



Tompkins County Behavioral Health Mobile Crisis Team

Tompkins County Mental Health

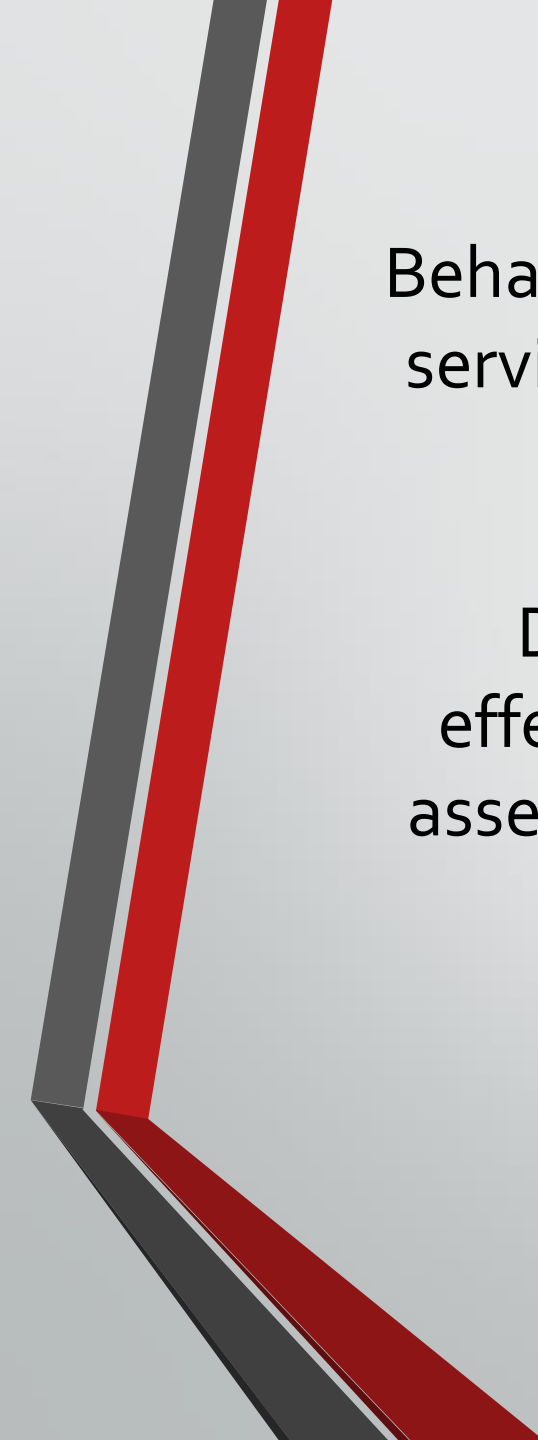


Tompkins County
MENTAL HEALTH SERVICES
Tompkins County Mental Health Center
201 East Green Street
Ithaca, New York 14850-5421



“ The Mobile Crisis Team serves diverse individuals of all ages in Tompkins County by providing timely crisis assessment & intervention to individuals who are experiencing a behavioral health crisis. ”

Mission Statement



Behavioral health crisis assessment, intervention, and stabilization services, 24 hours per day, seven days per week, and 365 days per year

Deliver high quality, culturally competent, clinically & cost effective, integrated community-based behavioral-health crisis assessment, intervention, safety planning & stabilization services that promote resiliency, rehabilitation, & recovery.

Purpose

Definitions

Crisis Assessment is a crisis assessment evaluates any immediate need for emergency services and, as time permits, the person's:

- current life situation
- sources of stress
- mental health problems and symptoms
- strengths
- cultural considerations
- support network
- vulnerabilities
- current functioning

Mobile crisis intervention is a face-to-face, short-term, intensive mental health service.

Purpose is to help the person:

- Cope with immediate stressors
- Identify strengths and available resources, and begin to use them
- Begin to return to level of functioning that existed before the crisis or emergency
- Linkage to urgent treatment based on assessment

Role of Mobile Crisis Team

- Provide safe, compassionate & effective responses to individuals with behavioral health (BH) crisis in the community
 - Increase public safety
 - Decrease unnecessary hospitalizations for those experiencing BH crisis
 - Decrease unnecessary incarcerations for those experiencing BH crisis
 - Increase client participation with BH providers by problem solving barriers & increasing knowledge of local resources

Goals:

