

# **N.C. DIVISION OF MH/DD/SAS**

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## **Crisis Provider Survey Results**

**A Report to the Crisis Solutions Coalition**

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# **Crisis Provider Survey**

- **Developed by DMH/DD/SAS and DMA staff**
- **Intended to inform our understanding about ...**
  - **available resources for persons in behavioral health crisis**
  - **and, the provider community's perception of the adequacy and quality of those resources**
- **Included traditional MH/DD/SAS provider community plus other provider partners**
  - **Hospitals, DSS, CCNC, EMS, Law Enforcement, etc.**
- **Electronically available for 1 month**
- **11 questions + Comments Option**



## **Survey Results**

- Well received – 1,161 providers responded!
- Providers represented all LME areas (135-360 per catchment area)
- Providers have consumers in all 100 counties
- 50% of responding Providers indicated they are part of a community collaborative that is actively pursuing crisis system solutions and/or seeking to improve the local crisis system.
- 70% of responding Providers indicated that they or their agency are enrolled with an LME-MCO.



# Providers Responding

Respondent's Profession	Bar Graph	Response Total	Response Percent
MH/SA Outpatient Provider		239	21%
County Social Services		179	16%
Comprehensive or Enhanced MH/SA Service Provider		148	13%
I/DD Service Provider		136	12%
Other		115	10%
MH/SA Licensed Individual Practitioner		93	8%
Community Care of North Carolina (CCNC) Care Manager		52	5%
Hospital or Psychiatric Inpatient Facility		37	3%
Hospital Emergency Department (ED)		37	3%
Primary Care Physician Practice		28	2%
Law Enforcement		22	2%
LME-MCO staff		24	2%
Health Department		12	1%
Emergency Medical Services		9	1%
Specialty Medical Care Practice		5	0%
Domestic Violence Program		5	0%

Total Respondents 1136 100%



# Frequency of Need for Provider Response to Crisis

5. Over the past six months, how often on average have you or your agency (if you do not personally provide services) assisted a person experiencing a mental health or substance abuse crisis?	Response Total	Response Percent
Never	69	6%
Less than once per month	187	16%
1-2 times per month	209	18%
About once a week	119	10%
A few times per week	161	14%
Daily or almost daily	366	32%
Don't know	34	3%
Total Respondents		1145
		100%



# Options Used by Providers Responding to Persons in Crisis

6. MH/SA Service Providers were asked: Over the last six months, how have you or your agency responded to patients experiencing a behavioral health or substance abuse crisis? (choose up to 3 responses)	Response Total	Response Percent
Referred to other crisis resources	375	32%
Handled in office using regular psychotherapy codes (90832-90838)	259	22%
Crisis intervention as a part of an enhanced service (ACT, CST, IIH, etc)	229	20%
Triage by phone only, with outpatient follow-up	169	15%
Handled in office using Psychotherapy for Crisis codes (90839/90840)	105	9%
Provided Mobile Crisis Management	106	9%
Handled in office using E/M codes	77	7%
Provided telepsychiatry for a patient at another site	38	3%
N/A	361	31%



# Most Frequently Used Resources

## 7. Which Crisis Resources are utilized most frequently by the persons you assist?

	Utilized Frequently
Emergency Department	28%
Enhanced Care Provider (e.g. ACTT team, IAH, or CST)	21%
Behavioral Health Outpatient Clinic including same-day services	19%
Emergency Medical Services	18%
Law enforcement	18%
LME/MCO Access/Call Center screening/ triage by telephone	17%
Psychiatric Inpatient Hospital or Substance Abuse Inpatient Facility	14%
Mobile Crisis Services (for mental health/SA crises)	13%
Walk In Crisis Center	10%
Facility Based Crisis Center or Detox Centers	9%
North Carolina Systematic, Therapeutic, Assessment, Respite and Treatment (NC START)	2%



# Effectiveness of Local Crisis System

**11. How effective is your local crisis system in addressing the needs of the populations who experience each of the following types of crises?**

	Very effective	Somewhat effective	Not effective	Don't Know/Unsure
At risk for suicide	21%	45%	10%	24%
Children experiencing abuse	20%	40%	12%	27%
At risk for homicide	18%	37%	9%	36%
Children witnessing domestic violence	13%	35%	18%	34%
Adults experiencing domestic violence	13%	38%	16%	34%
Substance use crisis	11%	40%	21%	28%
Victims of crimes	11%	37%	12%	39%
Adults experiencing exploitation or neglect	8%	37%	21%	34%
I/DD and challenging behaviors	7%	32%	23%	38%
Self-neglect (due to MH or SA issues)	8%	35%	26%	30%
At risk for incarceration due to MH or SA issues	6%	30%	29%	35%





# Adequacy of Local Crisis Resources

8. How well does each of the following resources in your local crisis system meet the needs of persons in MH/SA crisis?					
	Services adequately meet needs	Services meet needs partially or inconsistently	Services are inadequate to meet needs	Not available in my area/no experience with resource	Don't Know
LME/MCO Access/Call Center screening/triage by telephone	25%	27%	16%	4%	28%
Behavioral Health or Substance Abuse (SA) Outpatient Clinic (same-day services)	20%	27%	19%	6%	29%
Mobile Crisis Services (for mental health/SA crises)	21%	26%	20%	6%	27%
Emergency Medical Services	31%	28%	12%	3%	25%
CIT trained Law enforcement	18%	22%	13%	7%	40%
Walk In Crisis Center	12%	23%	16%	14%	35%
Facility Based Crisis Center or Detox Centers	11%	20%	16%	14%	39%
Emergency Department	24%	36%	19%	2%	18%
Psychiatric Inpatient Hospital or Substance Abuse Inpatient Facility	20%	32%	18%	8%	23%
North Carolina Systematic, Therapeutic, Assessment, Respite and Treatment (NC START)	6%	11%	12%	14%	57%
Enhanced Care Provider (e.g. ACTT team, IIH, or CST)	21%	25%	13%	7%	34%



# Use of Emergency Departments for BH Crisis

10. For persons experiencing a mental health and/or substance use crisis in your community, why do you think they would go to the Emergency Department?			
		Response Total	Response Percent
They do not know about alternative options or do not know where else to go		723	62%
They are accustomed to going to the Emergency Department (ED) for emergencies or other care		674	58%
Transportation to alternative options is not available		342	29%
Alternative options are not timely enough in response to crises		294	25%
Access is limited to alternative options (geographically)		284	24%
Alternative options are not effective/of poor quality		261	22%
Access is limited to alternative options (limited facility hours)		258	22%
There are no other options available in my community		248	21%
They believe there are no community mental health services		209	18%

Total Respondents 1161



# First Level Comments Review

Expand/Improve Non-Crisis Services	212
Improve/Train/Expand Workforce	118
Community Education	110
Expand BH Urgent Care Capacity	74
Care Coordination & Provider Collaboration	68
More Inpatient Beds	64
Improve/Expand Mobile Crisis	50
Expand Facility-Based Crisis Options	46
Law Enforcement Training & Collaboration	40
Changes in LME-MCO Operations	39
Other	30
Housing Options	13
Additional MHDDSA Resources in EDs	9
Transportation	9
<b>Grand Total</b>	<b>882</b>



## **Next Steps**

- **Outreach to larger volume responders (i.e. DSS colleagues) to gather more specifics**
- **Provide LME-MCOs with specific area results**
- **Continue to breakdown comments**
- **Consider using again in Autumn 2015 for annual comparison**



**N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

# **Coalition Discussion, Questions, Comments**