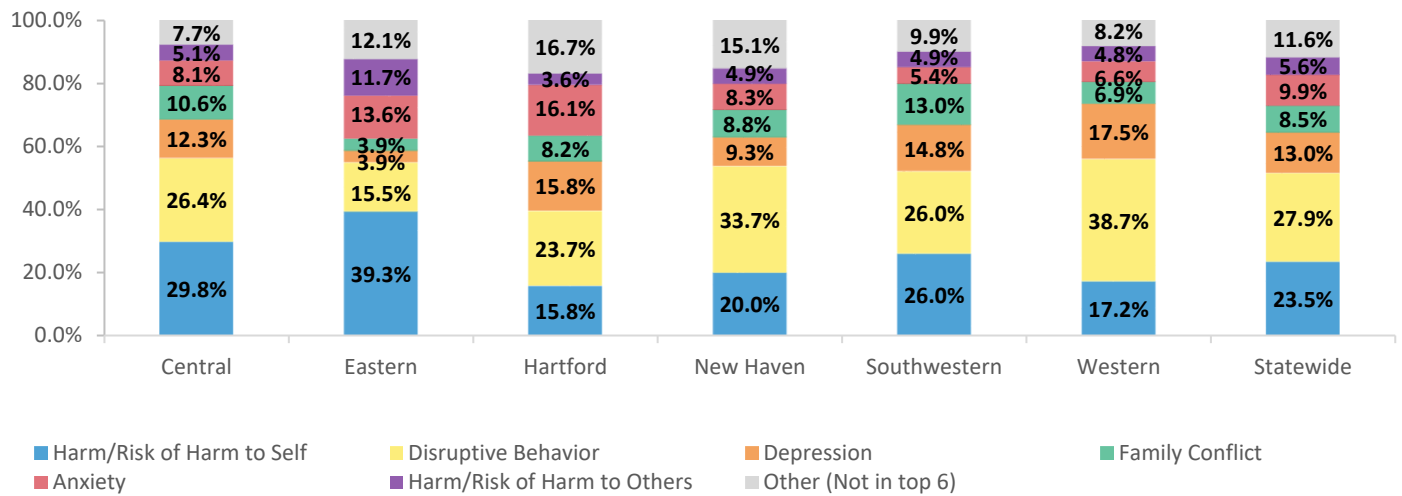


Figure 28. Distribution of Primary Diagnosis Categories at Intake Statewide

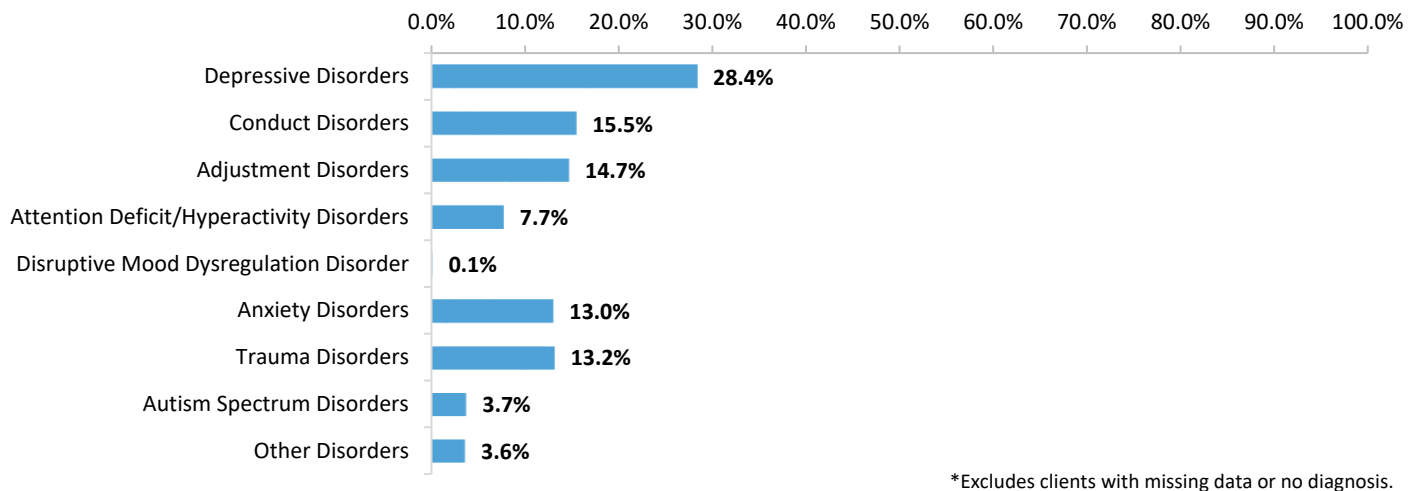


Figure 29. Distribution of Client Secondary Diagnosis Categories at Intake Statewide

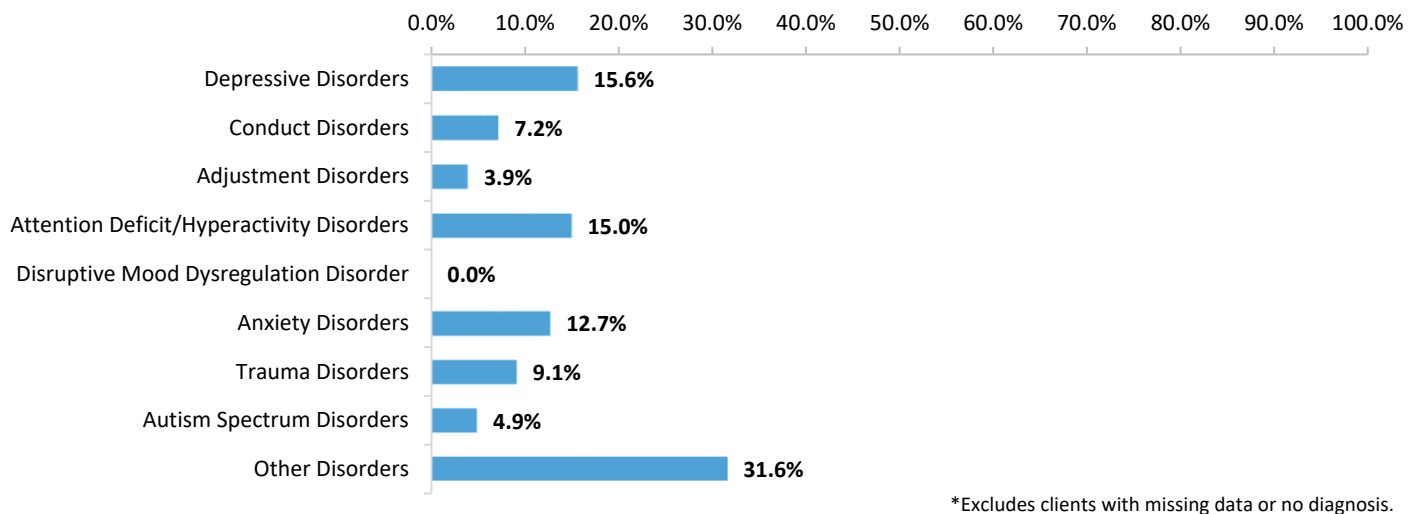


Figure 30. Top 6 Primary Diagnostic Categories at Intake by Service Area

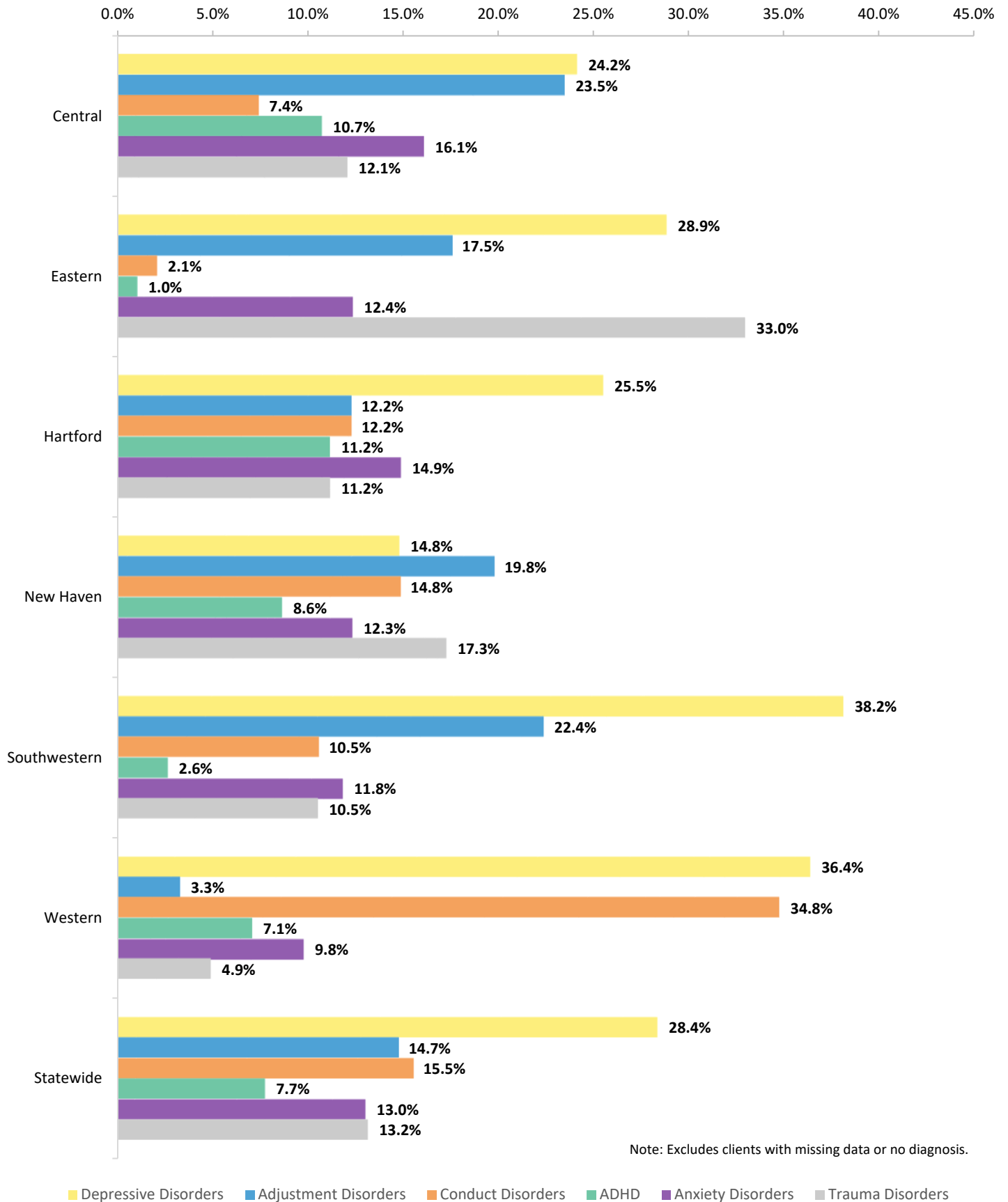


Figure 31. Top 6 Client Secondary Diagnostic Categories at Intake by Service Area

