



Crisis Services

Consulting

Software Solutions

A CRISIS HAS NO SCHEDULE®

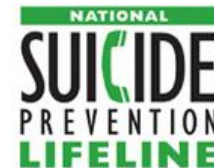


## Quality and Expertise

- ✓ Behavioral Health Link, a Georgia based business, has provided crisis intervention, behavioral health screening, triage, and linkage services since 1998
- ✓ Accredited by URAC as a Health Call Center, by the American Association of Suicidology as a Crisis Center, and by CARF as the first ever accredited Crisis and Information Call Center
- ✓ We are also accredited by Contact USA for online emotional support (chat and text intervention)
- ✓ Experts in crisis intervention, BHL is also part of the National Suicide Prevention Lifeline and is the only Lifeline center in Georgia
- ✓ BHL also operates mobile crisis teams in 40 Georgia counties (Metro and Coastal Savannah). These teams are accredited by CARF for Crisis Intervention and Assessment/Referral.



AMERICAN ASSOCIATION OF SUICIDOLOGY  
*Suicide Prevention is Everyone's Business*



# Cutting-Edge Technology

Using our software, infrastructure, web-based tools, and professional staff, BHL:

- Actively engages the caller or mobile crisis recipient in collaborative problem solving while collecting relevant clinical data and demographics
- Tracks the location and status of the individual in need
- Tracks available emergent and urgent resources such as urgent appointments, mobile crisis team location and status, crisis stabilization unit bed availability
- Ensures connection to the most appropriate resource as close to the individual as possible



What makes our services unique is that we utilize proprietary software and live dashboards to create an unbroken data stream for each episode of care



We can maintain a complete record of the services provided as well as the live capacity and response of the service environment into which BHL refers the individual for services

# Award Winning Innovation



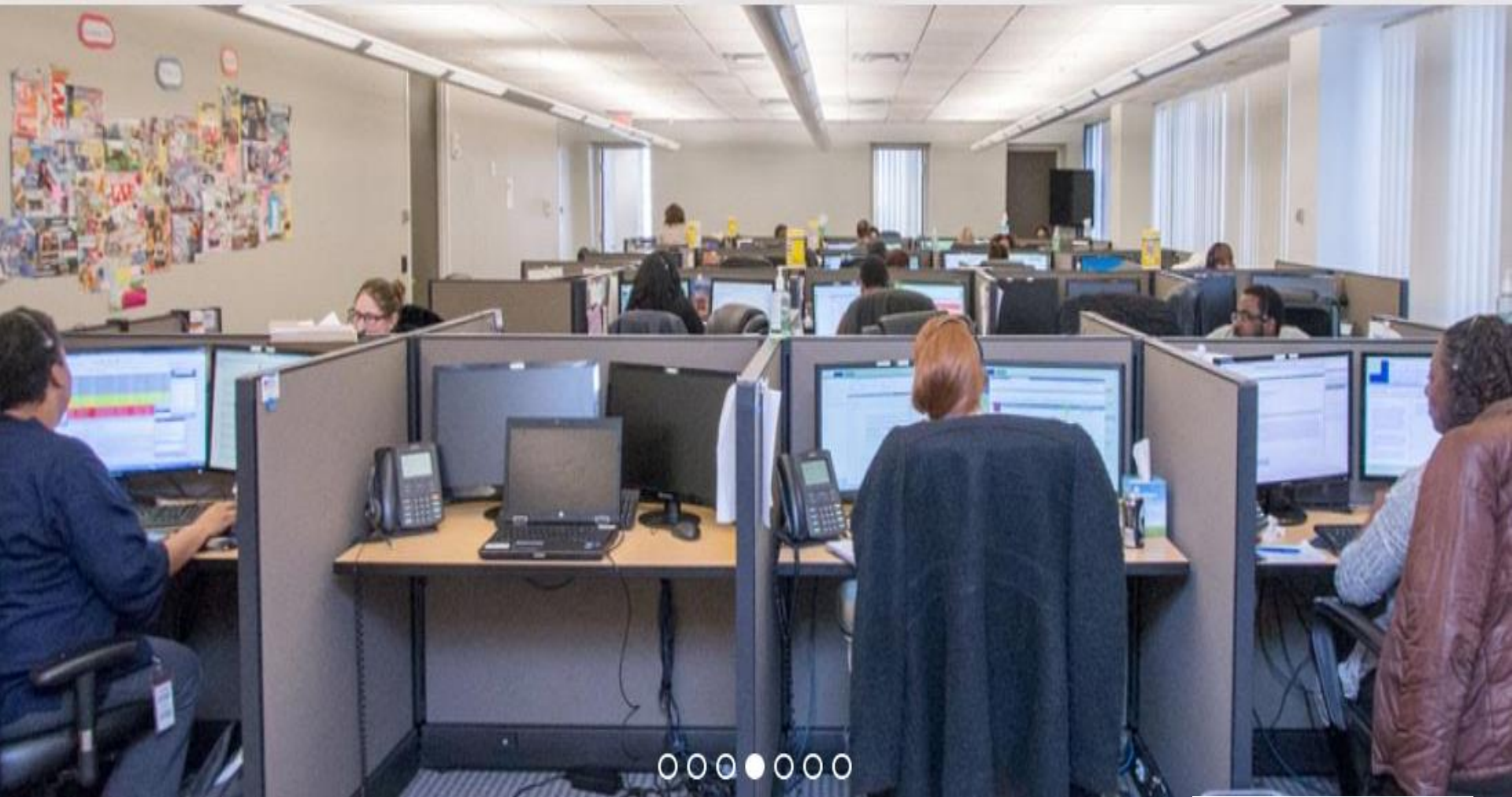
## EXCELLENCE IN HEALTH INFORMATION TECHNOLOGY

