

Before and After a Behavioral Health Crisis: Building a Continuum of Care

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Stronger Counties. Stronger America.





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***MENTAL HEALTH CRISIS
RESPONSE SYSTEM
IOWA CITY, IA***

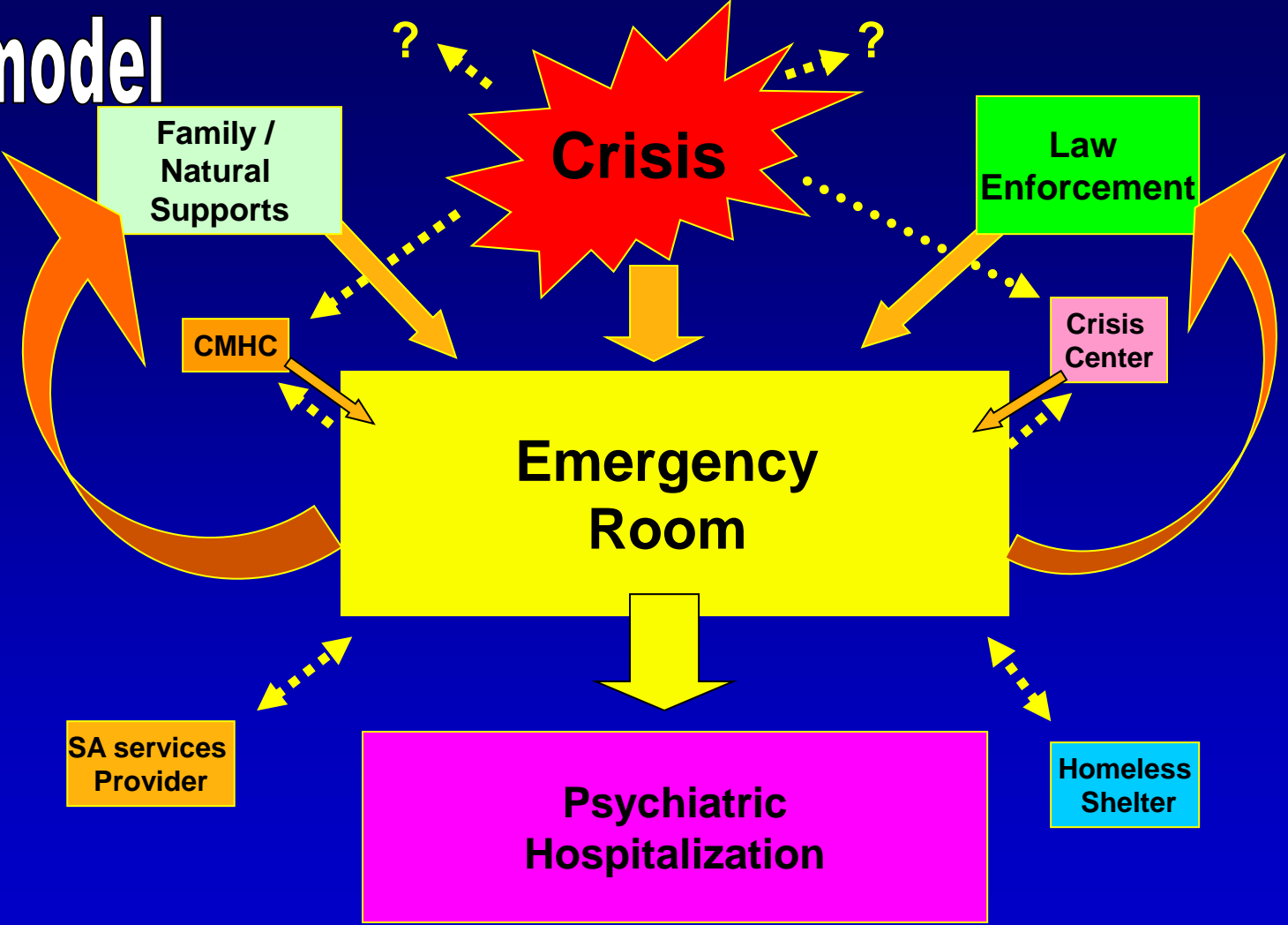
Monika Jindal, MD

Medical Director GuideLink Center

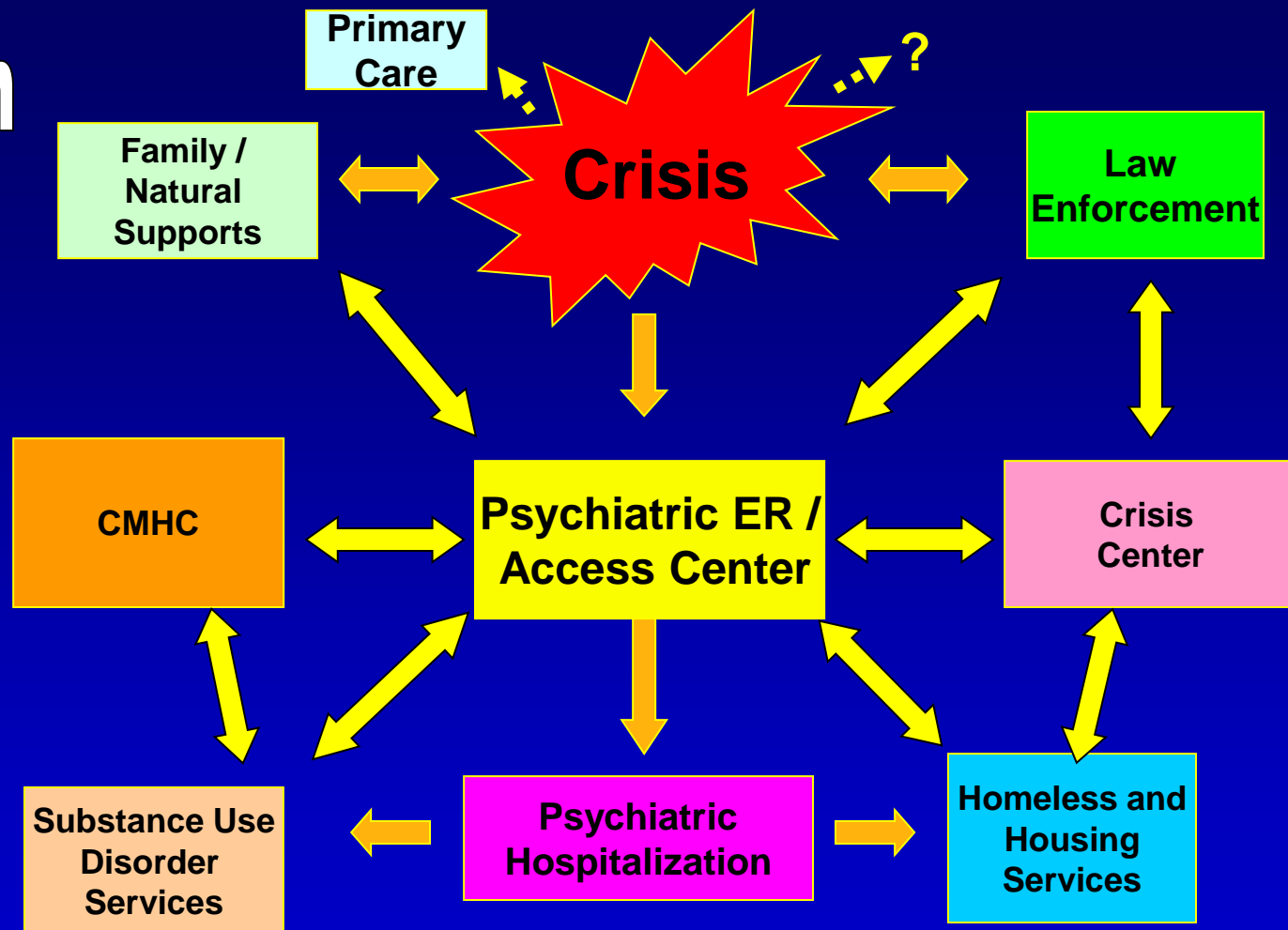
Department of Family Medicine and Psychiatry