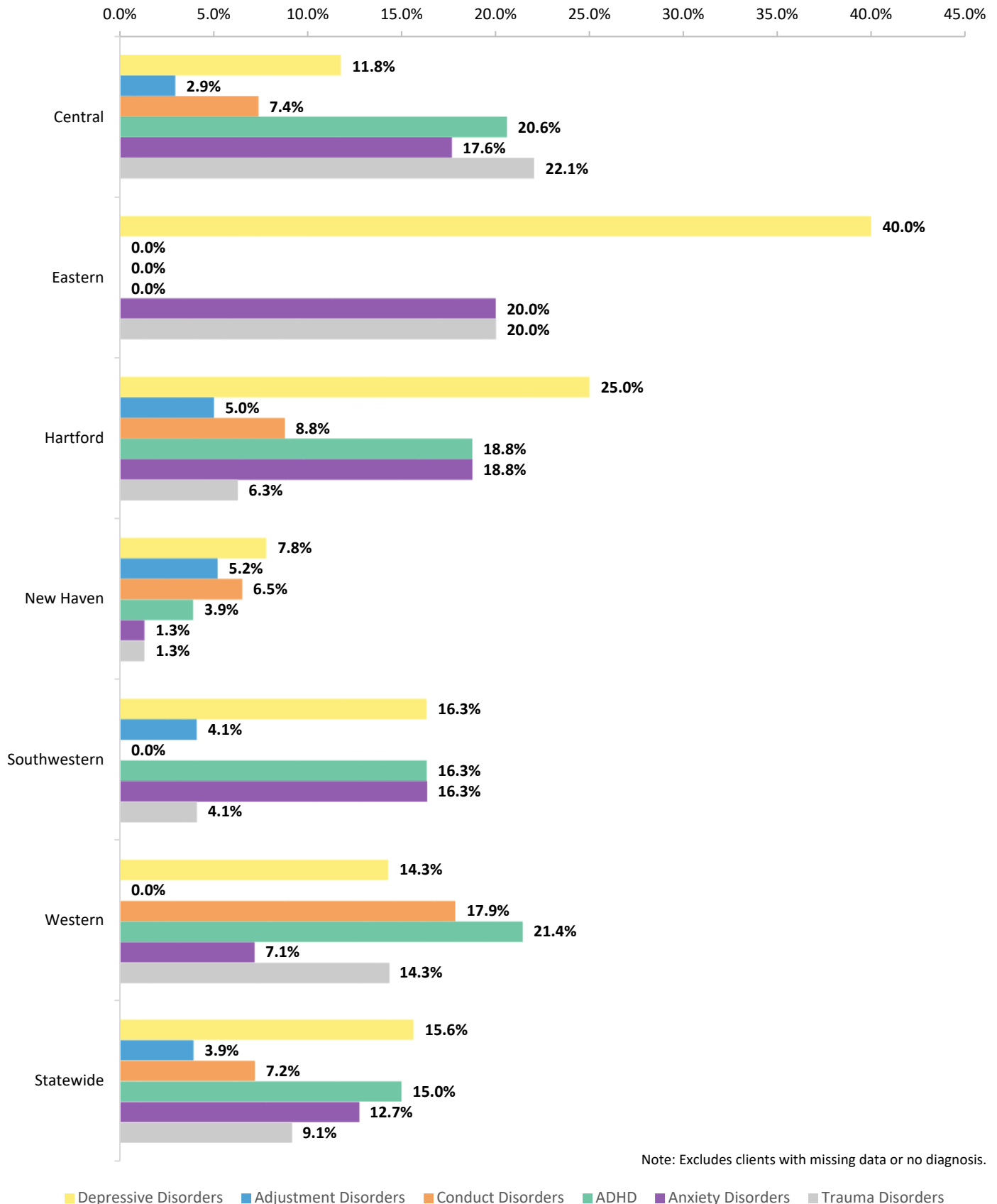


Figure 32. Children Meeting SED* Criteria by Service Area

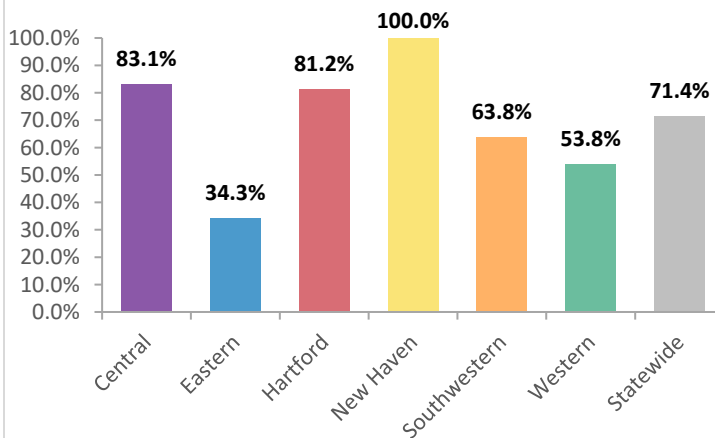


Figure 33. Children with Trauma Exposure Reported at Intake by Service Area

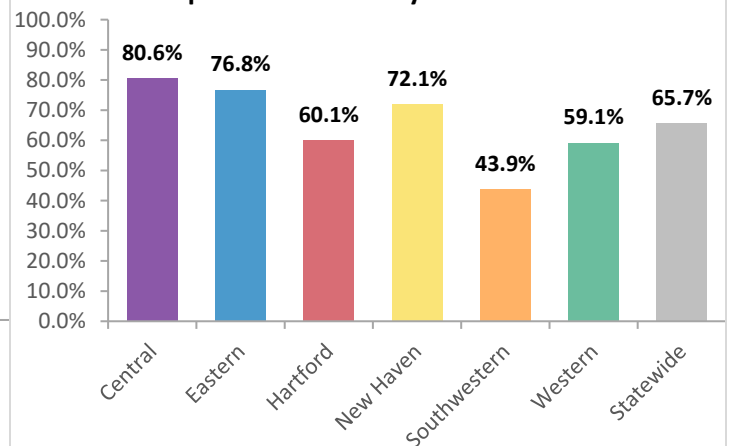


Figure 34. Type of Trauma Reported at Intake by Service Area

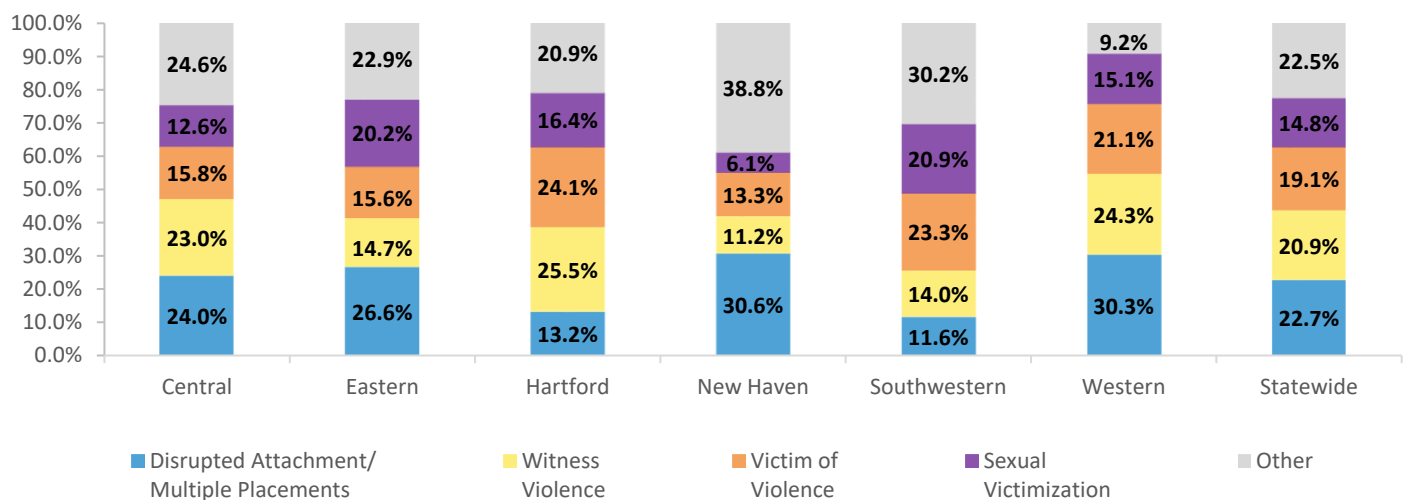


Figure 35. Clients Evaluated in an Emergency Dept. One or More Times in the Six Months Prior and During an Episode of Care

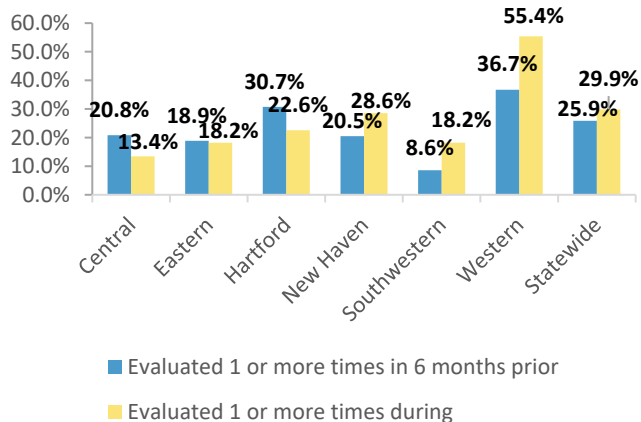
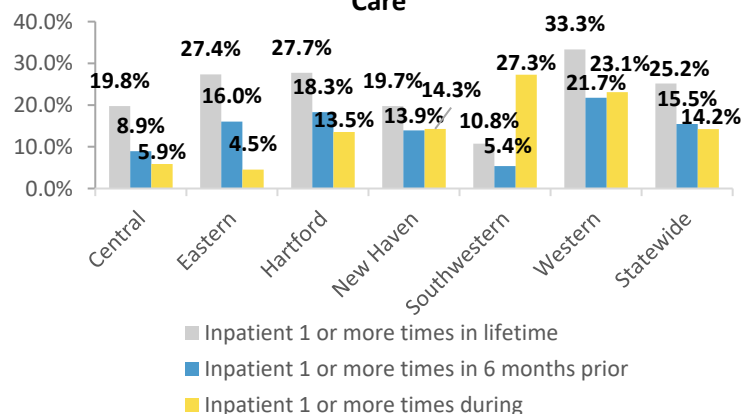


Figure 36. Clients Admitted to a Hospital (Inpatient) for Psychiatric or Behavioral Health Reasons One or More Times in His/Her Lifetime, in Six Months Prior and During the Episode of Care



