



The Crisis Solutions Initiative

... building a crisis services continuum
to match a continuum of crisis
intervention needs

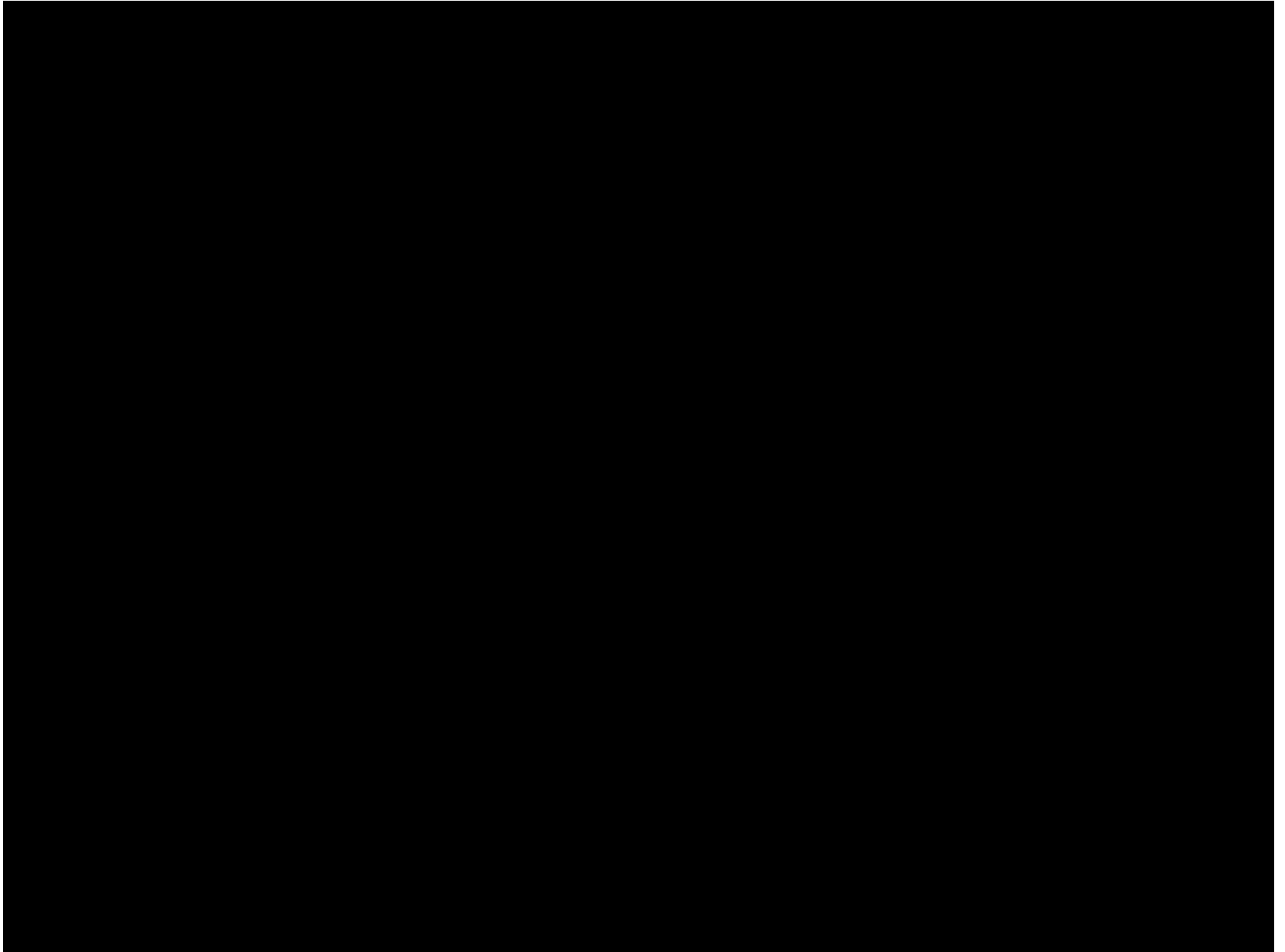
Dave Richard

Deputy Secretary of Behavioral Health
and Developmental Disabilities Services

Update to the Crisis Solutions Coalition

July 28, 2014

Reviewing our Charge





Crisis Solutions Initiative Challenges

- Recommend & establish community partnerships to strengthen the continuum of care.
- Promote education & awareness of alternative community resources to the use of emergency departments.
- Make recommendations related to data sharing to help identify who, when and where people in crisis are served, and what the results of those services are.
- Create a repository of evidence-based practices and provide technical assistance to LME/MCOs, providers, & other partners on how to respond to crisis scenarios.
- Recommend legislative, policy & funding changes to help break down barriers associated with accessing care.