Supported by Qualifacts, Inc.  
[Behavioral Health Link](#)

Atlanta, GA

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## Crisis Call Center

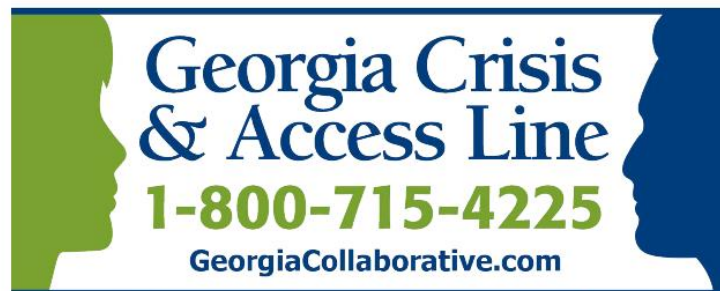


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**The Georgia Crisis & Access Line, 1-800-715-4225, is a toll-free, confidential hotline available 24 hours a day, 7 days a week from anywhere in Georgia. It connects callers with a trained, professional who can help them get the services they need if they or someone they know are in emotional distress, behavioral crisis, a suicidal crisis, or have other problems with mental health, drugs, or alcohol.**

**The hotline is staffed by trained and caring professionals who are available around the clock to provide help and hope. Our goal is to help connect individuals with care quickly, close to home, and to avoid unnecessary law enforcement or emergency department intervention.**

## **A CRISIS HAS NO SCHEDULE**



**Help is available 24/7 for problems with developmental disabilities, mental health, drugs, or alcohol.**



**Provided through the Georgia Collaborative ASO**

**260,000 Calls  
In 2016**

## GCAL BY THE NUMBERS

The Georgia Crisis & Access Line receives 800-1000 contacts on most business days and makes nearly as many outbound contacts to coordinate care.

Nearly 40% are individuals calling for themselves. 16% are calling for their friends or family. A surprising 46% are professionals seeking support for an individual under their care or in their services.

Professionals call GCAL from emergency rooms, community mental health centers, private psychiatric hospitals, family and children services, courts, schools, law enforcement, probation and parole, juvenile justice, and many others

**18,000-25,000  
Calls Per Month**

**Several Thousand Electronic  
Referrals a Month**





# National Suicide Prevention Lifeline (NSPL) 1-800-273-TALK

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BHL has been part of NSPL for many years. This is primarily a volunteer network. If you have a Georgia area-code and dial the NSPL number or 1-800-Suicide, you will get the BHL/GCAL call center M-F 8-4:30.

After hours and on weekends, these calls are routed to other Life-line centers outside Georgia.