Section VI: Referral Sources

Figure 37. Referral Sources Statewide

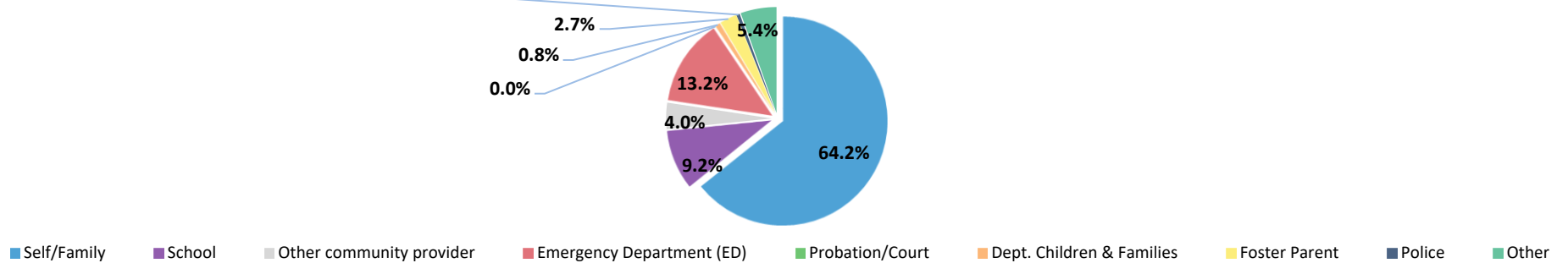
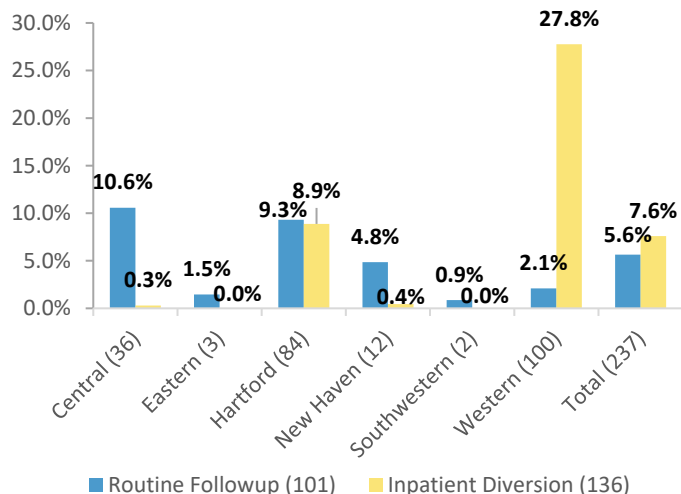


Table 1. Referral Sources (Q4 FY 2020)

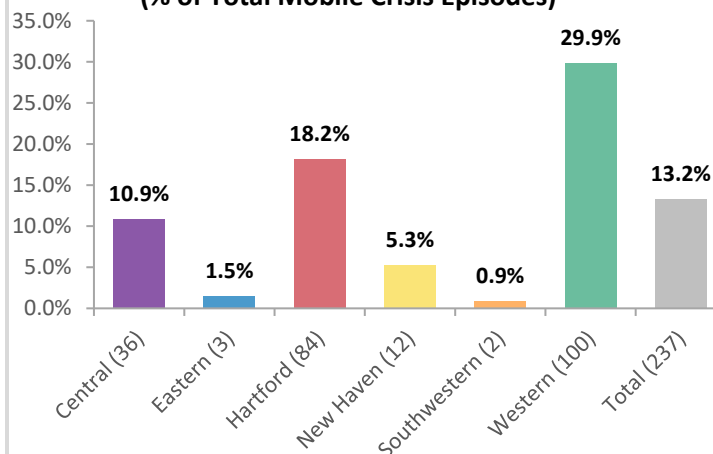
	Self/ Family	Family Adv.	School	Info- Line (2-1-1)	Other Prog. w/in Agency	Other Comm. Provider	Emer Dept. (ED)	Prob. or Court	Dept. of Child & Families (DCF)	Psych Hospital	Cong. Care Facility	Foster Parent	Police	Phys.	Comm. Nat. Supp.	Other State Agency
STATEWIDE	64.2%	0.2%	9.2%	0.0%	1.0%	4.0%	13.2%	0.0%	0.8%	3.1%	0.2%	2.7%	0.5%	0.7%	0.2%	0.0%
CENTRAL	63.1%	0.3%	9.1%	0.0%	1.8%	3.9%	10.9%	0.0%	0.9%	5.4%	0.0%	3.9%	0.0%	0.3%	0.3%	0.0%
CHR:MidHosp	68.5%	0.0%	6.7%	0.0%	1.1%	4.5%	11.2%	0.0%	0.0%	3.4%	0.0%	4.5%	0.0%	0.0%	0.0%	0.0%
CHR	61.2%	0.4%	9.9%	0.0%	2.1%	3.7%	10.7%	0.0%	1.2%	6.2%	0.0%	3.7%	0.0%	0.4%	0.4%	0.0%
EASTERN	73.8%	0.0%	8.3%	0.0%	0.5%	8.3%	1.5%	0.0%	0.0%	3.9%	0.0%	1.9%	0.5%	1.5%	0.0%	0.0%
UCFS:NE	82.0%	0.0%	3.3%	0.0%	0.0%	6.6%	1.6%	0.0%	0.0%	3.3%	0.0%	3.3%	0.0%	0.0%	0.0%	0.0%
UCFS:SE	70.3%	0.0%	10.3%	0.0%	0.7%	9.0%	1.4%	0.0%	0.0%	4.1%	0.0%	1.4%	0.7%	2.1%	0.0%	0.0%
HARTFORD	60.0%	0.2%	8.9%	0.0%	0.4%	4.1%	18.2%	0.0%	0.4%	4.1%	0.2%	2.2%	0.4%	0.6%	0.2%	0.0%
Wheeler:Htfd	36.5%	0.0%	8.4%	0.0%	0.0%	4.8%	37.7%	0.0%	0.6%	7.2%	0.6%	3.6%	0.6%	0.0%	0.0%	0.0%
Wheeler:Meridn	71.8%	0.0%	9.9%	0.0%	2.8%	2.8%	5.6%	0.0%	0.0%	1.4%	0.0%	2.8%	0.0%	2.8%	0.0%	0.0%
Wheeler:NBrit	73.7%	0.4%	8.9%	0.0%	0.0%	4.0%	7.6%	0.0%	0.4%	2.7%	0.0%	0.9%	0.4%	0.4%	0.4%	0.0%
NEW HAVEN	74.4%	0.0%	6.6%	0.0%	1.3%	2.6%	5.3%	0.0%	2.2%	0.4%	0.0%	4.8%	0.9%	0.9%	0.4%	0.0%
CliffBeers	74.4%	0.0%	6.6%	0.0%	1.3%	2.6%	5.3%	0.0%	2.2%	0.4%	0.0%	4.8%	0.9%	0.9%	0.4%	0.0%
SOUTHWESTERN	77.3%	0.0%	13.1%	0.0%	0.9%	2.2%	0.9%	0.0%	0.9%	1.3%	0.4%	1.7%	0.9%	0.4%	0.0%	0.0%
CFG:South	79.0%	0.0%	14.5%	0.0%	1.6%	3.2%	0.0%	0.0%	0.0%	1.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
CFG:Nrwk	83.1%	0.0%	7.7%	0.0%	0.0%	1.5%	0.0%	0.0%	1.5%	0.0%	0.0%	3.1%	3.1%	0.0%	0.0%	0.0%
CFG:EMPS	72.5%	0.0%	15.7%	0.0%	1.0%	2.0%	2.0%	0.0%	1.0%	2.0%	1.0%	2.0%	0.0%	1.0%	0.0%	0.0%
WESTERN	49.6%	0.6%	9.3%	0.0%	1.2%	3.3%	29.9%	0.0%	0.6%	1.8%	0.6%	1.8%	0.6%	0.9%	0.0%	0.0%
Well:Dnby	71.1%	4.4%	17.8%	0.0%	0.0%	4.4%	0.0%	0.0%	0.0%	2.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Well:Torr	58.5%	0.0%	9.8%	0.0%	2.4%	0.0%	9.8%	0.0%	0.0%	9.8%	2.4%	0.0%	4.9%	2.4%	0.0%	0.0%
Well:Wtby	44.2%	0.0%	7.6%	0.0%	1.2%	3.6%	38.6%	0.0%	0.8%	0.4%	0.4%	2.4%	0.0%	0.8%	0.0%	0.0%

Figure 38. Type of Emergency Dept. Referral



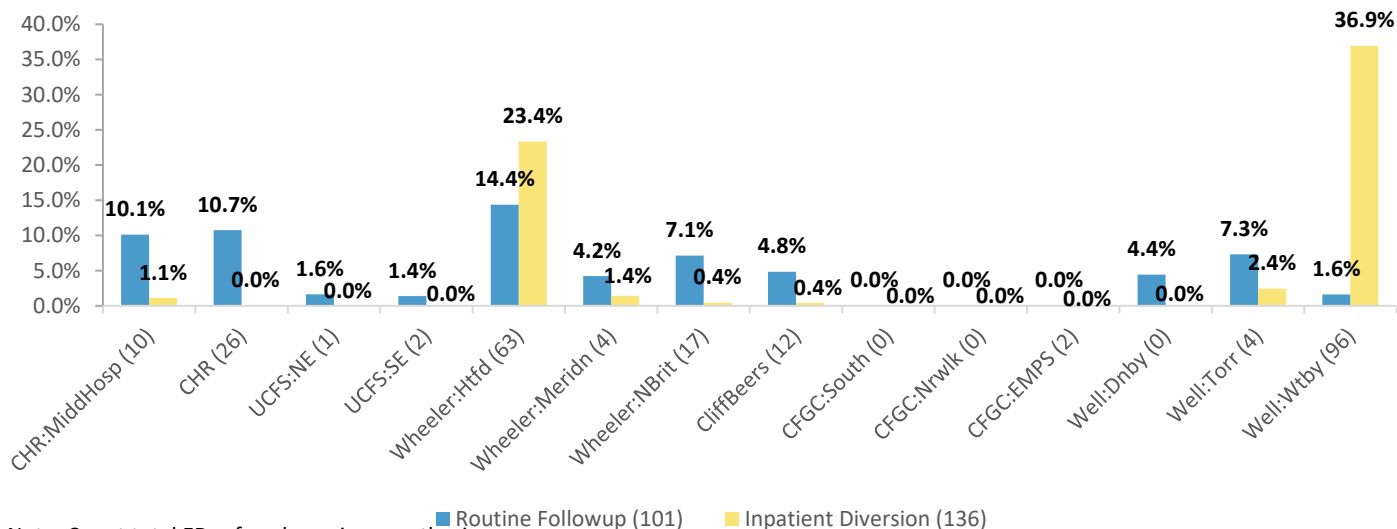
Note: Count total ED referrals are in parenthesis