N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Crisis Solutions Coalition

December 9, 2013



The Crisis Solutions Coalition Priorities

- 1. Fund, define, and monitor 24/7 Walk-in Crisis Centers as alternatives to divert unnecessary ED visits AND as jail diversion sites for CIT officers**
- 2. Provide training and support for all involved system partners – 911 responders, EDs, Providers, Consumers and Families, etc.**
- 3. Re-work Mobile Crisis Teams**
- 4. Fund the WHOLE service continuum -- Peer Support, Case management, Jail in-reach, EMS diversion, etc.**
- 5. More inpatient beds are needed**
- 6. Utilize our collective data**
- 7. Treat the whole person – integrated care**
- 8. EDs will continue to have a role and should be prepared to do so**
- 9. Focus on prevention strategies like Psychiatric Advance Directives & MH First Aid**



Initiative Status Update

- **Discovery of promising practices**
 - Site visits
 - Surveys
 - Research
 - Workgroups



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Expert Guest Speakers



Critical
Time
Intervention



Peer Support
Services



Recovery Oriented
Systems of Care



Psychiatric Advance
Directives



Magistrate Training

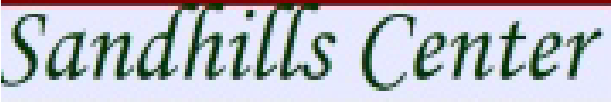


Supports for Individuals with I/DD



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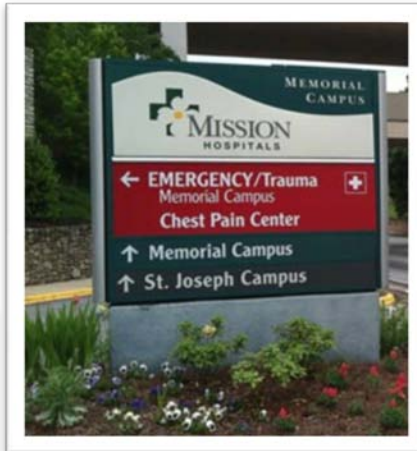
Local Crisis Coalition & LME-MCO Meetings



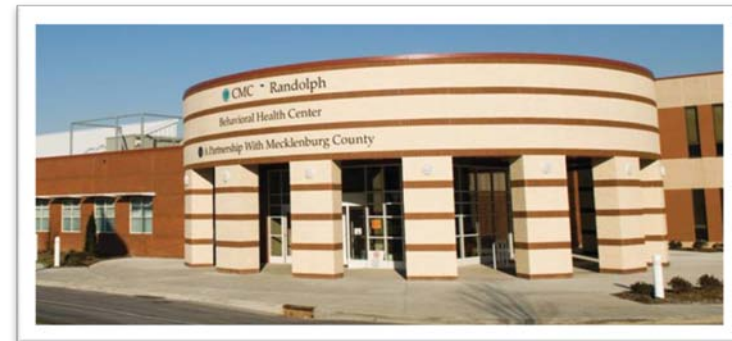


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Visits to Providers



Freedom House
Recovery Center





Update on the Coalition's Priorities

1. 24/7 Walk-in Crisis Centers

- BH Urgent Care Providers workgroup
 - Refining & defining levels of “walk-in” services
 - Next steps – Invite LME-MCO partners to join

2. Provide training and support for all involved partners

- LME-MCOs have many ongoing efforts dedicated to 1st responder and community education
- Centralized website as a resource:

www.CrisisSolutionsNC.org



Update on the Coalition's Priorities

3. Re-work Mobile Crisis Teams

- January 2015 Practice Improvement Collaborative in planning**
 - Focus on state-of-the-art Mobile Crisis models**
 - Host nationally known experts**
 - Develop consensus vision for broad based change**



Update on the Coalition's Priorities

4. Fund the WHOLE service continuum

- MH & SA Block Grant funds – \$6.1 million**
 - BH Urgent Care, EMS diversion service, Peer operated hospital diversion, Group Home Employee Skills Training, Critical Time Intervention, Recovery Centers, MH First Aid, Innovative Technologies**
- Legislative interest in funding BH Urgent Care & Facility Based Crisis (inc. for youth)**
 - Pending final budget**



Update on the Coalition's Priorities

5. More inpatient beds are needed

- Legislative report

6. Utilize our collective data

- Ongoing Data workgroup with diverse stakeholders
 - Resulted in demos and negotiations about sharing of NC DETECT data
 - Continued efforts to refine data gathering and analysis

7. Treat the whole person – integrated care



Update on the Coalition's Priorities

- 8. A continued role for EDs**
- 9. Focus on prevention strategies**
 - MH First Aid and Youth MH First Aid taking off!**
 - Initiated conversation with partners about promoting Psychiatric Advance Directives**

Crisis Services Continuum

