

# Urgent Crisis Centers

Presentation to the  
Transforming Children's  
Behavioral Health Policy and  
Planning Committee

September 6, 2023

# Urgent response for children's mental health crises.

- Thoughts of suicide or self-injury
- Feelings of depression, anxiety or hopelessness
- Out-of-control behaviors
- Substance misuse
- Any mental health crisis



**No appointment needed**



**Child & Family  
Agency** of Southeastern  
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**Wellmore**  
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**Yale New Haven Children's Hospital**

# Why Urgent Crisis Centers?

## **Children's Behavioral Health Plan (2014):**

- Recommended expanding crisis-oriented behavioral health services to address high utilization rates in emergency departments. Specifically, explore alternative options to ED's, through short-term (e.g., 23 hour) behavioral health assessment/crisis stabilization centers.

## **Children's Behavioral Health Urgent Care and Crisis Stabilization Unit Workgroup (2021):**

- EDs are routinely overwhelmed by the numbers of patients presenting for care, resulting in overtaxed staff resources and significant wait times for patients.
- A significant percentage of youth who present to an ED with a behavioral health need could be effectively assessed and treated in another setting. This is supported by the fact that these youth are not ultimately admitted to an inpatient hospital.
- EDs vary regarding the behavioral health expertise of their staff, and in their familiarity with local systems of care and their ability to connect youth to ongoing community services. This can sometimes increase the chances of youth being referred for continued hospitalization.

# Why Urgent Crisis Centers?

## **Short-Term Solutions to Behavioral Health ED Volume Workgroup -- Family Input**

(family surveys administered through family advocacy organizations and local community collaboratives):

- **Create alternatives to Emergency Departments for youth experiencing behavioral health needs:**
  - Expanding Mobile Crisis services
  - Create alternate places to receive care (e.g., Urgent Crisis Center)
- **Improve the behavioral health care in Emergency Departments for youth who need to go there:**
  - Add more staff with behavioral health expertise
  - Create separate space appropriate for serving children with behavioral health needs
  - Improve timeliness of assessments
  - Improve referral process from ED to other services
  - Better communication between EDs, community-based providers, and schools

# Why Urgent Crisis Centers?

SAMHSA National Guidelines for Behavioral Health Crisis Care – A Best Practice Toolkit:

- Regional Crisis Call Hub Services:

***Someone To Talk To***

- Mobile Crisis Team Services:

***Someone To Respond***

- Crisis Receiving and Stabilization Services:

***A Place to Go***

UCC Catchment Region	Program Location	Included Cities	Daily Service Capacity	12-Month Funding
North Central	Hartford	Hartford / Manchester / Meriden New Britain / Enfield	24	\$4,200,000
Southern	New Haven	Bridgeport/ Norwalk Stamford / New Haven/ Milford	24	\$4,200,000
Eastern	New London	New London / Willimantic Norwich / Old Saybrook	12	\$2,600,000
Western	Waterbury	Waterbury / Danbury Torrington	12	\$2,600,000

# Multi-System Implementation

- Department of Social Services
  - Program-Specific Billing Codes and Fees
  - Medicaid State Plan Amendment
- Department of Public Health
  - Protocols for Ambulance Transport to UCC in Consultation with Hospital Medical Staff
- Department of Education
  - Statewide Meeting of School Superintendents
  - Statewide Special Education Conference



UCC Program Component	Community-Based Programs	Hospital-Based Program
Specialized Space	Yes	In Process
24/7 Availability	In Process	Yes
Walk-In Access	Yes	Yes
Emergency Services Access	In Process	Yes
Crisis Triage	Yes	Yes
Nursing Assessment	Yes	Yes
Clinician Assessment	Yes	Yes
Psychiatric Assessment	Yes	Yes
Crisis Stabilization	Yes	Yes
Youth/Family Strengths & Needs Assessment	Yes	Yes
Youth/Family Safety Planning	Yes	Yes
Connect to Care	Yes	Yes
Community Collaboration	Yes	In Process
Follow-Up Support	Yes	In Process