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



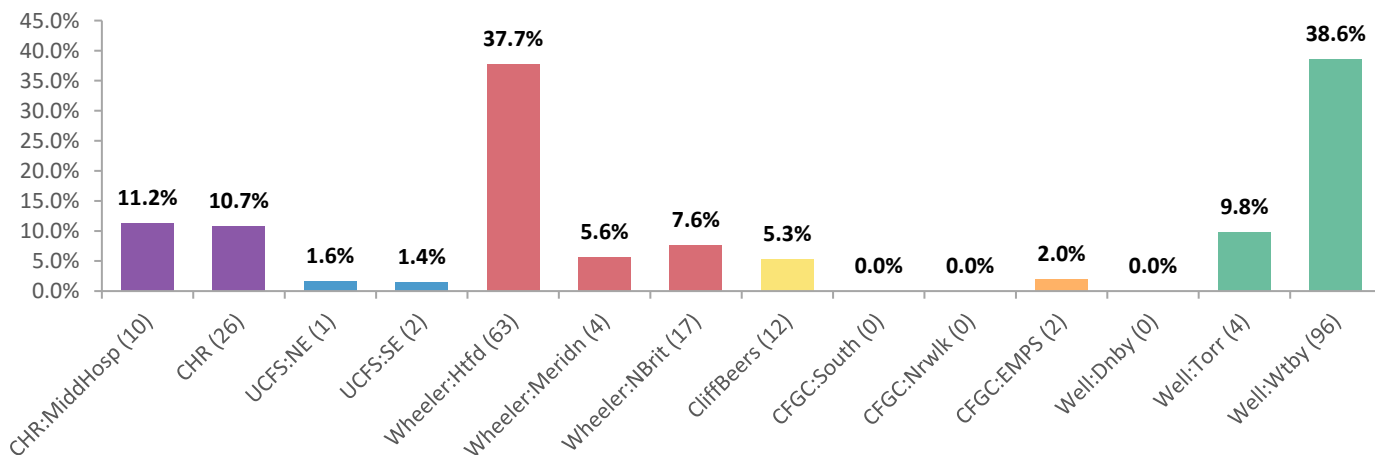
Note: Count total ED referrals are in parenthesis

Figure 40. Type of Emergency Department Referrals by Provider



Note: Count total ED referrals are in parenthesis

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



Note: Count total ED referrals are in parenthesis.

Section VII: 2-1-1 Recommendations and Mobile Crisis Response

Figure 42. 2-1-1 Recommended Initial Response

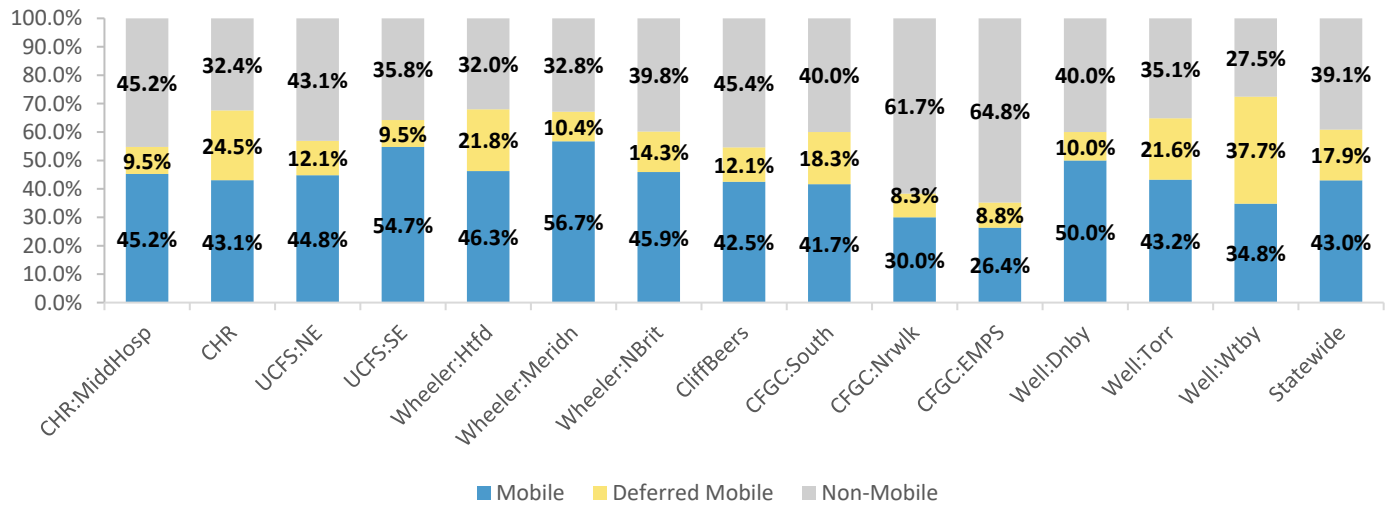


Figure 43. Actual Initial Mobile Crisis Provider Response

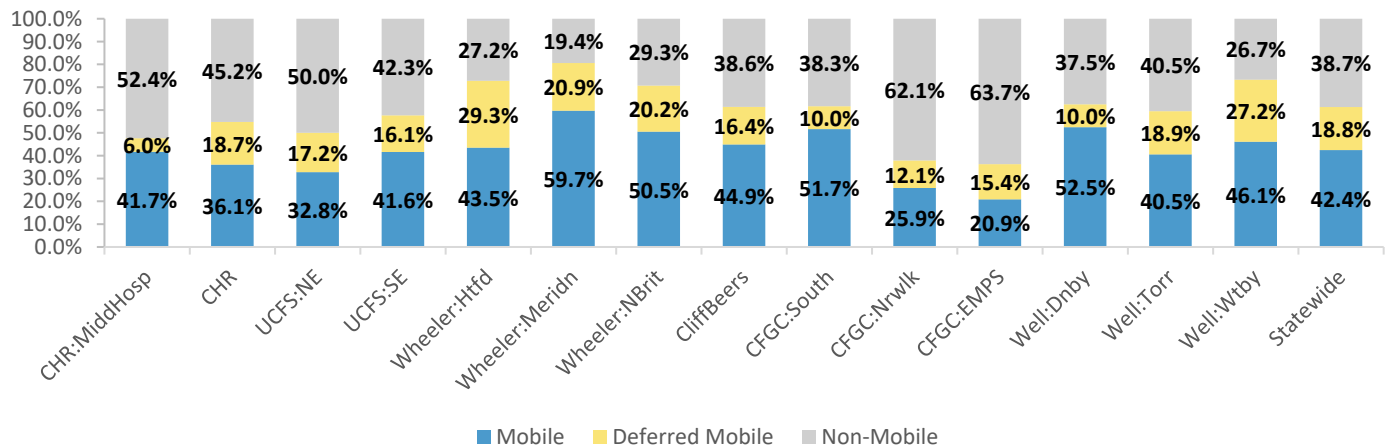
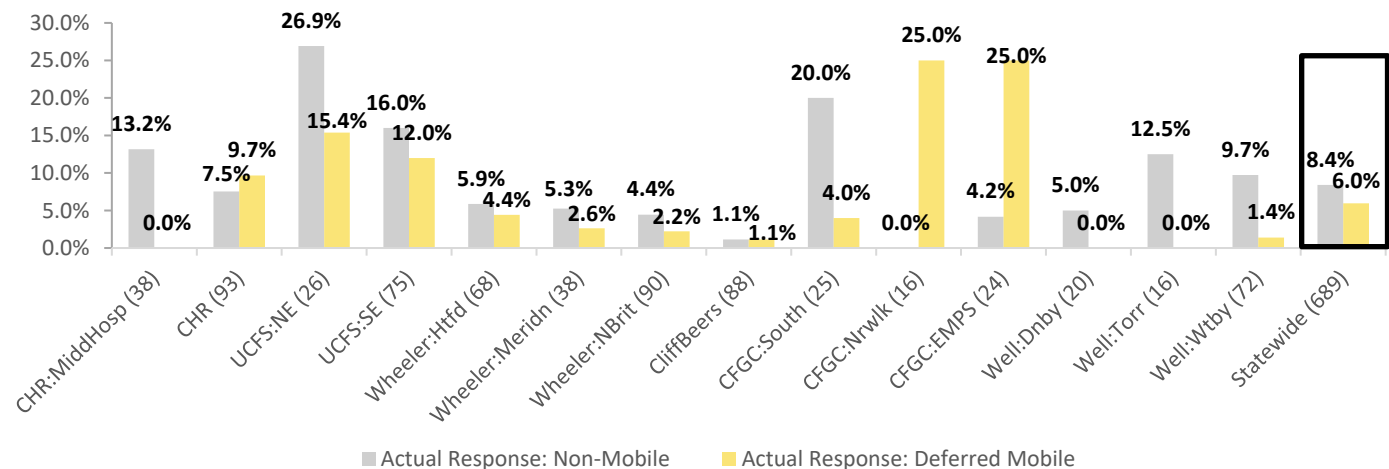
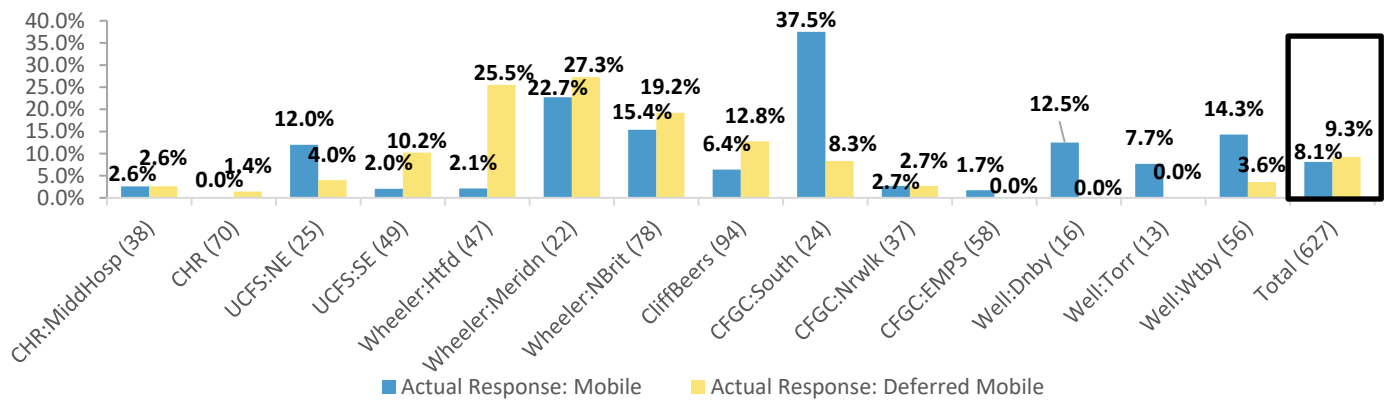


Figure 44. 2-1-1 Recommended Mobile Response Where Actual Mobile Crisis Response was Non-Mobile or Deferred Mobile



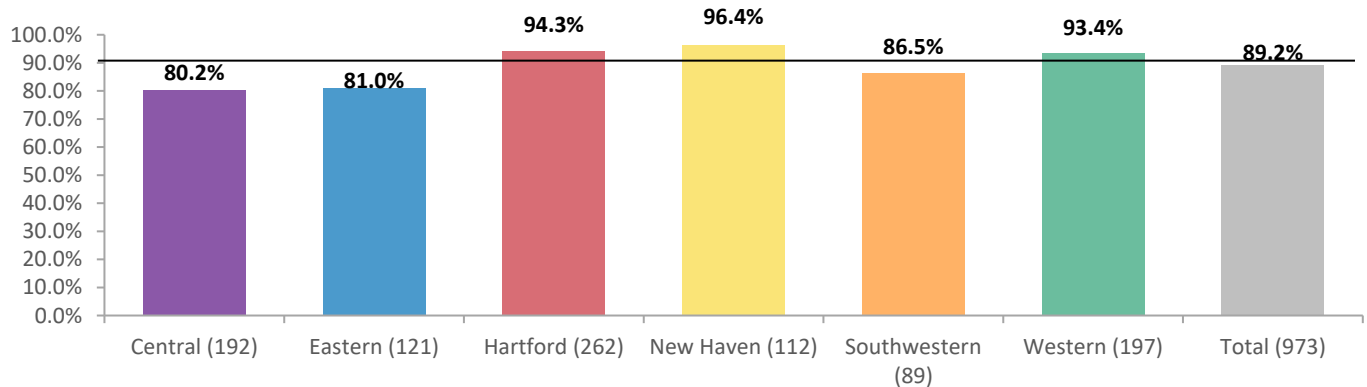
Note: Total counts of 2-1-1 Mobile response recommendations are in parenthesis.