BHL answers an average of 25,000 of these calls per year. However, 75,000 calls a year on average from Georgians are answered out of state





## Mobile Crisis Response Services

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# Rural and Urban One- Hour Response

GCAL dispatches all mobile crisis teams statewide.

BHL operates Mobile Crisis Response Services in 6 metro Atlanta counties and 34 coastal counties in the Savannah area (about 50% of Georgia's population)

Benchmark Human Services operates mobile crisis services in Regions 1, 2, 4 and 6.

Live Dispatch Monitor allows immediate location of and communication with mobile teams in the field

Caring professionals respond to provide crisis intervention services wherever the crisis occurs

Menu Pending MC Dispatch 6/16/2016 7/17/2016 25 Clear Staff Export to XLS Export to Xlsx Export to CSV Export to PDF Download RTR Download MRD Clear Sorting Collapse

Display Notes  BHL Only

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#	Transit Time	Assessment Time	Status	Status Detail	Dispatch	Age	Location Type	Dispatch Level	MC Team	Referral Source	Crisis Region	Crisis County	Crisis Loca
<a href="#">Edit</a>	00:39		Transit	Not Applicable	00:00	21	Residence	Level 1	BHL Region 5 MCRS Zone A Savannah	N/A	5	Effingham	Residence Rd
<a href="#">Edit</a>	00:49	00:15	Assess	Not Applicable	00:04	27	Other	Level 4	Benchmark Region 4 MCRS Zone D	N/A	4	Dougherty	Other 2111 Street
<a href="#">Edit</a>	00:47	00:43	Assess	Not Applicable	00:00	41	Hospital ED	Level 4	Benchmark Region 2 MCRS Zone A	University Healthcare	2	Richmond	Hospital Et Walton We
<a href="#">Edit</a>	00:44	01:11	Assess	Not Applicable	00:00	17	Social Service/State Agency	Level 4	Benchmark Region 1 MCRS Zone B	Catoosa	1	Catoosa	Social Serv Agency 70
<a href="#">Edit</a>	00:38	00:56	Linkage	Not Applicable	00:00	43	Hospital ED	Level 4	Benchmark Region 2 MCRS Zone A	University Healthcare	2	Richmond	Hospital Et Walton We

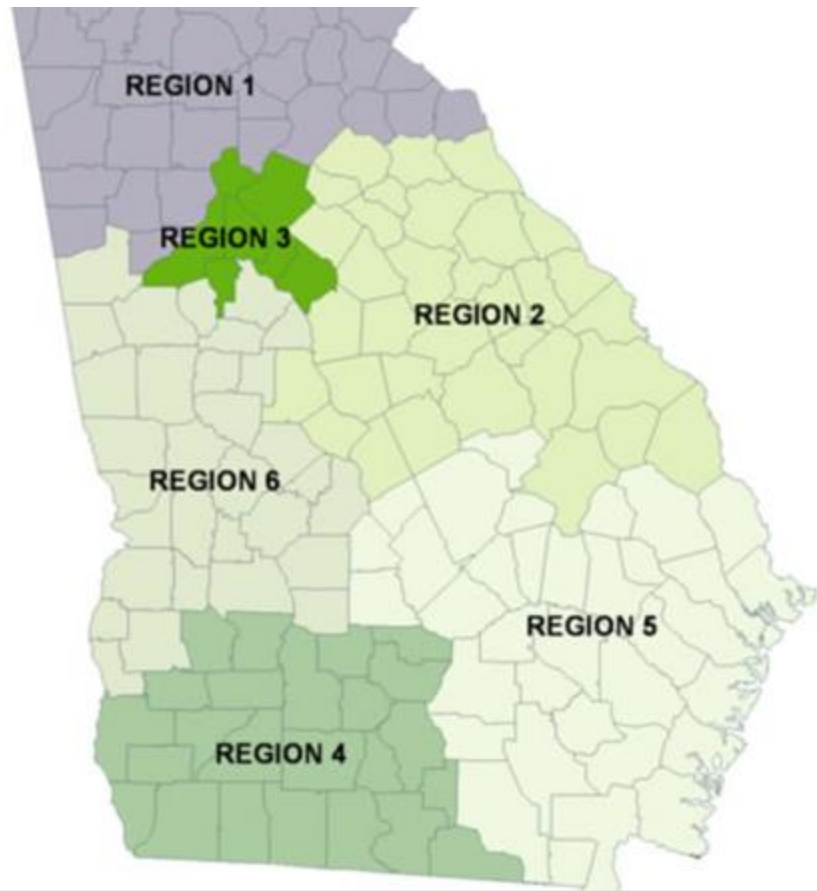


From our perspective the value of having an unmarked car with a mobile crisis team in plain clothes arrive during a crisis is – priceless to those we serve.

