

Working Effectively with Mental Health Crisis Services in Pierce County

Spring 2017 EMS Training

TRAINING OBJECTIVES - INCREASE UNDERSTANDING OF:

1. Mental health needs and services in Pierce County
2. Pierce County Crisis Services
3. How to work effectively with Pierce County Crisis Services

PIERCE COUNTY MENTAL HEALTH NEEDS DATA

Washington State overall has serious mental health challenges

- Washington is ranked the 47th worst in the country for combined prevalence of mental illness and the lowest rates of access to care (*Mental Health America's "The State of Mental Health in America, 2016"*)
- Washington has only 8.3 psychiatric beds per 100,000 residents, the third worst in the country. The national average is 26.1 per 100,000 residents. This psychiatric bed shortage is the main reason the American College Of Emergency Physicians gave Washington an F for "Access to Emergency Care" (2014 "Emergency Care Environment Report Card")

Pierce County has worse mental health problems than the state in many ways

- In 2014, Pierce County adults reported 5.34 mentally unhealthy days out of the last 30 days, compared to the statewide average of 3.42 days. This means our community members had 56% more mentally unhealthy days than the state as a whole. (2014 WA State Behavioral Health Risk Factor Surveillance Survey)
- Washington had an 11% higher suicide rate than the national average in 2013, and Pierce County has a higher rate than the state. From 2010 to 2014, Pierce County was one of six counties with suicide rates higher than the state's. The WA rate is 14 suicides per 100,000 people, compared to 17 suicides per 100,000 Pierce County residents – this is 21% higher than the state rate. (WA State Suicide Prevention Plan)
- To translate this data to people's lives, 150 of our county residents died from suicide in 2014, and 144 residents in 2015. (WA Dept. of Health Death Certificate data)

Many Pierce County youth are struggling with mental disorders and emotional disturbance

Pierce County 10th graders reported in the 2014 WA State Healthy Youth Survey:

- 38% felt so sad or hopeless for at least two weeks in the past year that they stopped doing their usual activities – compared to 29.8% in the U.S
- 63% of 10th graders felt nervous, anxious, or over the edge in the past 2 weeks; 52% felt unable to stop or control worrying in the past 2 weeks
- In the previous year, 23% of 10th graders considered suicide, 19% made a suicide plan, and 11% attempted suicide

PIERCE COUNTY MENTAL HEALTH SERVICES

People who have Medicaid and meet criteria ("Access to Care Standards" – for more info, see: www.dshs.wa.gov/sites/default/files/BHSIA/dbh/Providers/ACS_Oct2016.pdf) for serious mental disorders can access a coordinated system of mental health services. These services are administered by Optum Behavioral Health Organization (BHO), through a contract with WA State. As of April 2016,

Optum BHO also administers contracts with local organizations to provide substance use disorder treatment. Optum BHO does not provide direct mental health services, but contracts with local organizations to provide services. Examples of mental health services people with Medicaid who meet criteria for serious mental disorders can receive include:

- Prompt intake appointment
- Case management
- Counseling
- Medication management
- Crisis services
- Post-hospitalization and post-jail support
- Possibly residential treatment or supported housing

About 25% of Pierce County residents have Medicaid, but not all meet criteria to qualify for services through Optum BHO. **There is no centralized oversight or coordination of services for community members with private insurance, Medicare, and Medicaid or no insurance who don't meet criteria for serious and/or chronic mental disorders.**

Difficulty finding quality mental health services in a timely manner frequently results in mental crises that could have been avoided – so people call 911, go to the ED, are jailed or hospitalized.

- County residents leaving Western State Hospital who don't already have a psychiatrist, or Medicaid, can't get a psychiatric medication appointment for at least 4 weeks.
- Average wait time for a new patient with insurance to get an appointment at a large outpatient mental health organization in our community is also 4 weeks.
- Compared to the U.S. average of 26.1 psychiatric beds per 100,000 people, and WA having 8.3 beds, Pierce County has only 2.8 psychiatric beds per 100,000 residents.