Figure 45. 2-1-1 Recommended Non-Mobile Response Where Actual Mobile Crisis Response was Mobile or Deferred Mobile



Note: Total counts of 2-1-1 Mobile response recommendations are in parenthesis.

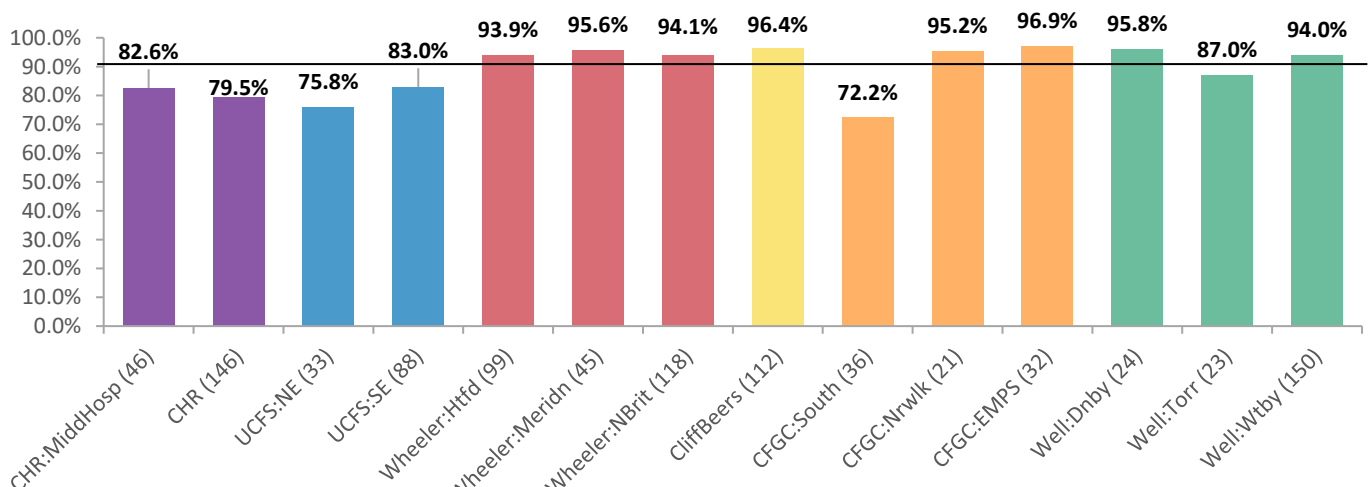
Figure 46. Mobile Response (Mobile & Deferred Mobile) By Service Area



Note: Total counts of 2-1-1 Mobile response recommendations are in parenthesis.

Goal: 90%

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

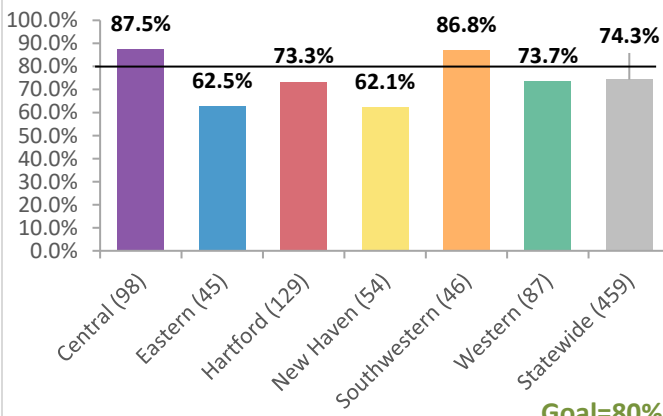


Note: Counts of 211-recommended mobile episodes are in parenthesis

Goal: 90%

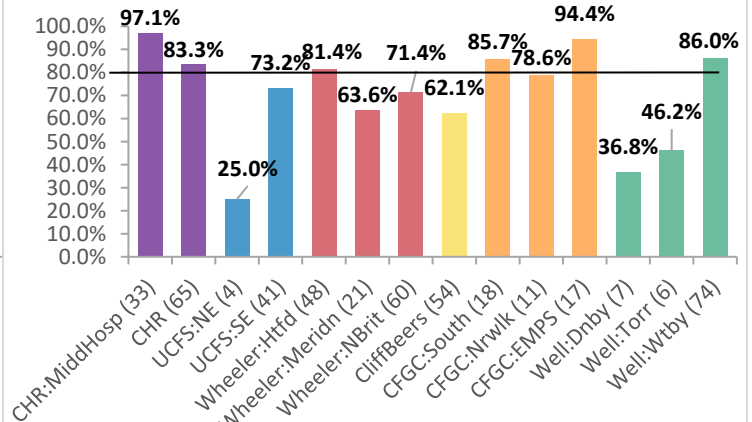
Section VIII: Response Time

Figure 48. Total Mobile Episodes with a Reponse Time Under 45 Minutes



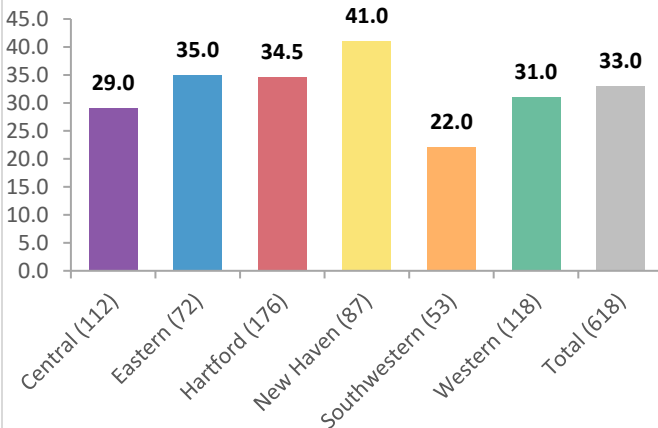
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

Figure 49. Total Mobile Episodes with a Response Time Under 45 Minutes by Provider



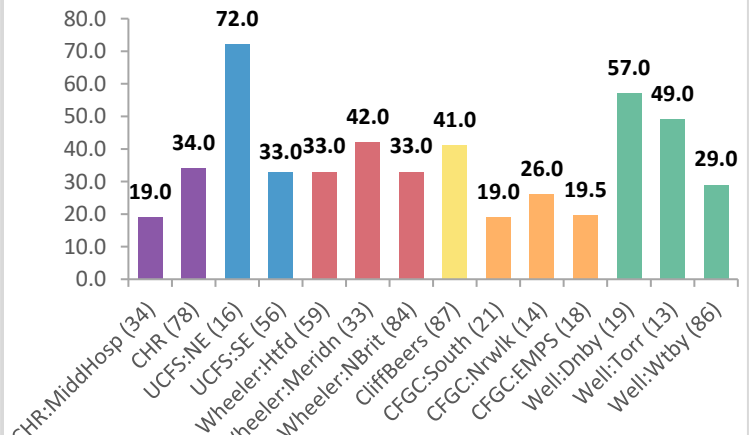
Note: Counts of mobile episodes under 45 mins. are in parenthesis.

Figure 50. Median Mobile Response Time by Service Area in Minutes



Note: Counts of mobile response episodes are in parenthesis.

Figure 51. Median Mobile Response Time by Provider in Minutes



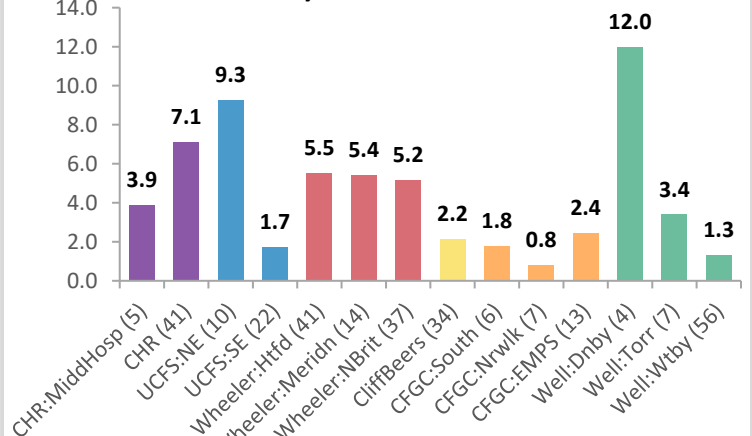
Note: Counts of mobile response episodes are in parenthesis.

Figure 52. Median Deferred Mobile Response Time by Provider in Hours



Note: Counts of deferred mobile response episodes are in parenthesis.

Figure 53. Median Deferred Mobile Response Time by Provider in Hours



Note: Counts of deferred mobile response episodes are in parenthesis.