University of Iowa Hospitals and Clinics

Old model



Vision



History

- 2010: Community service agencies begin meeting to improve coordination of the systems of care
- January 2016: Elected officials, law enforcement, and provider agencies visit San Antonio Restoration Center, followed by
 - Ongoing government and agency planning
 - Crisis Intervention Training for law enforcement
- January 2018: Gov. Reynolds cites Access Centers in her State of the State address
 - Requires Iowa will have minimum of six
- May 2018: Project manager hired
- December 2018: Land purchase
- 2020: Medical Director and Executive Director hired
- February 2021: GuideLink opened to patients with a gradual opening of services

What is an Access Center?

- January 2018: Gov. Reynolds cites Access Centers in her State of the State address
- “*Access center*” means the **coordinated** provision of intake **assessment, screening** for multi-occurring conditions, care coordination, crisis stabilization residential services, subacute mental health services, and substance abuse treatment for individuals experiencing a mental health or substance use crisis who **do not need inpatient psychiatric hospital treatment**, but who do need significant amounts of **supports** and services not available in other home- and community-based settings. (IAC Chapter 25)

GuideLink Center Mission

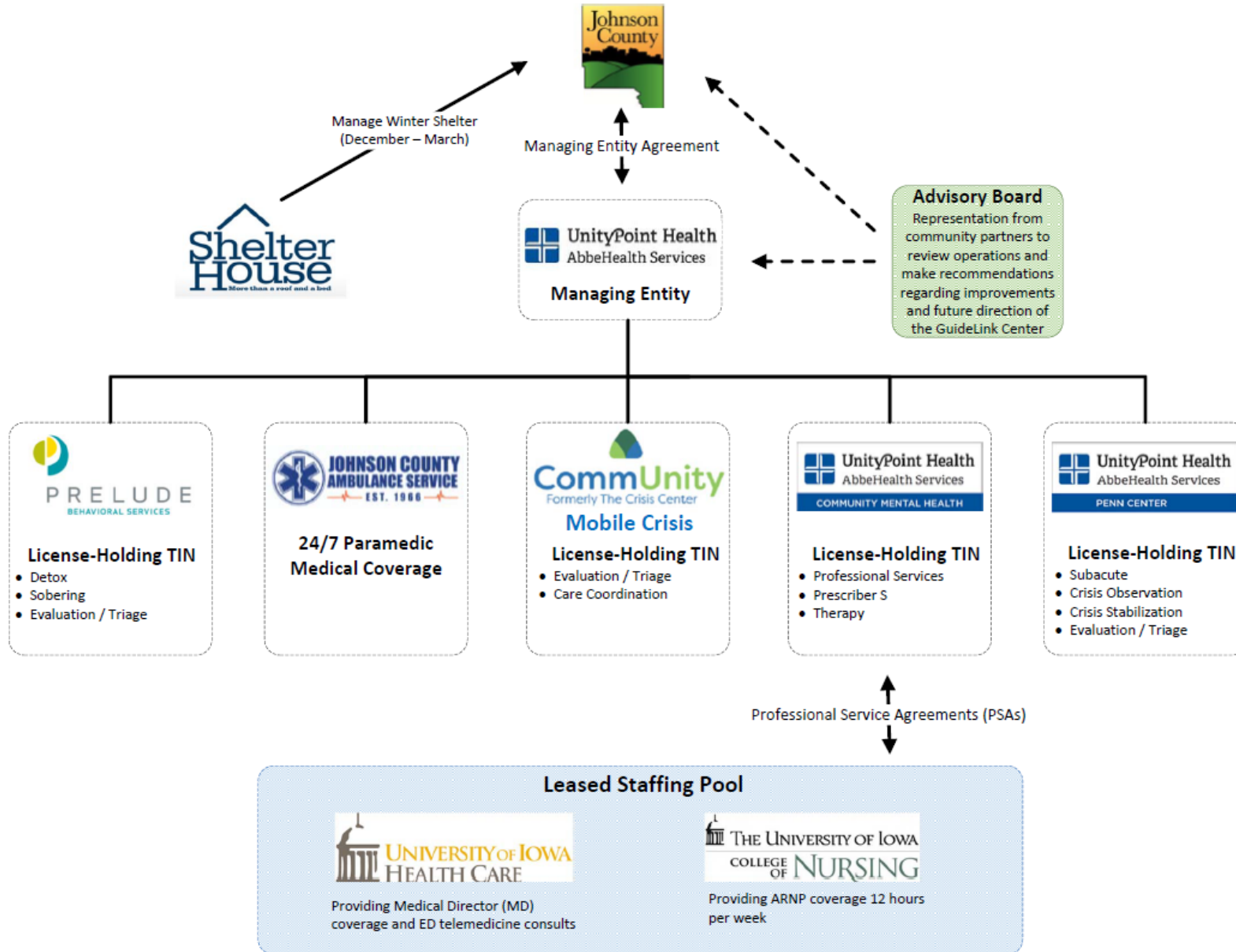
- Provide rapid assessment, triage, and stabilization to individuals experiencing a behavioral and/or substance abuse crisis, followed up with linkage to appropriate community services for assistance with ongoing issues.



