



Mercy Care Regional Behavioral Health Authority Crisis Facilities

Nevada Suicide Prevention Conference

Crisis Now Summit

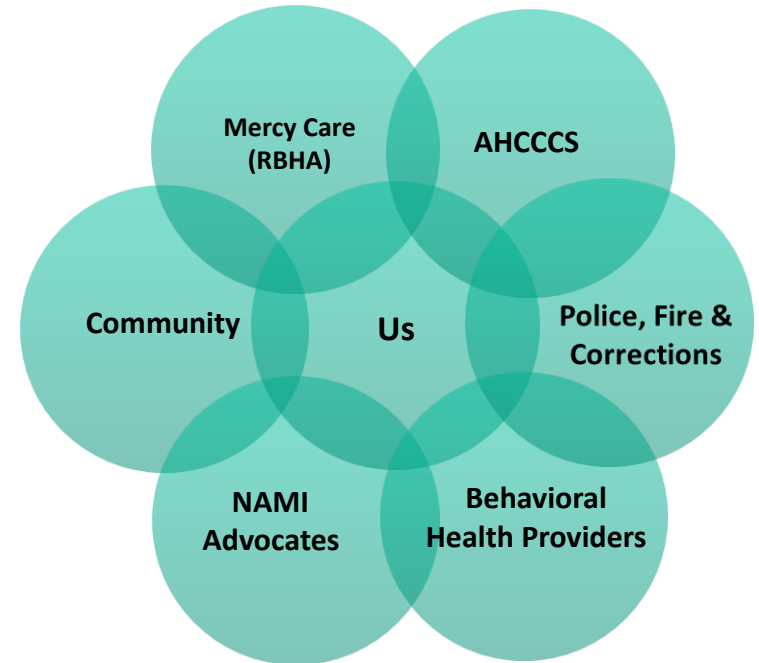
Frank O'Halloran

ohalloranf@mercycaresaz.org

Crisis System Overview – What Works

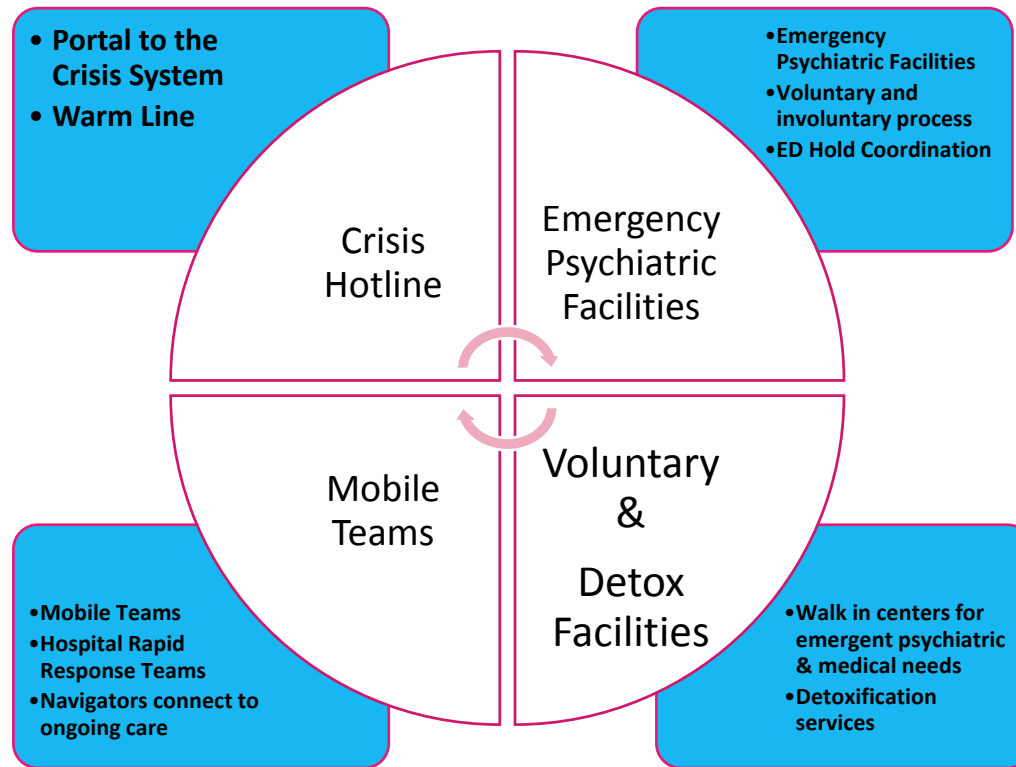
Multi-faceted and accessible crisis system for all