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
		Discharged Episodes for Current Reporting Period									Cumulative Discharged Episodes*								
		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	1.1	6.6	12.4	0.0	3.0	9.0	17.4%	30.6%	0.8%	1.1	6.6	12.4	0.0	3.0	9.0	17.4%	30.6%	0.8%
2	Central	2.6	7.0	12.7	1.0	4.0	11.0	42.5%	37.9%	0.9%	2.6	7.0	12.7	1.0	4.0	11.0	42.5%	37.9%	0.9%
3	CHR:MidHosp	6.5	5.4	16.5	3.0	4.0	15.0	77.3%	33.3%	0.0%	6.5	5.4	16.5	3.0	4.0	15.0	77.3%	33.3%	0.0%
4	CHR	1.1	8.6	11.8	0.0	2.0	10.0	28.4%	42.9%	1.1%	1.1	8.6	11.8	0.0	2.0	10.0	28.4%	42.9%	1.1%
5	Eastern	0.1	4.7	17.3	0.0	4.0	13.5	2.1%	25.0%	5.0%	0.1	4.7	17.3	0.0	4.0	13.5	2.1%	25.0%	5.0%
6	UCFS:NE	0.0	4.5	5.5	0.0	3.0	6.5	0.0%	27.3%	0.0%	0.0	4.5	5.5	0.0	3.0	6.5	0.0%	27.3%	0.0%
7	UCFS:SE	0.2	4.8	20.2	0.0	5.0	17.5	3.0%	23.9%	6.3%	0.2	4.8	20.2	0.0	5.0	17.5	3.0%	23.9%	6.3%
8	Hartford	0.8	3.6	11.5	0.0	2.0	8.0	16.5%	14.2%	0.0%	0.8	3.6	11.5	0.0	2.0	8.0	16.5%	14.2%	0.0%
9	Wheeler:Htfd	1.2	5.9	14.4	0.0	1.0	12.5	20.0%	28.6%	0.0%	1.2	5.9	14.4	0.0	1.0	12.5	20.0%	28.6%	0.0%
10	Wheeler:Meridn	0.6	3.5	14.0	0.0	2.0	8.0	13.3%	16.0%	0.0%	0.6	3.5	14.0	0.0	2.0	8.0	13.3%	16.0%	0.0%
11	Wheeler:NBrit	0.5	2.4	9.1	0.0	2.0	7.0	14.9%	5.0%	1.5%	0.5	2.4	9.1	0.0	2.0	7.0	14.9%	5.0%	0.0%
12	New Haven	1.4	13.9	23.4	0.0	8.0	18.0	16.1%	61.0%	14.3%	1.4	13.9	23.4	0.0	8.0	18.0	16.1%	61.0%	14.3%
13	CliffBeers	1.4	13.9	23.4	0.0	8.0	18.0	16.1%	61.0%	14.3%	1.4	13.9	23.4	0.0	8.0	18.0	16.1%	61.0%	14.3%
14	Southwestern	0.4	7.5	20.4	0.0	3.0	27.0	7.6%	36.8%	0.0%	0.4	7.5	20.4	0.0	3.0	27.0	7.6%	36.8%	0.0%
15	CFGC:South	1.1	3.6	20.4	0.0	0.0	27.0	11.5%	16.7%	0.0%	1.1	3.6	20.4	0.0	0.0	27.0	11.5%	16.7%	0.0%
16	CFGC:Nrwk	0.4	10.9	0.0	0.0	8.5	0.0	9.5%	58.3%	N/A	0.4	10.9	0.0	0.0	8.5	0.0	9.5%	58.3%	N/A
17	CFGC:EMPS	0.2	8.6	0.0	0.0	3.0	0.0	4.8%	40.7%	N/A	0.2	8.6	0.0	0.0	3.0	0.0	4.8%	40.7%	N/A
18	Western	0.6	3.7	10.9	0.0	3.0	9.0	9.8%	18.8%	0.0%	0.6	3.7	10.9	0.0	3.0	9.0	9.8%	18.8%	0.0%
19	Well:Dnby	0.4	5.3	10.4	0.0	3.0	9.5	6.7%	28.6%	0.0%	0.4	5.3	10.4	0.0	3.0	9.5	6.7%	28.6%	0.0%
20	Well:Torr	0.6	2.4	10.7	0.0	1.0	8.0	14.3%	20.0%	0.0%	0.6	2.4	10.7	0.0	1.0	8.0	14.3%	20.0%	0.0%
21	Well:Wtby	0.7	3.6	11.0	0.0	3.0	9.0	9.2%	16.7%	0.0%	0.7	3.6	11.0	0.0	3.0	9.0	9.2%	16.7%	0.0%

* Discharged episodes with end dates from July 1, 2019 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 Plus Stabilization 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	724	399	394	126	122	3	724	399	394	126	122	3
2	Central	153	29	108	65	11	1	153	29	108	65	11	1
3	CHR:MiddHosp	44	15	21	34	5	0	44	15	21	34	5	0
4	CHR	109	14	87	31	6	1	109	14	87	31	6	1
5	Eastern	96	68	20	2	17	1	96	68	20	2	17	1
6	UCFS:NE	30	22	4	0	6	0	30	22	4	0	6	0
7	UCFS:SE	66	46	16	2	11	1	66	46	16	2	11	1
8	Hartford	139	120	126	23	17	0	139	120	126	23	17	0
9	Wheeler:Htfd	50	35	36	10	10	0	50	35	36	10	10	0
10	Wheeler:Meridn	15	25	24	2	4	0	15	25	24	2	4	0
11	Wheeler:NBrit	74	60	66	11	3	1	74	60	66	11	3	0
12	New Haven	93	77	7	15	47	1	93	77	7	15	47	1
13	CliffBeers	93	77	7	15	47	1	93	77	7	15	47	1
14	Southwestern	131	57	9	10	21	0	131	57	9	10	21	0
15	CFG:C:South	26	18	9	3	3	0	26	18	9	3	3	0
16	CFG:C:Nrwlk	42	12	0	4	7	0	42	12	0	4	7	0
17	CFG:C:EMPS	63	27	0	3	11	0	63	27	0	3	11	0
18	Western	112	48	124	11	9	0	112	48	124	11	9	0
19	Well:Dnby	15	7	16	1	2	0	15	7	16	1	2	0
20	Well:Torr	21	5	13	3	1	0	21	5	13	3	1	0
21	Well:Wtby	76	36	95	7	6	0	76	36	95	7	6	0

* Discharged episodes with end dates from July 1, 2019 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	59.5	47.8	42.4	50.5	38.0	38.0	100.0%	100.0%	28.9%	22	77	97	22	77	28
2	Central	30.5	38.2	35.0	30.5	38.0	36.0	100.0%	100.0%	0.0%	2	15	5	2	15	0
3	CHR:MiddHosp	0.0	32.0	0.0	0.0	32.0	0.0	N/A	100.0%	N/A	0	1	0	0	1	0
4	CHR	30.5	38.6	35.0	30.5	38.5	36.0	100.0%	100.0%	0.0%	2	14	5	2	14	0
5	Eastern	0.0	34.0	45.2	0.0	35.0	49.0	N/A	100.0%	66.7%	0	3	6	0	3	4
6	UCFS:NE	0.0	36.0	40.0	0.0	36.0	40.0	N/A	100.0%	50.0%	0	2	2	0	2	1
7	UCFS:SE	0.0	30.0	47.8	0.0	30.0	51.5	N/A	100.0%	75.0%	0	1	4	0	1	3
8	Hartford	57.3	57.4	45.4	48.0	52.5	39.0	100.0%	100.0%	38.0%	4	8	50	4	8	19
9	Wheeler:Htfd	57.3	68.0	51.3	48.0	73.0	46.5	100.0%	100.0%	56.7%	4	5	30	4	5	17
10	Wheeler:Meridn	0.0	43.0	40.7	0.0	43.0	39.0	N/A	100.0%	33.3%	0	1	3	0	1	1
11	Wheeler:NBrit	0.0	38.0	35.6	0.0	38.0	32.0	N/A	100.0%	5.9%	0	2	17	0	2	1
12	New Haven	47.5	47.6	36.0	45.0	37.0	36.0	100.0%	100.0%	0.0%	6	32	1	6	32	0
13	CliffBeers	47.5	47.6	36.0	45.0	37.0	36.0	100.0%	100.0%	0.0%	6	32	1	6	32	0
14	Southwestern	53.0	47.4	51.8	53.0	38.0	46.0	100.0%	100.0%	60.0%	2	17	5	2	17	3
15	CFGCSouth	0.0	33.3	48.0	0.0	32.0	46.0	N/A	100.0%	66.7%	0	3	3	0	3	2
16	CFGCSouth	0.0	46.1	57.5	0.0	38.0	57.5	N/A	100.0%	50.0%	0	7	2	0	7	1
17	CFGCSouth	53.0	54.6	0.0	53.0	39.0	0.0	100.0%	100.0%	N/A	2	7	0	2	7	0
18	Western	78.6	110.5	36.9	79.0	110.5	36.5	100.0%	100.0%	6.7%	8	2	30	8	2	2
19	Well:Dnby	92.7	0.0	32.0	81.0	0.0	32.0	100.0%	N/A	0.0%	3	0	2	3	0	0
20	Well:Torr	0.0	0.0	40.0	0.0	0.0	40.0	N/A	N/A	0.0%	0	0	2	0	0	0
21	Well:Wtby	70.2	110.5	37.0	63.0	110.5	37.0	100.0%	100.0%	7.7%	5	2	26	5	2	2

* Data includes episodes still in care with referral dates from July 1, 2020 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