GuideLink Services

- Access Center core services “plus”
 - **Screening, assessment and diagnosis, including risk assessment**
 - **Patient-centered treatment planning**
 - **Crisis Observation:** prompt evaluation and/or stabilization of individuals presenting with acute symptoms or distress, up to 23 hours.
 - **Crisis Stabilization:** admitted from Crisis Observation when it is determined treatment needs will last beyond 24 hours (up to 5 days).
 - **Subacute Care (offsite):** admitted from Crisis Stabilization when it is determined treatment needs will last beyond 5 days (up to 10 days).
 - **Medical first aid**
 - **Detox:** Medically-supervised place to withdraw from drugs or alcohol and stabilize before engaging in a treatment program.
 - **Sobering:** alternative to arrest of public intoxicants by providing a medically safe environment with direct access to additional treatment.

Structure



Participating Community Partners



CommUnity Mobile Crisis Outreach

- Immediate triage of clients
- Intake and brief screening
- Suicide assessment and safety planning
- Mobile crisis support
- Mobile crisis can meet with clients in the Emergency Departments to complete a crisis bed screening. If the client qualifies for a crisis bed, mobile crisis will transport the client to GuideLink.
- Office now located at GuideLink Center
- Other services provided:
 - Crisis Phone | Chat | Text
 - Support Groups
 - Suicide Prevention Training
 - Food Bank
 - Mobile Food Pantry
 - Basic Needs Program



Service Providers and Descriptions

- **Penn Center**

- Crisis Stabilization and Subacute Care (offsite)
- Staffed by nurses, peer support, social workers, qualified mental health providers

- **Abbe Community Mental Health**

- Psychiatrists and Advanced Practice Providers
- Medication management assistance
- Perform physical exams and mental health evaluations as needed



Additional Service Providers

- **Johnson County Ambulance**

- On-site 24/7
- Medical First Aid
- Medical Assessment and Consultation
- Staff Sobering

- **Prelude Behavioral Services**

- Sobering and Medically-Monitored Detox



Additional considerations

- Not a locked facility
 - Must be voluntary
- **Patient Criteria**
 - 18 years of age or older
 - Experiencing psychiatric/psychological stress or seeking detox/sobering support (cannot be only experiencing homelessness for example)
 - Feeling unsafe or suicidal, but able to maintain safe behaviors while onsite
 - Willing to work with GuideLink Center staff on intake and discharge planning (has to be able to provide some consent)
 - Able to provide their own basic self-care
 - Medically stable, with the exception of minor first aid needs

Gaps within Current Crisis Services Continuum

- Lack of Centralized Dispatch for Mobile Crisis Outreach
- No diversion to Mobile Crisis Outreach at 911 Dispatch
- Need for improved services for “complex needs”
- Need for improved coordination between Inpatient Psychiatric Teams and Community Providers
- General understanding of the importance of providing individuals with the right level of care at the right time
- Significant gaps in children's mental health services
 - No equivalent to GuideLink for Youth
 - No Psychiatric Urgent Care for Youth
 - Long waits in ED's for psychiatric hospitalization
 - Lack of step-down programming post psychiatric hospitalization

What I am most excited about

- Avoid overly medicalizing or criminalizing behavioral health issues and substance use disorders
- Connects patients to ongoing services
 - General medical services, housing, vocational support
- Collaboration of multiple community entities
- Recognition and collaboration with the state government
- Investment/support from the county

Questions??

Monika Jindal

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Abbey Ferenzi

Executive Director

<https://guidelinkcenter.org/>





Blueprint for Crisis Response Continuum: Orange County

Darcie Miller, LCSW-R

Orange County
Commissioner of Social
Services and Mental Health

Where We Started?

24/7 Mobile Mental Health Team with a 1-800# provided by one agency

24/7 Helpline primarily staffed by volunteers provided by a 2nd agency with a separate 1-800#

Peer Services provided by a 3rd agency with their own number



Why Redesign the Crisis Continuum?

Residents and Law Enforcement didn't know when to call which number

The Mobile Response was primarily for responding to individuals with Mental Health concerns

Multiple agencies could be supporting the same individual without collaborating

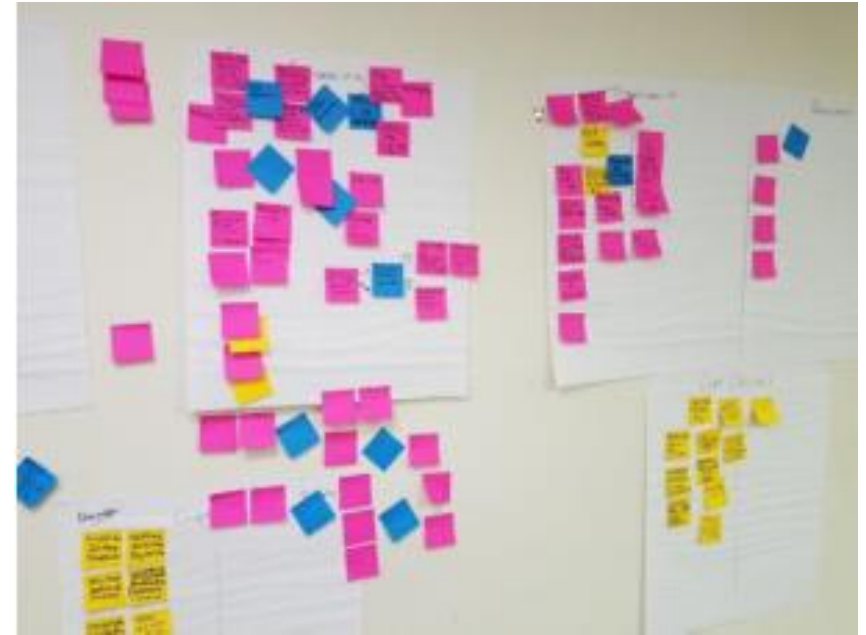
Needed to create more accountability and expectation of crisis follow-up

Need to align services with the Crisis Intervention *Benefit Guidance For Medicaid Managed Care Organization and Providers*

Changing the Orange County Addiction Treatment Ecosystem

- As a result of the Opioid Epidemic, we held a week-long value-based mapping event with over 200 stakeholders creating 5 workgroups
- Law Enforcement Workgroup's Clear Message:

“Give us one number to call”



Why Not a Stabilization Center?