Workforce shortages are part of the problem.

- Pierce County is a Mental Health Provider Shortage Area, along with most of Washington (*Health Resources and Services Administration*)
- A concurrent shortage of primary care physicians means less capacity for primary care to help fill mental health treatment gaps - Pierce County has 1 primary care physician for every 1,440 residents, compared to 1 for every 1,190 in WA. (*Area Health Resource File – collection of data from 50+ sources*)

The City of Tacoma adopted the Mental Health/Chemical Dependency Sales Use Tax in 2012, which has funded specialized programs and services for their residents. Many of these services are aimed at decreasing arrest and incarceration, use of 911 services, ED visits, and hospitalization.

MENTAL HEALTH CRISIS SERVICES

Mental Health Crisis Services are available for ALL Pierce County residents, regardless of their insurance or whether or not they meet mental disorder severity criteria. Community-based crisis services are also administered by Optum BHO, and include the following:

- Youth & Family Crisis Services – Family Behavioral Health of Catholic Community Services
- Pierce County Crisis Line – ProtoCall (national organization with call center in Oregon)
- Adult Crisis Services / Mobile Outreach Crisis Team (MOCT) – MultiCare Behavioral Health
- Recovery Response Center (RRC) – Recovery Innovations (RI) International

However, the 75+% of our community members who don't qualify for mental health services administered by Optum BHO are still on their own to find help after the immediate crisis is over.

Two organizations provide crisis outreach services in Pierce County. Family Behavioral Health provides crisis outreach services for children and youth age 17 and under. Pierce County Crisis Services

provides crisis outreach services for persons age 18 and over. Most crisis outreach services begin after someone calls the Pierce County Crisis Line. The Crisis Line then notifies either Family Behavioral Health or Pierce County Crisis Services, depending on the age of the person in crisis. It was recently approved that EMS can now call Family Behavioral Health directly when they are working with a child or youth in mental crisis.

Information about crisis services provided by Family Behavioral Health, Pierce County Crisis Services, and the Recovery Response Center - and how to work with them effectively - is outlined in **EMS Guides, which are available for your ongoing use.**

2-1-1 MENTAL HEALTH RESOURCES NAVIGATION PROGRAM

This new program will be useful for EMS personnel when community members ask them how to find mental health services. Community members can call 2-1-1, and phone staff will provide one-on-one assistance finding help for themselves or others. Callers can also get information and referrals for other community services and resources. **EMS personnel can give people 2-1-1 program flyers that direct them to call 2-1-1 for mental health services – the flyer is available for you to print and distribute.**

HOW EMS PERSONNEL CAN HELP

Continue to treat community members you help with respect and compassion. What's important to keep in mind is that:

- One in 5 people have a mental health disorder – most are sons and daughters, parents and grandparents, neighbors, employees and volunteers – our community members.
- Many have tried and failed to get consistent, quality treatment in our community.
- With trauma, loss, misfortune, or genetics, any one of us or our loved ones might someday face a mental crisis.

You can also help by continuing to improve your knowledge and skills to provide the best possible assistance to our community members facing a mental crisis.

The service you give during a mental crisis could make a big difference in what happens next for people; you might be able to give them hope and strength to overcome barriers to finding help.

TRAINING PRESENTERS

Jodie Leer, LMHC - Recovery Services Administrator II, Recovery Response Center / Recovery Innovations, International

Nolita Reynolds, MA, LMHC, CMHS - Clinical Director, Pierce County, Family Behavioral Health / Catholic Community Services

TRAINING DEVELOPMENT PARTNERS

Central Pierce Fire & Rescue

East Pierce Fire & Rescue

Family Behavioral Health / Catholic Community Services

Pierce County Crisis Services

Prevent-Avert-Respond (PAR) Initiative / CHI Franciscan Health

Recovery Response Center / RI International

Tacoma Fire Department

West Pierce Fire & Rescue