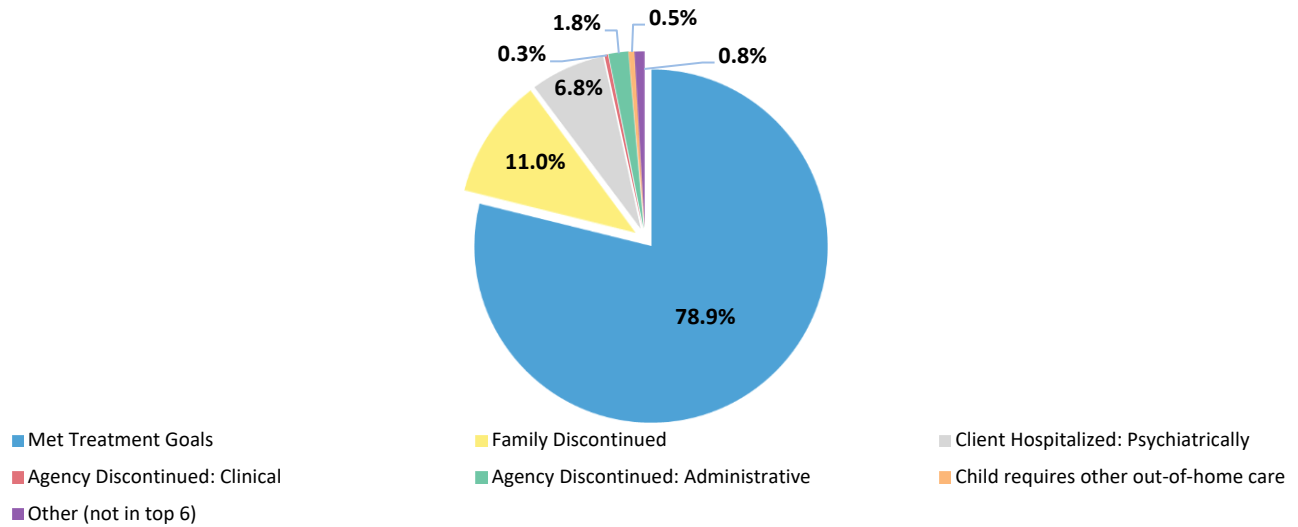


Figure 55. Top Six Places Clients Live at Discharge Statewide

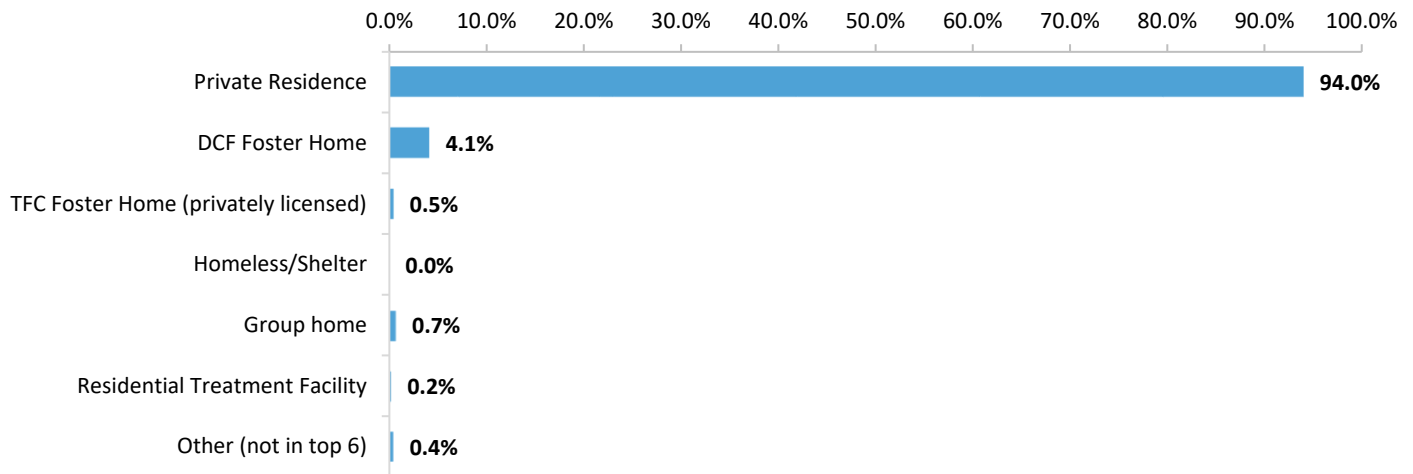
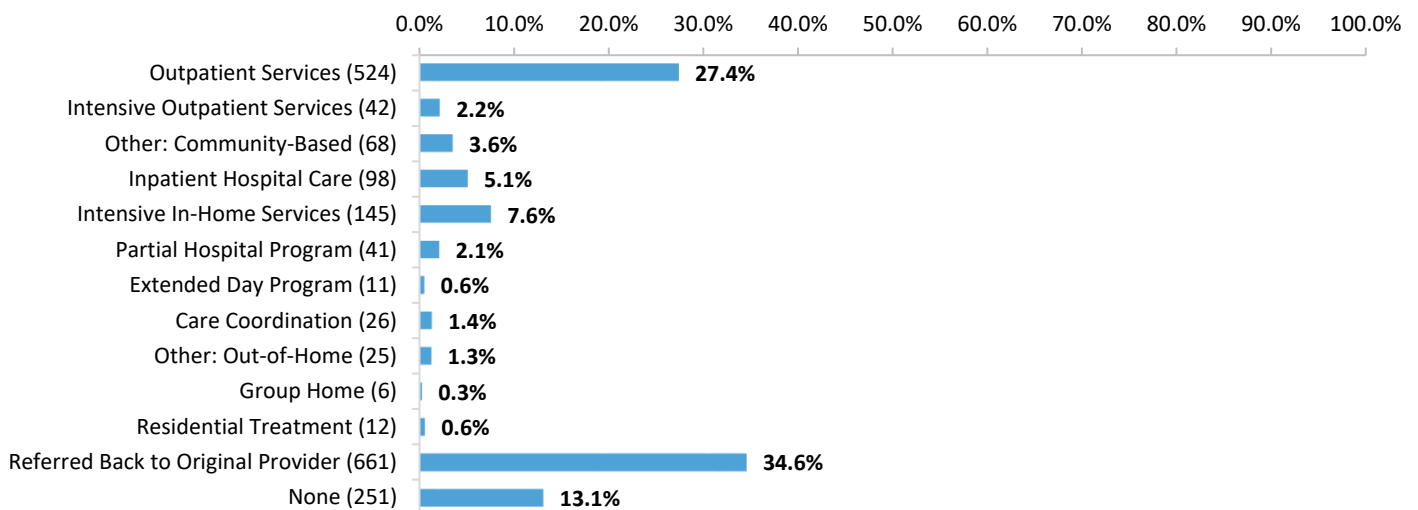


Figure 56. Type of Services Client Referred* to at Discharge Statewide



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

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

Table 5. Ohio Scales Scores by Service Area

Service Area	<i>N (paired^d intake & discharge)</i>	<i>Mean (paired^d intake)</i>	<i>Mean (paired^d discharge)</i>	<i>Mean Difference (paired^d cases)</i>	<i>t-score</i>	<i>Sig.</i>	<i>† .05-.10 * P < .05 **P < .01</i>
STATEWIDE							
Parent Functioning Score	102	41.30	43.78	2.48	3.03	0.003	*
Worker Functioning Score	350	42.35	43.89	1.54	4.67	0.000	**
Parent Problem Score	103	33.52	29.51	-4.01	-4.38	0.000	*
Worker Problem Score	350	32.27	29.55	-2.72	-6.82	0.000	**
Central							
Parent Functioning Score	36	38.64	38.97	0.33	0.85	0.404	
Worker Functioning Score	100	42.42	43.38	0.96	1.69	0.094	
Parent Problem Score	37	35.41	34.19	-1.22	-1.35	0.186	
Worker Problem Score	100	33.34	31.93	-1.41	-3.16	0.002	*
Eastern							
Parent Functioning Score	5	53.00	54.60	1.60	1.55	0.195	
Worker Functioning Score	13	45.85	49.23	3.38	2.36	0.036	
Parent Problem Score	5	29.80	24.80	-5.00	-1.16	0.312	
Worker Problem Score	13	34.85	27.15	-7.69	-2.58	0.024	
Hartford							
Parent Functioning Score	51	41.63	45.76	4.14	2.65	0.011	
Worker Functioning Score	104	41.89	44.73	2.84	3.27	0.001	**
Parent Problem Score	51	32.67	26.27	-6.39	-3.98	0.000	
Worker Problem Score	104	32.43	27.40	-5.03	-4.44	0.000	**
New Haven							
Parent Functioning Score	0	0.00	0.00	0.00	0.00	0.000	
Worker Functioning Score	3	46.00	44.67	-1.33	-0.55	0.635	
Parent Problem Score	0	0.00	0.00	0.00	0.00	0.000	
Worker Problem Score	3	24.33	23.00	-1.33	-0.72	0.547	
Southwestern							
Parent Functioning Score	0	0.00	0.00	0.00	0.00	0.000	
Worker Functioning Score	10	45.10	46.60	1.50	1.39	0.197	†
Parent Problem Score	0	0.00	0.00	0.00	0.00	0.000	
Worker Problem Score	10	25.50	23.00	-2.50	-2.49	0.034	**
Western							
Parent Functioning Score	10	43.40	45.60	2.20	1.74	0.116	**
Worker Functioning Score	120	41.98	42.77	0.78	2.60	0.010	**
Parent Problem Score	10	32.80	31.10	-1.70	-1.31	0.223	**
Worker Problem Score	120	31.72	30.39	-1.33	-5.21	0.000	**

paired^d = 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 EMPS*

2-1-1 Items	Clients (n=55)	Referrers (n=61)
The 2-1-1 staff answered my call in a timely manner	3.96	4.25
The 2-1-1 staff was courteous	4.05	4.25
The 2-1-1 staff was knowledgeable	4.05	4.25
My phone call was quickly transferred to the EMPS provider	4.05	4.25
Sub-Total Mean: 2-1-1	4.03	4.25
Mobile Crisis Items		
Mobile Crisis responded to the crisis in a timely manner	4.09	4.25
The Mobile Crisis staff was respectful	4.13	4.25
The Mobile Crisis staff was knowledgeable	4.13	4.25
The Mobile Crisis staff spoke to me in a way that I understood	4.13	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 Mobile Crisis)	4.13	X
The services or resources my child and/or family received were right for us	4.13	X
The child/family I referred to Mobile Crisis was connected with appropriate services or resources upon discharge from Mobile Crisis	X	4.25
Overall, I am very satisfied with the way that Mobile Crisis responded to the crisis	4.13	4.25
Sub-Total Mean: Mobile Crisis	4.12	4.25
Overall Mean Score	4.09	4.25

* All items collected by 2-1-1, in collaboration with the PIC and DCF; measured on a scale of 5 (Strongly Agree) to 1 (Strongly Disagree)

Client Comments:

- Father reports they have used MCI several times youth and had praise for the specific clinician they saw.
- Parent reports youth has used the service frequently for support. She reports she feels it has been helpful for youth to have an outside person to speak to in order to assist during times of need.
- Mother reports positive experience with MCI and that youth is now engaged with outpatient services.
- Caller reports MCI did their job but the youth did not respond to the attempt to speak by phone.
- Caller reports she is overall disappointed with the wait time for 211 and that youth is too volatile for the time she has to wait.

Referrer Comments:

- Foster mother reports everything went well that day and they have not had the same concerns since.
- Caller reports as a result of assessment youth was able to get the treatment the child needed which is still ongoing.
- Caller reports youth is still receiving the inpatient treatment youth MCI helped to facilitate, "Thank you so much for your help."
- DCF supervisor reports the collaboration with both 211 and youth MCI was very good for this very difficult situation. He reports being very happy with the follow-up beyond the initial assessment.
- Group home director reports they called for a youth whom was in an emergency situation and they were disappointed with the response all around having to call more than once to get a response.

Section XI: Training Attendance

Table 7. Trainings Completed for All Active* Staff

	DBHRN	Crisis API	DDS	CCSRS	Trauma	Violence	CRC	Emerg. Certificate	QPR	A-SBIRT	ASD	PSB	SR	All 13 Trainings Completed	All 13 Completed for Full-Time Staff Only
Statewide (156)*	41%	65%	38%	48%	60%	40%	53%	60%	24%	35%	63%	47%	51%	6%	7%
CHR:MidHosp (10)*	60%	70%	50%	90%	70%	60%	70%	60%	70%	70%	80%	60%	50%	10%	0%
CHR (15)*	13%	60%	13%	93%	53%	33%	20%	47%	20%	7%	40%	40%	40%	0%	0%
UCFS:NE (4)*	25%	50%	25%	100%	100%	50%	50%	75%	25%	75%	50%	50%	50%	0%	0%
UCFS:SE (17)*^	35%	65%	18%	94%	41%	29%	53%	47%	35%	88%	59%	24%	41%	0%	0%
Wheeler:Htfd (19)*^	47%	63%	47%	5%	74%	42%	53%	63%	11%	5%	74%	63%	37%	0%	0%
Wheeler:Meridn (5)*	40%	80%	20%	20%	80%	40%	80%	80%	0%	0%	80%	80%	60%	0%	0%
Wheeler:NBrit (16)*	63%	88%	44%	13%	56%	56%	69%	81%	0%	6%	88%	0%	88%	0%	0%
CliffBeers (23)*	30%	52%	35%	70%	57%	35%	48%	52%	65%	57%	61%	57%	65%	22%	23%
CFGC:South (6)*	67%	67%	67%	50%	83%	50%	67%	67%	0%	33%	50%	0%	83%	0%	0%
CFGC:Nrwlk (3)*^	33%	67%	33%	33%	67%	33%	67%	67%	0%	33%	100%	67%	67%	0%	0%
CFGC:EMPS (9)*	67%	100%	78%	78%	100%	56%	89%	100%	33%	67%	100%	89%	100%	33%	43%
Well:Dnby (2)*	0%	50%	50%	0%	50%	50%	50%	50%	0%	0%	50%	50%	0%	0%	0%
Well:Torr (2)*	100%	100%	100%	50%	100%	100%	100%	100%	50%	50%	100%	0%	50%	0%	0%
Well:Wtby (25)*	32%	48%	36%	0%	36%	24%	32%	40%	0%	16%	36%	16%	16%	0%	0%
Full-Time Staff Only (107)	42%	72%	41%	53%	64%	40%	57%	67%	29%	41%	70%	53%	62%	7%	

Note: Count of active staff for each provider or category is in parenthesis.