Geography/Transportation

Number of Law Enforcement Entities

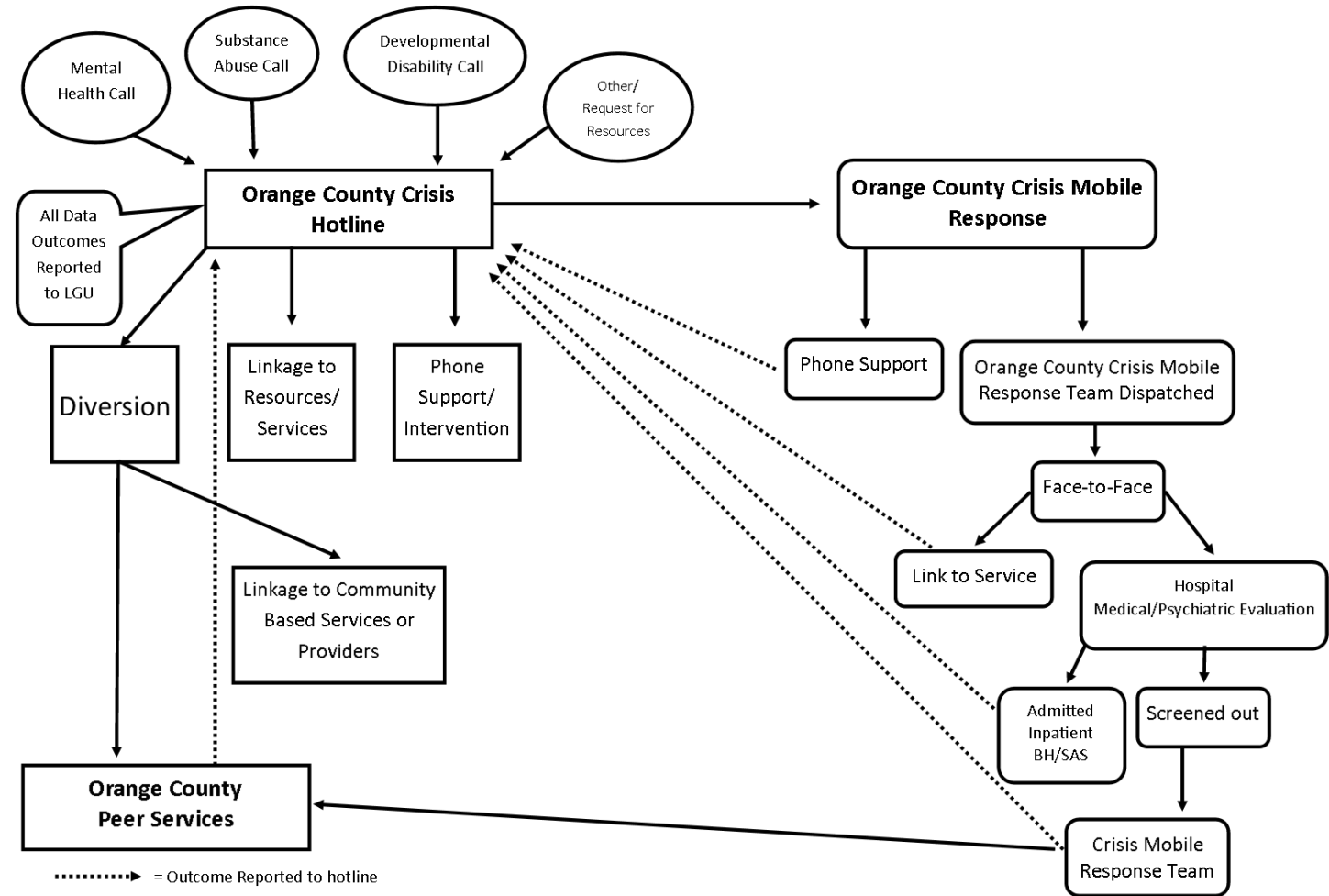
Access to 24/7 Mobile Response Team

Access to Two Behavioral Health Urgent Cares

Cost/Staffing

Original Process Map

24/7 CRISIS SERVICES: CRISIS HOTLINE AND CRISIS RESPONSE PROPOSED FLOW



Planning Process

Met with our three agencies weekly

Created workgroups:

- Logistics
- MOU/BAA
- Policy Procedure
- Training

Reached out to Commissioner of Emergency Services about co-location with 911

- Agreed to Co-location
- Agreed to share 911 Tri-CAD and Rover systems
- Obtained contracts with telephone and cellular phone companies to move from 1-800# to 3 digit dialing code 311





Challenges Along the way. . .

