



Crisis Bed Registry & Behavioral Health Continuum of Care

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Panel on the Crisis Bed Registry Dashboard



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Community Need

July 2021-July 2022

- Total Crisis Calls = 241,352
- An average of 11% of those calls resulted in a mobile team dispatched
- Total mobile team dispatches = 27,168
 - On average, 73% of those mobile teams resulted in a crisis intervention that was community stabilized
 - Of those that were not able to be community stabilized, 20% required a psychiatric higher level of care intervention (~5,500)

“ It’s essential to have real-time information about what the status of availability is for the crisis facilities and inpatient units, not to direct where people go, but to provide more information on what resources are available for the facilities in supporting getting the person to an appropriate level of care without delay. ”

- Tenasha Hildebrand
Crisis & Veteran Services Administrator
Mercy Care



Best Practice



To sum up the best practice model of SAMHSA:

“ The Air Traffic Control (ATC) Model is used as a metaphor for an effective crisis continuum nationwide and is referenced to draw a parallel to how the gold standard of crisis services should operate using closed loop communication similar to the way air traffic controllers manage the high pressures of air safety. The basic idea is that a person in crisis can be thought of similar to an airplane, where the pilot is in constant communication with Air Traffic Control who has eyes on the plane at all times using GPS technology, ensures a warm handoff is completed at every stage in the flight and is able to see information in real time to ensure the plane makes it to its destination safely. ”

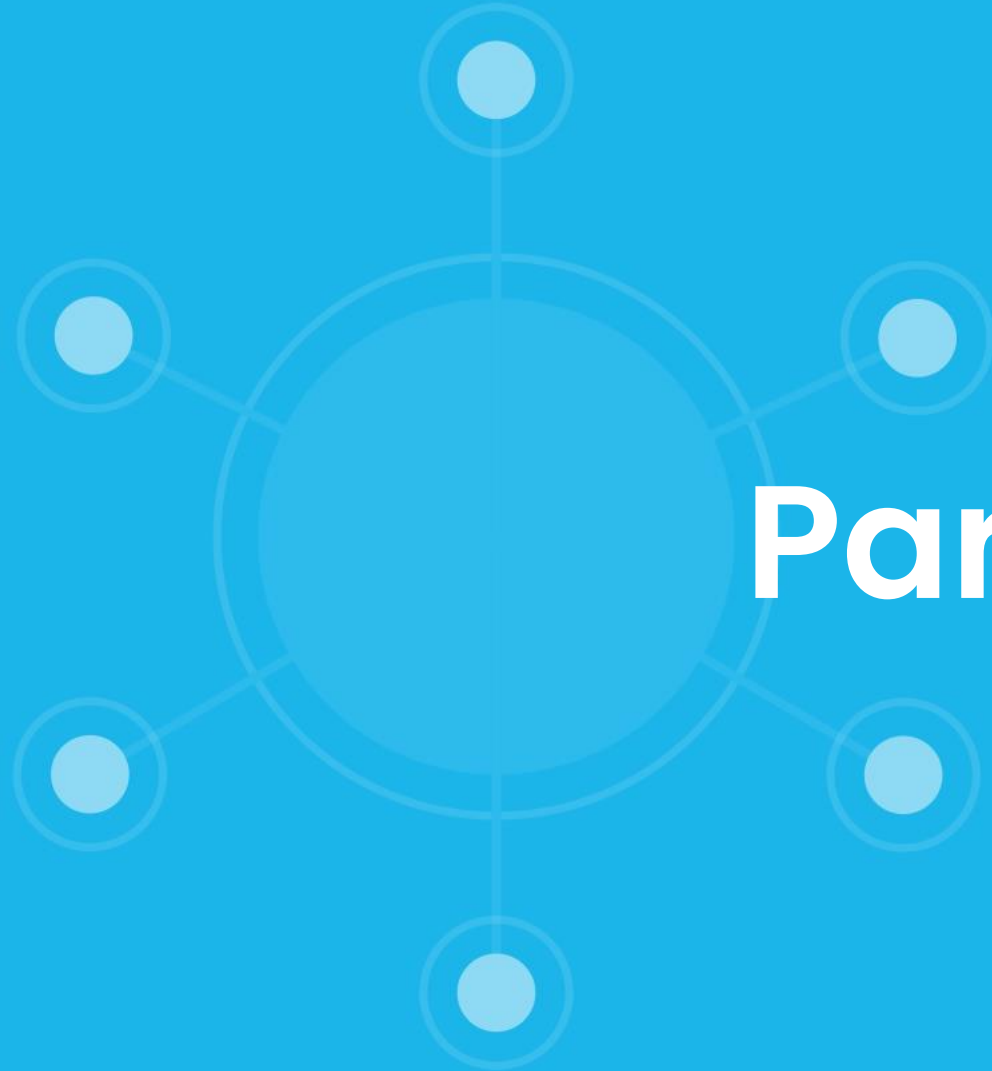
– Paloma Kwiedacz
Crisis Coordinator
AHCCCS