- Crisis Hotline and Warmline
- Crisis Mobile Teams
- **Crisis Facilities**
- **Detox Facilities**
- 24/7 Outpatient
- Transition Navigators
- **Hospital Rapid Response**



**Our Crisis System is a Community Collaboration:
It's a relationship**

Mercy Care Crisis Services Continuum



Access the BH Crisis System

Call the crisis line- 602-222-9444



First line of defense

Average 22,000 calls per month

89% triaged and appropriate community service provided – crisis stabilized

9% need to dispatch crisis mobile team to the caller

.5% are transferred to 911



When Police call

Priority given to Police and Fire

Identify themselves as “Whatever City Police” and ask for a supervisor

Immediately routed to a supervisor

If a MT is requested one is dispatched

And it is not questioned

Commitment to First-Responder Partnership

- Over 57% of our facility volume is provided by law enforcement
- Quality service and responsiveness to community/first responder needs
 - Arrests viewed by both BH & CJ Systems as last resort
 - EDs need to be the last resort for BH needs for people using our healthcare system
 - So we provide:
 - Robust behavioral health crisis system – 24/7/365 crisis facilities & MTs
 - “No Wrong Door” Philosophy – we will not turn away 1st responders
 - Fast Service whether you bring people to us or we come to you
 - ❑ 1 to 8 minute drop off time – 19,185 in 2018
 - ❑ 35 minute crisis mobile team response time – 3,355 in ‘18
- Host a variety of forums, utilize data to drive decisions, we meet regularly within collaborative community partnerships with all first responders and crisis providers - **together.**

Community Collaboration

- Five-Legged Stool of Crisis Intervention Team or CIT is a foundation to a successful crisis system



1. Police Training

- CIT 40-hour
- CIT Advanced
- Behavioral Health Awareness
- Be Safe
- ASIST
- Fire CST

2. Community Collaboration

1. Crisis Community Collaborative

3. Vibrant and Accessible Crisis System

- NO WRONG DOOR

4. Behavioral Health Staff Training

5. Family, persons with behavioral health illnesses, and advocates all collaborate and receive mutual education

Emergency Psychiatric Centers

Community Bridges Inc. – Community Psychiatric Emergency Center

358 E. Javelina Ave, Mesa
(877) 931-9142

Connections Arizona – Urgent Psychiatric Center

1201 S. 7th Ave. Suite #150 Phoenix
(602) 416-7600

RI International– Recovery Response Center

11361 N 99th Ave. Peoria
(602) 650-1212

Emergency Psychiatric Centers

Drop-off or walk-up

No Wrong Door

Involuntary or Voluntary

Involuntary

ARS Title 36 petition
process



Access Points & Detox Centers

Community Bridges Voluntary services

Drop-off or walk-up

- Access Points:
 - 24/7 outpatient and psychiatric medication services
 - Assess for ongoing services, provide brief intervention, as needed, and coordinate ongoing care
 - ☐ Mesa: 358 E. Javelina
 - ☐ Avondale: 824 N. 99th Ave.
- Addiction Recovery Centers:
 - 24/7 medically monitored detox
 - 23-hour crisis stabilization
 - 3-5 day inpatient, treatment
 - ☐ EVARC Mesa: 560 S. Bellview 480-962-7711
 - ☐ CCARC Phoenix: 2770 E. Van Buren 602-273-9999

Access to Care Line 877-931-9142

Challenges

Arizona and Nevada are very similar in geography and demographics

Rural communities do not currently have the same accessibility as Maricopa County (Phoenix) & Pima County (Tucson)

We do not have a children's drop-off center

History

Arnold v. Sarn applied to Maricopa Co. only

required an authority to provide oversight

History changing with new RBHA contracts in 2022



Thank You