# Shared Vision of Care

Collaborative

Inclusive

Deliberate

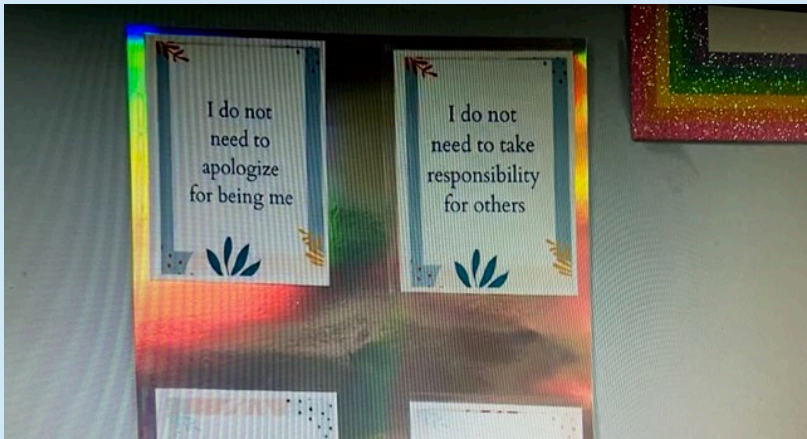
Innovative

Partnering

Committed



Informed by variety of clinical approaches used by outpatient and home-based treatment, but inclusive of solution focused, crisis intervention and trauma informed approaches





# Youth and Families Connecting to Care



# Hearing from the youth and families...what have they said about their experience at the UCC

**Connected**

**Relieved**

**Hopeful**

**Calm**

**Trusted**

**Satisfied**

**Grateful**

**Safe**

**Motivated**

**Empowered**

**Heard**



# Making an Impact

- Utilization
  - How many youth & families access the services?
  - From where are youth & families referred to UCCs?
  - What are the presenting challenges & needs of the youth & families?
  - Are there disparities or barriers to youth and families accessing the UCCs?
- Youth & Family Experience of Care
  - Do youth & families experience engagement, connection, and affirmation in UCCs?
  - Do youth and families believe the UCCs were helpful to them?
- Outcomes
  - Are youth and families able to successfully stabilize and manage their crisis?
  - Are youth and families able to be connected to the follow-up care they need?
- Systems Issues
  - What services do youth & families most often need after UCCs? Are these services available?
  - Do UCCs contribute to fewer youth presenting unnecessarily to EDs?
  - Do EDs experience fewer instances of overcapacity?

# Challenges for Success

- Workforce
  - Shortage, diversity
- Reimbursement
  - No reimbursement
  - Under reimbursement
  - Medicaid rates
  - COLA
  - Private insurance vs. Medicaid available services
- Connect to care
  - Families cannot access care where and when needed
  - Long waitlists (outpatient and in-home services)
- UCCs are embedded within larger systems
  - Community mental health, school, primary care offices, DCF.
  - Time to demonstrate impact
  - Linkage of these systems is often limited (clinically, data)
  - Ambulance service



# Urgent Crisis Centers



1680 Albany Avenue, Hartford, CT 06105  
(860) 297-0520  
[thevillage.org/UCC](http://thevillage.org/UCC)



141 East Main Street, Waterbury, CT 06702  
(203) 580-4298  
[wellmore.org/urgent-crisis-center](http://wellmore.org/urgent-crisis-center)



255 Hempstead St, New London, CT 06320  
(860) 437-4550  
[childandfamilyagency.org/urgent-crisis-center](http://childandfamilyagency.org/urgent-crisis-center)



20 York Street, New Haven, CT 06510  
(203) 688-4707  
[ynhh.org/childrens-hospital/services/emergency-services](http://ynhh.org/childrens-hospital/services/emergency-services)

*In partnership with:*



*If a youth needs immediate medical attention,  
call 9-1-1 or go to the nearest hospital.*