Establishing Roles

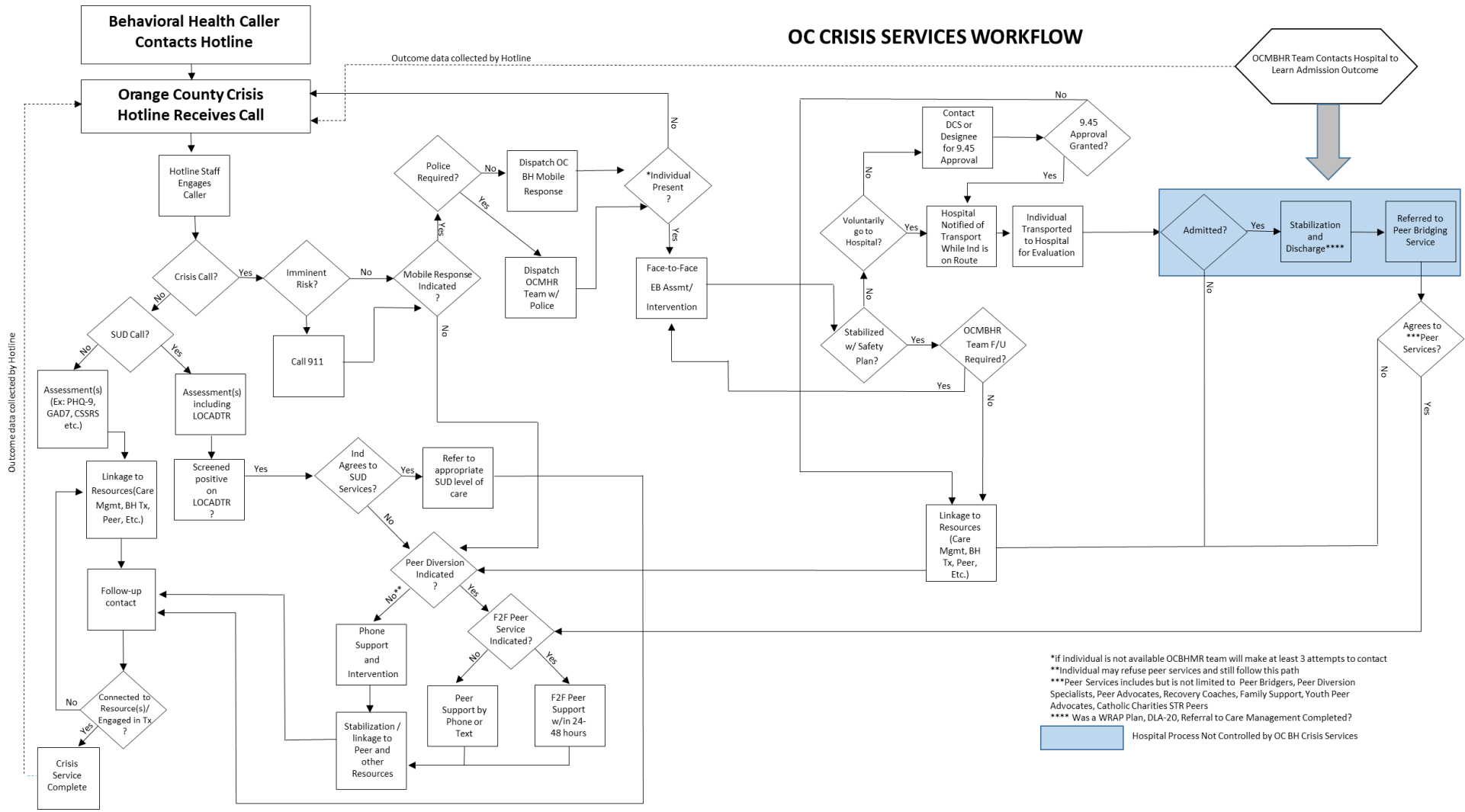
Relinquishing Territory

Mutual Accountability

Legal Issues (MOUs, BAAs, Qualified Immunity)

Billing

Updated Process Map



Crisis Continuum Today



Consistent Messaging to the Community

- **Orange County Crisis Call Center** connects people in need of support for mental illness, substance use, developmental disability, sexual assault, or who need information/referrals with trained professionals, 24/7. Given the ongoing COVID-19/Coronavirus Pandemic, the **Orange County Crisis Call Center** remains up to date on local resources and can support individuals experiencing difficulty during these uncertain times.
- The **Orange County Crisis Call Center** can be reached by dialing **311**



Radio Ads and Billboards

**IMPACTED BY ADDICTION, MENTAL
ILLNESS OR DEVELOPMENTAL
DISABILITY?**

CALL 311



The Call Center Counselors

- The Crisis Center line is open 24/7 and it is routed through the 911 Center Tri-CAD System.
- A trained Counselor answers and explores the caller's need(s) using evidence-based screening tools and best practices.
- Based on the caller's need(s) a determination will be made on how the Counselor proceeds with the call.
 - Calls can receive information and/or referrals to various services in Orange County
 - Callers can receive assessments, supportive listening and/or crisis intervention from Call Center counselors.
 - Calls can be dispatched to the Mobile Response Team (MRT) through the Rover app.
 - Calls can be referred to the MH, SUD or Co-Occurring Peers through the Peer RX app



Rover Application

STATION DISPLAY HOME ROVER EVENTS FORMS ROVER MESSAGING PERSONNEL LINKS

ROVER **Response Number**
(866) 349-2802 **Instant Response**
(866) 371-0243

Address	Filtered Summary	Start
70 Dubois St, Newburgh C, NY	MENTAL HEALTH 70 Dubois St, Newburgh C, NY FIRST ST/CARTER ST 001560 2021/05/26 10:21:57	SLCH requesting eval due to anxiety and panic attacks. SLCH-845-568-2305 5/26/2021 10:21
70 Dubois St, Newburgh C, NY	MENTAL HEALTH 70 Dubois St, Newburgh C, NY FIRST ST/CARTER ST SLCH-845-568-2305 001559 2021/05/26 10:20:04	SLCH requesting psych eval. Mom information- 5/26/2021 10:20
1203 Barclay Mnr, Newburgh, NY	MENTAL HEALTH requesting MRT to start with a call then an outreach if they believe is needed. (psychosis) believing someone has laid in her bed she cant see anyone but believes someone is there. Covid- no Weapons- stash knives pets- three cats 001558 2021/05/25 15:50:42	DX: Schizoaffective - experiecing anxiety is 5/25/2021 15:50

Responding To Scene

Name	State	ETA	Qualifications	Comment
No records to display.				
Reset Users		(Connected)	12:21:20 PM	

Pending

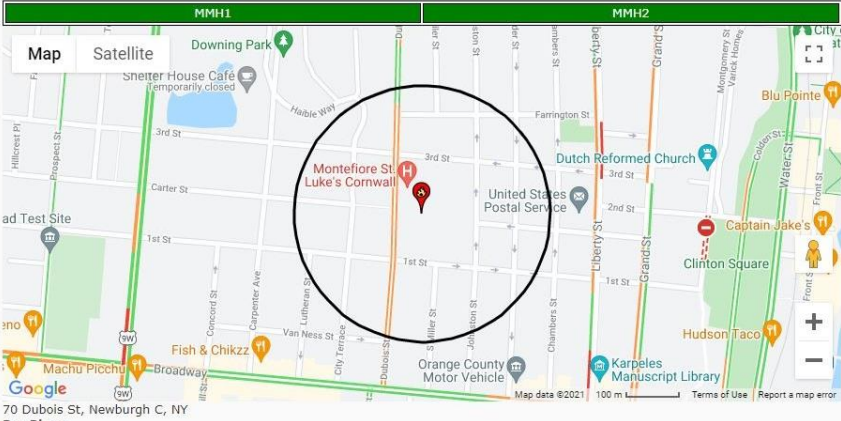
Name	State	Location	Qualifications	Comment
No records to display.				
Reset Users		(Connected)	12:21:20 PM	

Cleared Scene - Disposition

Name	State	Last Update	Qualifications	Comment
No records to display.				
Reset Users		(Connected)	12:21:20 PM	

Messages

Message	Date
St Luke's Evls Recommend d/c. Pt has outpt services. Recommend transfer. Pt continues to endorse S/I with plan.	5/26/2021 11:41
SLCH- Correction the DOB is	5/26/2021 10:23
Message received for St Luke's Eval	5/26/2021 10:21
Correction: Newburgh evening clinician is Dispatches/messages need to be texted to him. MRT also attempted to contact via phone with no success. Her incident also needs to be sent to for physical outreach. Thank you	5/25/2021 18:31



70 Dubois St, Newburgh C, NY
Pre Plans

Address	Summary	Comment1	Comment2	Distance	Preplan
NY 12550	Newburgh,			105	St Newburgh, NY 12550

Call Center View

Verizon LTE 8:48 AM 60%

Orange County Mental Health

Summary Alarms Messages Map

ALL

06012021-018282 06/01/2021 21:19:03 OCMH MENTAL HEALTH
ADDRESS:70 Dubois St Newburgh C
XST:FIRST ST/CARTER ST
CALLER:
CMT:
 cut her wrists and threatened to kill herself. It has been like this since Friday. SLCH is requesting psych eval., 41503303 74014562 2021(OCMH)001629
 Preplans: 12

06012021-018278 06/01/2021 20:03:26 OCMH MENTAL HEALTH
ADDRESS:70 Dubois St Newburgh C
XST:FIRST ST/CARTER ST
CALLER:
CMT: No
 Covid. stated needs a re-eval so he can be discharged ., 41503303 74014562 2021(OCMH)001628
 Preplans: 12

Post Alarm

MRT View

The Call Center Counselors: Text for Teens Program

- Text 4 Teens is a confidential text line for teens for information, referrals or just to chat
- With redesign, Call Center Counselors are now available to respond to teens' texts 24/7



Mobile Response Team

- Mobile Mental Health was established in 1991 and became 24/7 in 1998.
- The Mobile Response Team is now dispatched through the Orange County Crisis Call Center using the Rover App.
 - Callers are redirected to the Crisis Call Center hotline if they call the old number.
- MRT is available 24/7 and will respond to individuals of all ages
- Will assess for risk, attempt to stabilize and divert hospitalization, and determine if there is a need for involuntary transport to the hospital
- Co-Responds with law enforcement when necessary and appropriate
- Connect individuals to treatment services and supports
- Respond to individuals who have needs in any of the three service areas
- Each team has a licensed clinician and a bachelor's level or certified peer member
- The teams respond to callers in unmarked cars.



