

Urgent Crisis Centers

Presentation to the
BHP Child/Adolescent
Quality, Access, & Policy
Committee

October 18, 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
Connecticut, Inc.



Wellmore
Behavioral Health
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YaleNewHavenHealth
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
North Central	Hartford	Hartford / Manchester / Meriden New Britain / Enfield	24
Southern	New Haven	Bridgeport/ Norwalk Stamford / New Haven/ Milford	24
Eastern	New London	New London / Willimantic Norwich / Old Saybrook	12
Western	Waterbury	Waterbury / Danbury Torrington	12

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

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?

Urgent Crisis Center

24/7/365

The UCC will:

- receive youth/young adults ages 0-18, experiencing a behavioral health crisis via walk-in (or police or ambulance drop off [*coming soon*])
- triage youth based on risk and needs;
- provide de-escalation and crisis stabilization services
- offer a thorough assessment to determine appropriate level of care
- develop a crisis safety plan collaboratively with the family
- Provide quality care coordination
- Aftercare/bridge services until next service is available



Urgent Crisis Center

The UCC Team

The program is staffed by medical and behavioral health personnel:



- Psychiatrists
- Advanced Practicing Registered Nurses (APRN)
- Registered Nurses
- Mental Health Clinicians
- Discharge Planners
- Family Navigators
- Behavioral Specialists
- And Administrative Supports



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



Urgent Crisis Centers



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



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



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



20 York Street, New Haven, CT 06510
(203) 688-4707
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.*