The Response

“ For Arizona to have a true crisis air traffic control model in line with best practice, the statewide crisis line provider, crisis mobile teams and RBHA’s must have access to real-time crisis observation/stabilization (OBS) capacity data. ”

– CJ Loiselle
Crisis Administrator
AHCCCS





Partners

The Partners







History of the Registry

- Work began between Solari and Health Current in 2021 toward a solution for Maricopa County, with initial pilot implementation funding provided by AHCCCS.
- AHCCCS received approval to allocate additional funding from the American Rescue Plan Act of 2021, Mental Health Block Grant (MHBG), to support the remaining statewide implementation activities.
- Task Order executed between Health Current and AHCCCS in May of 2022, which provided an official kickoff of the current project.



Project Work



Current Project Work

- Working with Solari in 2021, Health Current began to engage the pilot providers: Community Bridges, Inc. (CBI), Connections and RI International.
- Scopes of Work were executed for pilot providers in May 2022 and work began with the 3 pilot providers.
- Design work (approved by AHCCCS with input from Solari) was started in May of 2022 and is ongoing.
- Scopes of Work for the balance of the crisis bed registry providers will be executed by Sept. 30, 2022.
- AHCCCS Department of Grants Administration and the Crisis Team supports Health Current team through monthly meetings.



Participants

▪ Pilot Providers

- Community Bridges, Inc.
- Connections Health Solutions
- Recovery Innovations (RI) International

▪ First Round Providers

- ChangePoint Integrated Health
- Horizon Health and Wellness
- Mind 24-7
- Polara Health
- Southwest Behavioral & Health Services
- The Guidance Center
- Windhaven Psychiatric Hospital

▪ Second Round Providers

- Aurora Behavioral Health
- CBI Encompass Health Services
- Community Partners Integrated Healthcare
- Cornerstone Behavioral Health
- Haven Behavioral Hospital of Phoenix
- La Frontera Center
- Palo Verde Behavioral Health
- Phoenix Medical Psychiatric Hospital
- Sonora Behavioral Health Hospital
- St. Luke's Behavioral Health Center
- Valleywise Health



Continued Project Work

- Work continues with the 3 pilot providers through the fall of 2022, with pilot go-live of January 6, 2023.
- Pilot live through March 2023.
- First round and then second round providers will be engaged beginning April 2023.
- Solari will be involved with engagement and workflow training of the providers.
- All listed providers will be onboarded to a live dashboard no later than March of 2024.



The Crisis Bed Registry

- The Crisis Bed Registry (CBR) is an enterprise data warehouse that can receive information from crisis providers automatically, dependent on the provider electronic health record (EHR) capability, or by manual upload.
- To enhance collaboration with observation units (OBS), Contexture is developing data feeds with crisis units to feed capacity information directly from their unique EHRs via HL7 messages for admission, data and transfer (ADT) into the CBR or via flat file when EHR does not have the capacity for sending HL7.
- Not all crisis bed providers are able to send HL7 data immediately, so we will also collect data via flat files at certain times of the day, which will update the dashboard with the goal of moving to an all HL7 feed as soon as possible.
- Capacity data will be displayed on a provider-facing dashboard, accessible via computer or mobile device.
- All listed providers will be onboarded to a live dashboard no later than March of 2024.

Crisis Bed Registry Dashboard Elements



- Facility Type
- Facility Name
- Location
- Contact Information
- Population(s) Served
- Available Services
- Specialties
- Total Beds
- Beds Available

Dashboard Accessibility

- The user will be able to filter by facility name, facility type, population served or availability of beds in the area.
- It will be color-coded in colors appropriate for users that have color-blindness.



Panel Discussion



Q&A





Contact Information

For questions about the Crisis Registry Dashboard, contact:

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