Crisis Call Center Diversion Peers

- What are Peer Specialists?

- In collaboration with the Mobile Response Team, Peer Diversion Specialists receive referrals for individuals who have been evaluated but not hospitalized, providing intensive peer interaction during periods of crisis for 30 days.

- Staffing/Schedule

- There are 4 peers assigned to the Diversion Program
- Peers are available 7 days per week; Monday-Friday from 9am-8pm & Saturday-Sunday 12:00pm-8:00pm
- Dispatched using PeerRx App

Supports provided include:

- Offer peer counseling, encourage personal empowerment, self-determination and autonomy.
- Assist with creating or updating current WRAP plans which focus on an individual's wellness tools, goals and objectives and eight dimensions of wellness.
- Serve as advocates as they promote, model and teach self-help skills and self-advocacy as they navigate community resources.
- Work with service providers in the community and with family members to help cultivate a strong system of supports for each individual.
- Provide warm hand offs to our Reach One Specialists, Recovery Specialists, or Peer Advocates if more supports are needed.

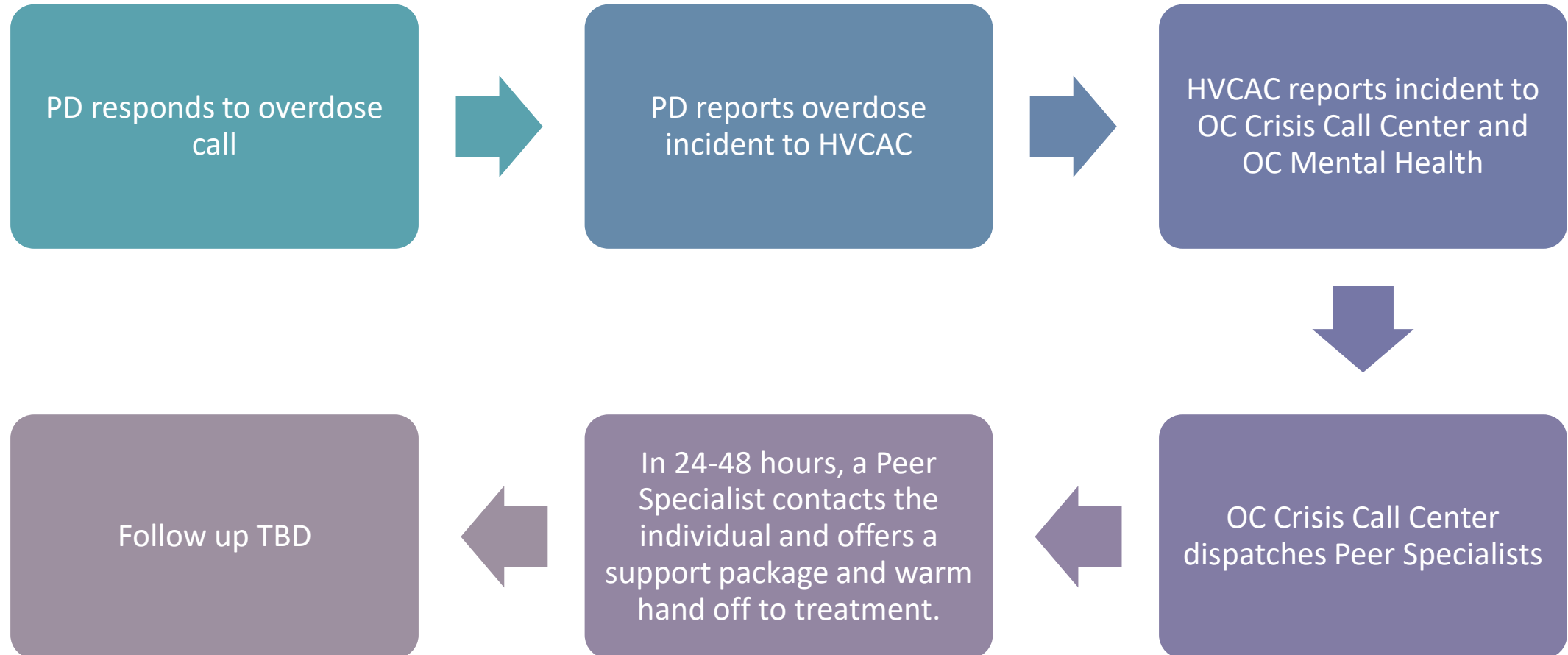




CIT Response

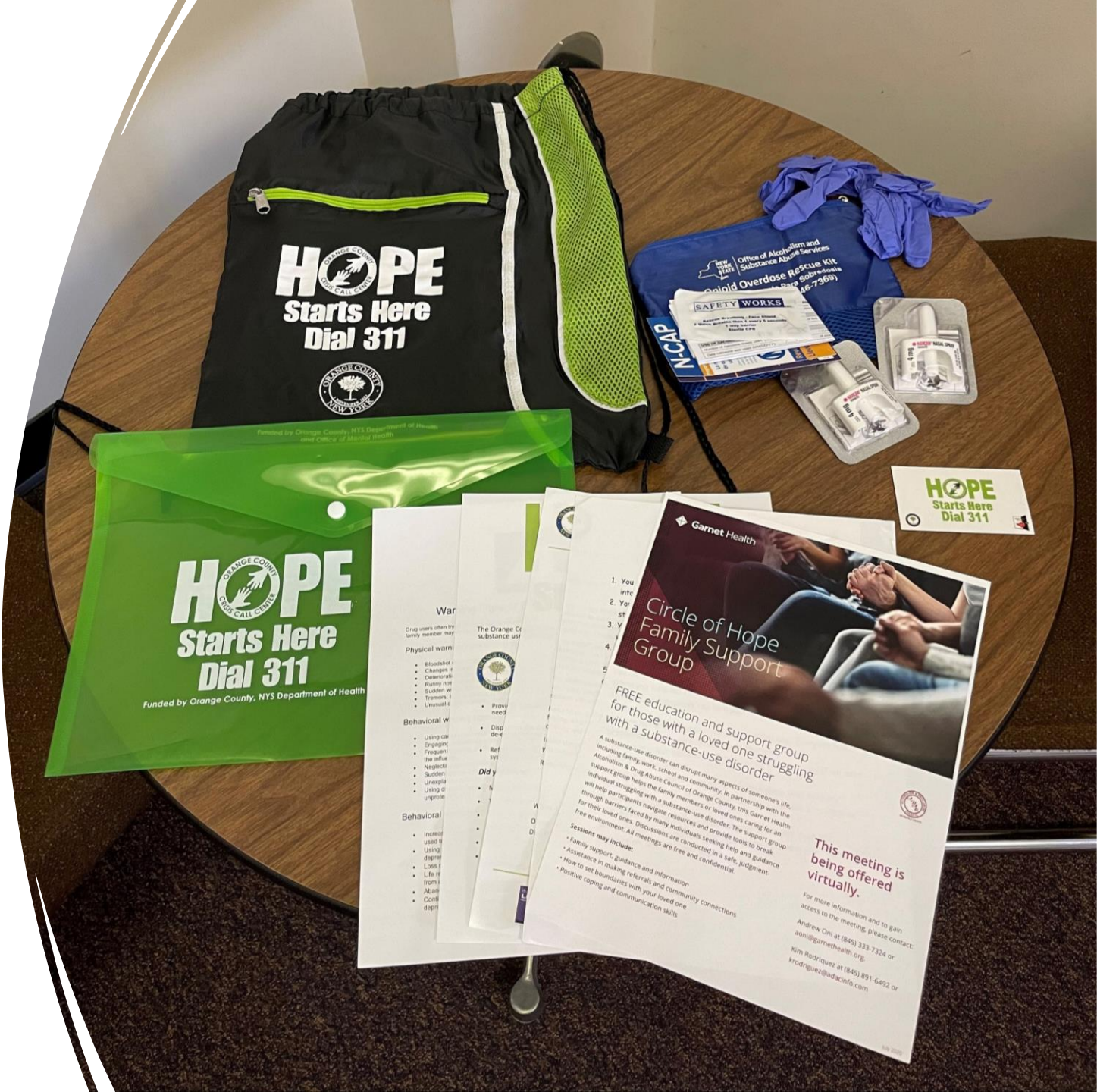
- Call Center staff receive CIT reports from participating law enforcement agencies
- Call Center Counselors or Peer Diversion Specialists reach out to the individuals who had law enforcement interactions with 24-48 hours of the Call Center receiving the CIT report to provide follow-up and connection to services and supports if needed
 - Minimum of 3 attempts required
- If they cannot reach the individual by phone, MRT is dispatched to the address on the CIT report for evaluation and offered connection to services and supports

Overdose Response Team Workflow



Overdose Response Team

Peer Support Package



Circle of Hope Family Support Group

FREE education and support group for those with a loved one struggling with a substance-use disorder