- Serve Tompkins County individuals & families who are experiencing urgent concerns related to mental health &/or substance use issues
- Provides short-term crisis assessment, support, & stabilization in order to manage the crisis in the community
- Hospital & Jail diversion linkage & support, as applicable depending on the assessed needs
- Ensure continuity of care between the initial intervention and the involvement of follow-up services
- MHL 9.45 assessment for referral to local 9.39 Hospital, if required by law
- County-wide community partnership during on-site assessments with legal, ambulance, housing, & substance use services as needed

Mobile Crisis Team

Lead Crisis Clinician:

- Dual diagnosis trained and experience Masters level qualified health professional (LMSW, RN, etc.)
- MHL 9.45 Designee
- Assesses immediate needs during crisis & completes crisis plan
- Linkage to appropriate support, based on priority need to address crisis
- Partners with Police, Ambulance, & others during crisis assessment as needed

Care Management

- Community intervention and linkage trained / experienced Bachelors level paraprofessionals
- Supports Lead Clinician during on-site evaluation
- Communicates with collaterals during & after crisis
- Gathers documentation as needed during the crisis assessment
- Completes after crisis supports and linkages as needed



Care Management

During & After the Crisis

- Makes referrals to: providers, service coordination with community BH providers, county and social services agencies, etc.
- Receives referrals from hospital emergency departments, law enforcement, community BH providers, county and social services, etc.
- Accompanies or provides consultation to Crisis Lead Clinician & local law enforcement on BH crises calls
- Collaborates with other service providers in the community
- Credentialed to complete the adult community mental health assessment for HARP eligibility for linkage to HCBS

Personnel & Budget

- Mobile Crisis Team Positions:
 - Crisis Clinicians: TCMH Clinic or PROs program clinicians - Registered Nurse / Social Worker. Weekly on-call rotation reimbursement.
 - Care Managers: TCMH Care Management paraprofessionals – BA. Weekly on-call rotation reimbursement.
 - Crisis Supervision: Senior TCMH Clinician to coordinate on-call rotation, tracking utilization of services, quality metrics reporting, & clinical staff debriefing.
 - Exploring billing Medicaid managed care options through TCMH Mental Health Clinic OMH license. Revenue estimates from billing pending.
- Budget:
 - Personnel Estimate Costs:
 - Clinician On-call rotation cost, mileage, on-site paid/comp. time = \$25,000/yr
 - Care Manager On-call rotation cost, mileage, on-site paid/comp. time = \$25,000/yr

Mobile Crisis Partnerships

- Ambulance companies for medical, psychiatric, &/or substance use stabilization transportation as needed
- Police or Sheriff if violence/risk is suspected
- Youth Specialist if crisis evaluation is for a child
- Cornell University & Ithaca College if crisis involves a student
- Advocacy Center if crisis involves domestic violence or sexual assault
- Police dispatch throughout county and 911 to reroute mental health/addiction crisis calls for phone screening
- Suicide Prevention to screen and coordinate calls to/from Crisis team as needed
- Cayuga Medical Center ER/flex unit for medical, psychiatric, &/or substance use evaluation
- Substance use detox/crisis stabilization
- Housing providers for homeless or crisis respite support

Procedure:

Suicide Prevention Crisis Line:

- Provides 24hr, 7 days per week crisis line & warm line for support
- Screens all crisis calls
- Coordinates calls to & from the BH Mobile Crisis Team for on-site evaluation
- Communicates with Police, Ambulance, or others as needed
- Tracks data metrics on calls through outcomes

BH Mobile Crisis Team:

- Lead Crisis Clinician on-call receives call from Suicide Prevention & evaluates need for community evaluation
- If needed, Clinician requests Suicide Prevention to call Care Manager or others to meet at crisis
- Coordination with Police, Ambulance, or others as needed
- Completes required documentation as needed on-site



Documentation

Each interaction will be documented. This documentation includes the following information:

- Person's name
- Date of service
- Insurance information
- Time the service was requested, time service was provided, and total on-site service provision
- The presenting problem/s or need/s that was assessed
- Documentation of medical necessity
- The crisis treatment plan including recommendations for crisis stabilization services, if needed
- Intervention techniques used-What did the crisis clinician do?
- Person's response to the techniques – i.e. Did it help?

Evidenced Based Practice & Training:

- <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4405828/>
- <http://store.samhsa.gov/shin/content/SMA09-4427/SMA09-4427.pdf>
- <http://crisisservices.org/mental-health/>
- <http://www.tacinc.org/media/13106/Crisis%20Manual.pdf>
- <http://www.mass.gov/eohhs/docs/masshealth/cbhi/practice-guidelines-mci.pdf>
- <http://practiceinnovations.org/Initiatives/Suicide-Prevention>