* Includes all active full-time, part-time and per diem staff as of September 30, 2020.

^Includes staff who did not have an assigned site reported and/or support multiple sites.

Training Title Abbreviations:

DBHRN=Disaster Behavioral Health Response Network

QPR= Question, Persuade and Refer

Crisis API = Crisis Assessment, Planning and Intervention

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

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

ASD = Autism Spectrum Disorder

CCSRS=Columbia Suicide Severity Rating Scale

Trauma = Traumatic Stress and Trauma Informed Care

Violence = Violence Assessment and Prevention

CRC = 21st Century Culturally Responsive Mental Health Care

Emerg. Certificate= Emergency Certificate

PSB = Problem Sexual Behavior (Added October 2019)

SR = School Refusal (Added August 2019)

Section XII: Data Quality Monitoring

Figure 57. Ohio Scales Collected at Intake by Provider

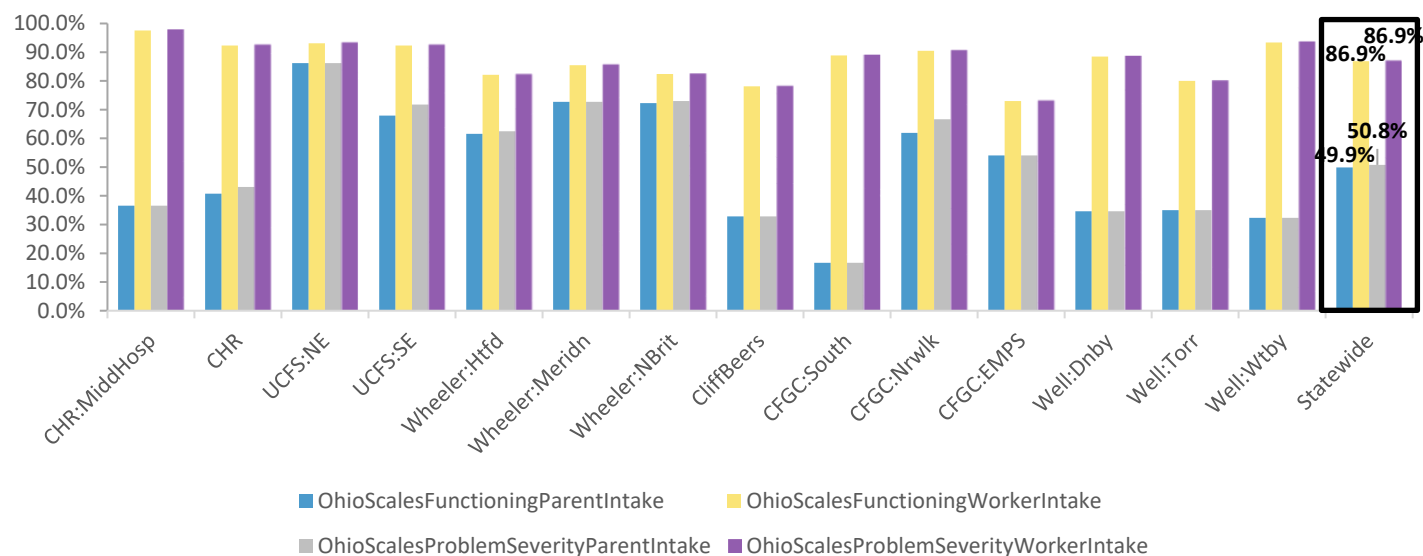
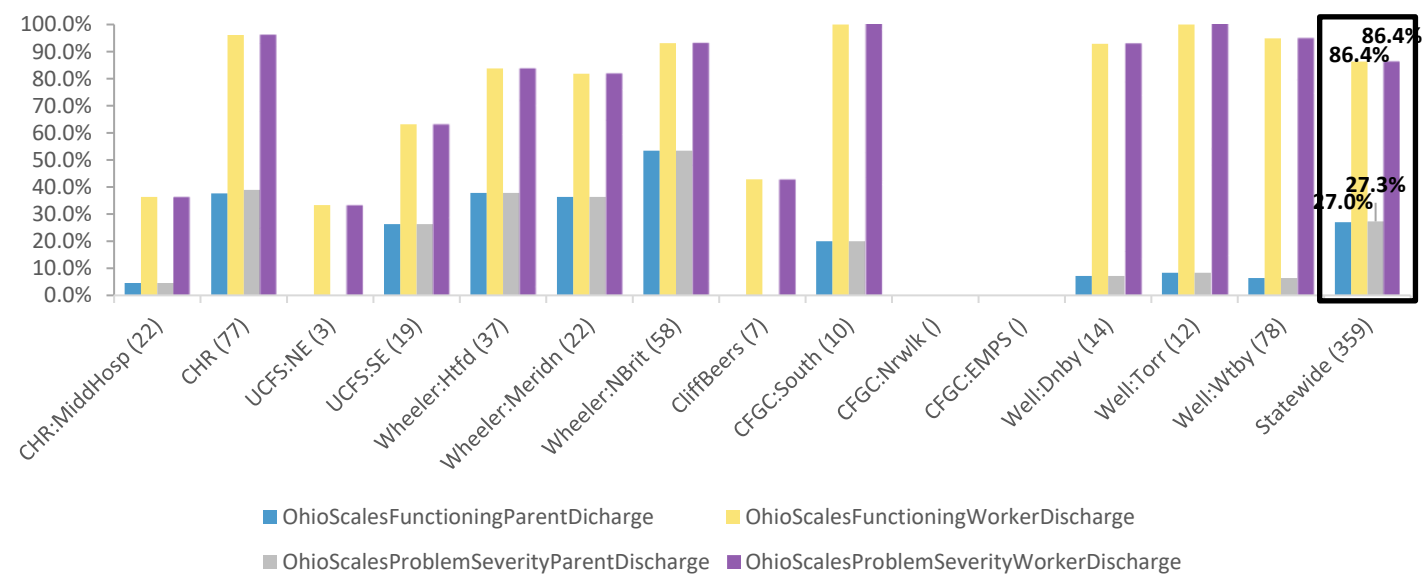


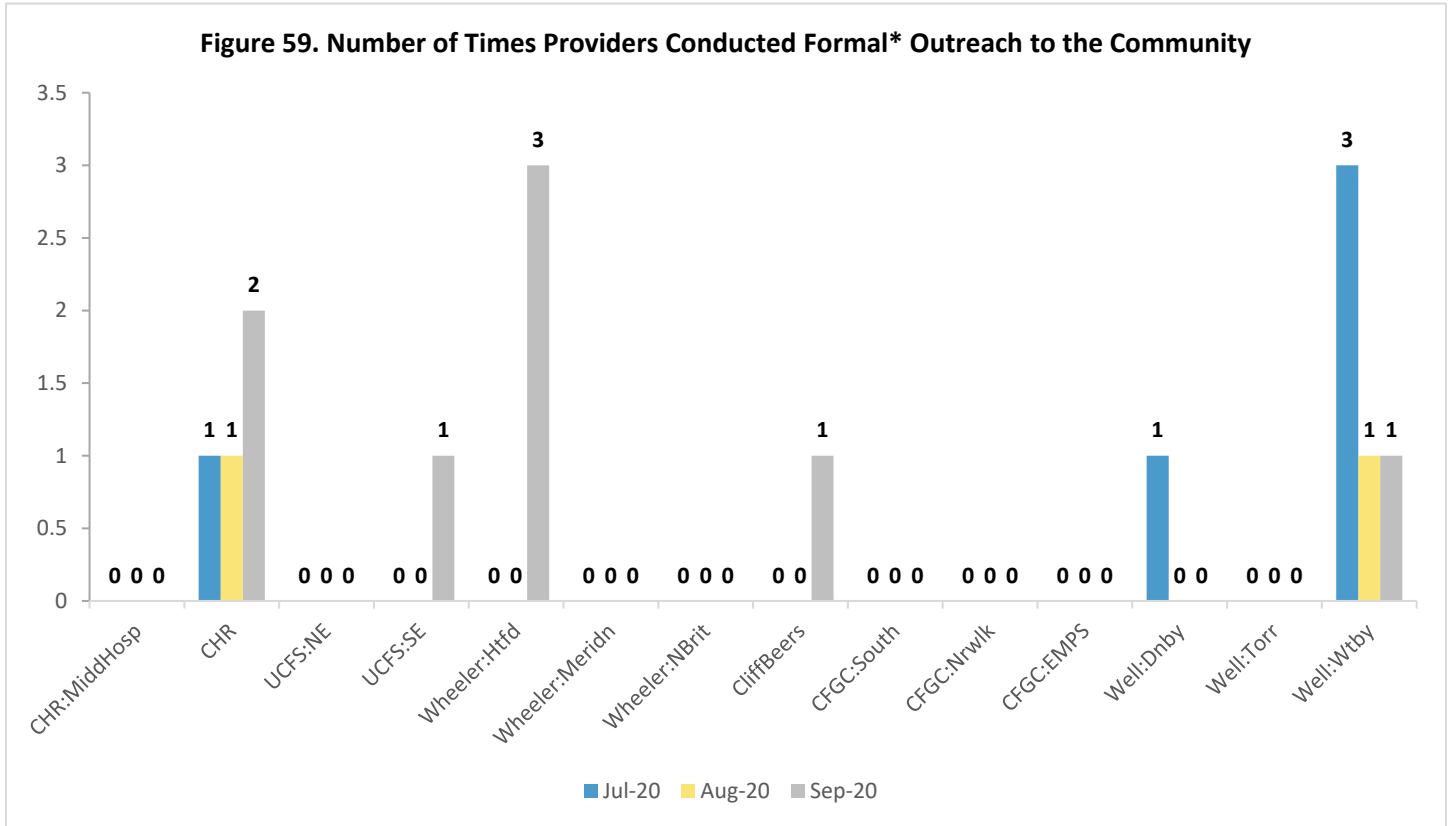
Figure 58. Ohio Scales Collected at Discharge by Provider



Note: Number in parentheses refers to the number of episodes meeting criteria for completed Ohio Scales at discharge (crisis response is plus stabilization follow up with a length of stay of five days or more).

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 EMPS PowerPoint slides and including distribution to attendees of marketing materials and other EMPS resources; 2) Outreach presentations that are in person that include workshops, conferences, or similar gatherings in which EMPS 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 EMPS 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 EMPS PIC considers other outreaches for inclusion on a case-by-case basis, as requested by EMPS providers.