A substance-use disorder can disrupt many aspects of someone's life, including family, work, school and community. In partnership with the Alcoholism & Drug Abuse Council of Orange County, this Garnet Health support group helps the family members or loved ones caring for an individual struggling with a substance-use disorder. The support group will help participants navigate resources and provide tools to break through barriers faced by many individuals seeking help and guidance for their loved ones. Discussions are conducted in a safe, judgment-free environment. All meetings are free and confidential.

Sessions may include:

- Family support, guidance and information
- Assistance in making referrals and community connections
- How to set boundaries with your loved one
- Positive coping and communication skills

This meeting is being offered virtually.

For more information and to gain access to the meeting, please contact:
Andrew Ovi at (845) 333-7324 or aov@arnethhealth.org
Kim Rodriguez at (845) 891-6492 or krodri@et@adacinfo.com



LESSONS LEARNED

- LGU must make the time to both redesign and provide ongoing monitoring of the process
- Establishing a 3-digit dialing code is a process but worth it
- Delineate roles and responsibilities clearly to avoid conflict
- The quality and accountability gained by having 3 agencies providing crisis services is worth the early challenges
- Co-location with Emergency Services can save costs and encourage collaboration with 911 dispatchers

QUESTIONS

Darcie Miller, LCSW-R
Orange County Commissioner of Social Services and Mental Health
DaMiller@orangecountygov.com



HENNEPIN COUNTY
MINNESOTA



Emergency Crisis Care Continuum

Leah Kaiser, Director of Behavioral Health and Justice Strategy

Current resident experience

- Emergency call
- Response



Police



Fire



Medical

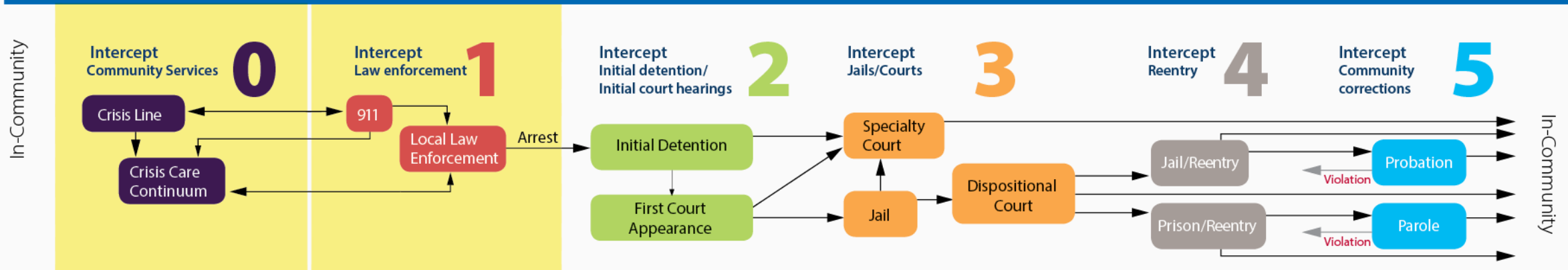


Mental Health

Purpose of the 911 mental health task force

Improve the response for people who call 911 with a mental health-related concern

SAMHSA's Sequential Intercept Model



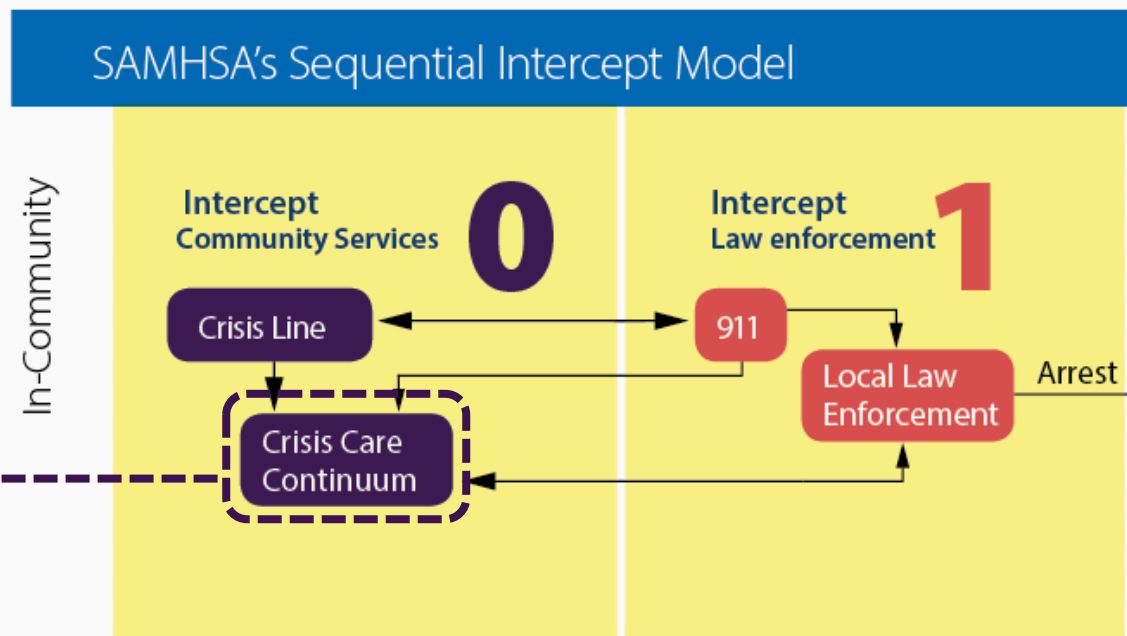
System integration – sum of the parts

Call center support and linkage

Mobile response teams

Walk in/drop off facilities

Stabilization and follow up services



Call Center Support and Linkage

911 Dispatch  MH Crisis Lines

- Augmented Intelligence
 - SMART 911
 - Data Sharing across system
 - Embedded MH Professionals
 - CIT training
 - Community Engagement
- Psychiatric responses to mental health calls
 - Significant focus of suicide prevention
 - Coordinate with mobile crisis

Mobile Response Teams: Tailored/Layered

- **MH Professional**
- Police
- Violent
- Weapons

- **MH Professional**
- Community Paramedic
- Unknown nature
- Non-Violent
- No Weapons

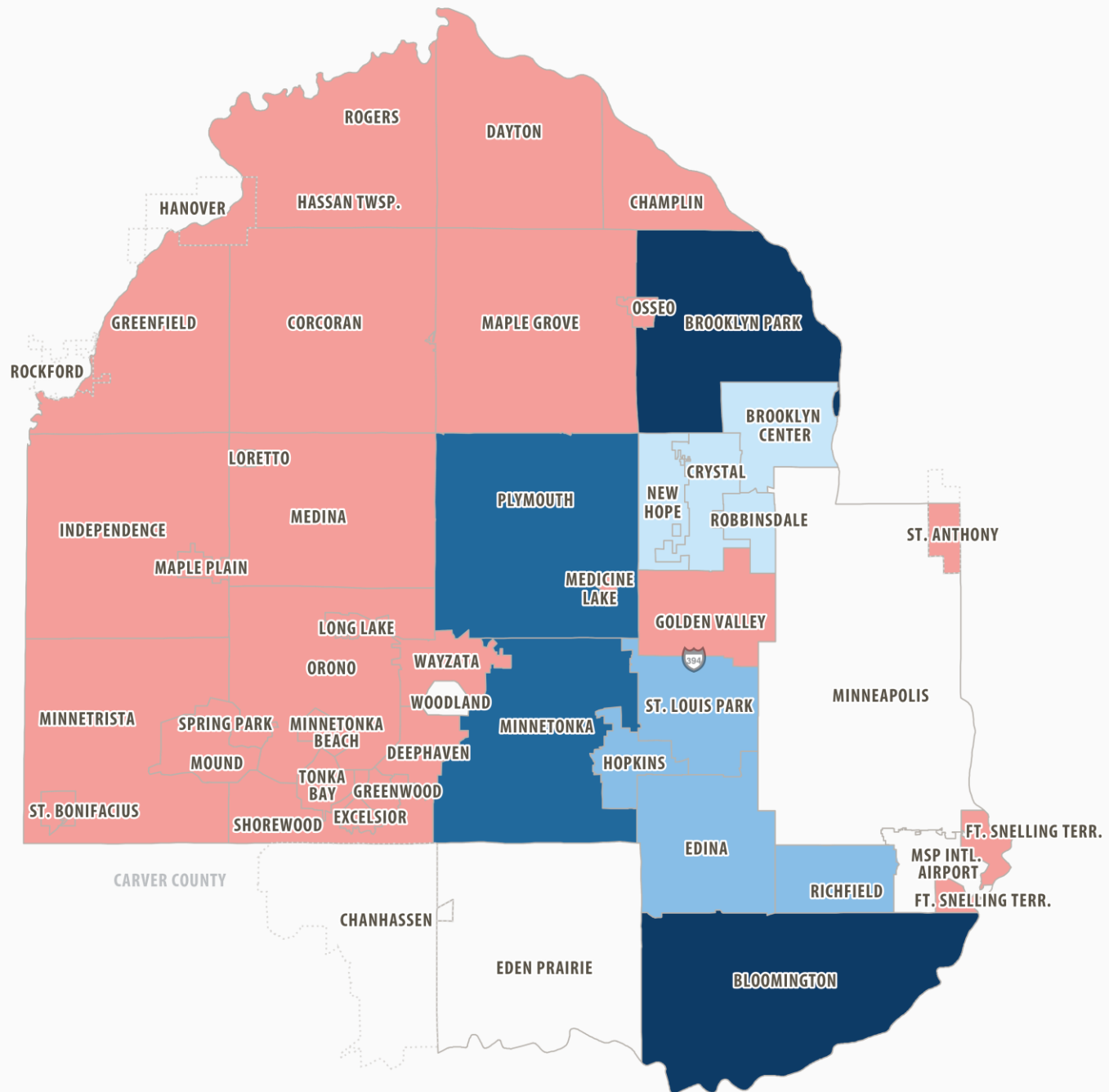
- **MH Professional**
- Psychiatric
- Non-Violent
- No Weapons

Walk-In Drop Off Facility

- Withdrawal management
- ReEntry House crisis stabilization
- Walk-in clinic and county services



Stabilization and Follow Up



Performance metrics promote common goals



Value to residents



Increase community stabilization
engagement in care



Decrease emergency department
and hospital use and justice involvement

Leah Kaiser, Director

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Questions?



THANK YOU!

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