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# Mobile Crisis

GCAL Dispatches all Mobile Crisis Teams Statewide



## MOBILE CRISIS DISPATCHES CALENDAR YEAR 2016

Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Grand Total
						
1898	3929	3755	1202	1969	2420	15173

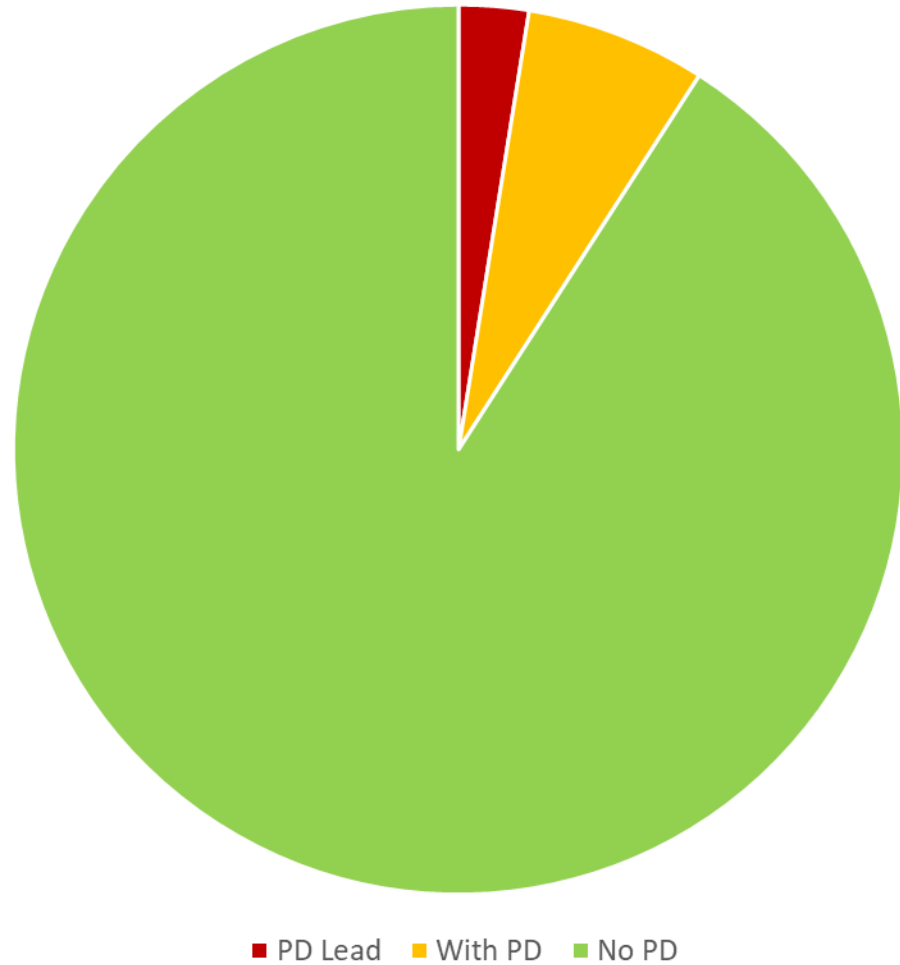
# Mobile Crisis Dispatch Levels

We do everything possible to respond without law enforcement intervention

15,173  
Dispatches

1,388 with Law  
Enforcement

Dispatch Levels 2016 Dispatches



# Behavioral Health Link and Grady Hospital

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Coming Together in Public/Private Partnership to Improve Crisis Services for the City of Atlanta

Grady EMS provides emergency 911 and EMS services for the City of Atlanta and is part of Grady Hospital- the largest not for profit hospital in Georgia serving metro Atlanta.

In 2012, Behavioral Health Link (BHL) and Grady EMS began working together to develop an *Upstream Crisis Intervention Unit*

# Grady Hospital Overview

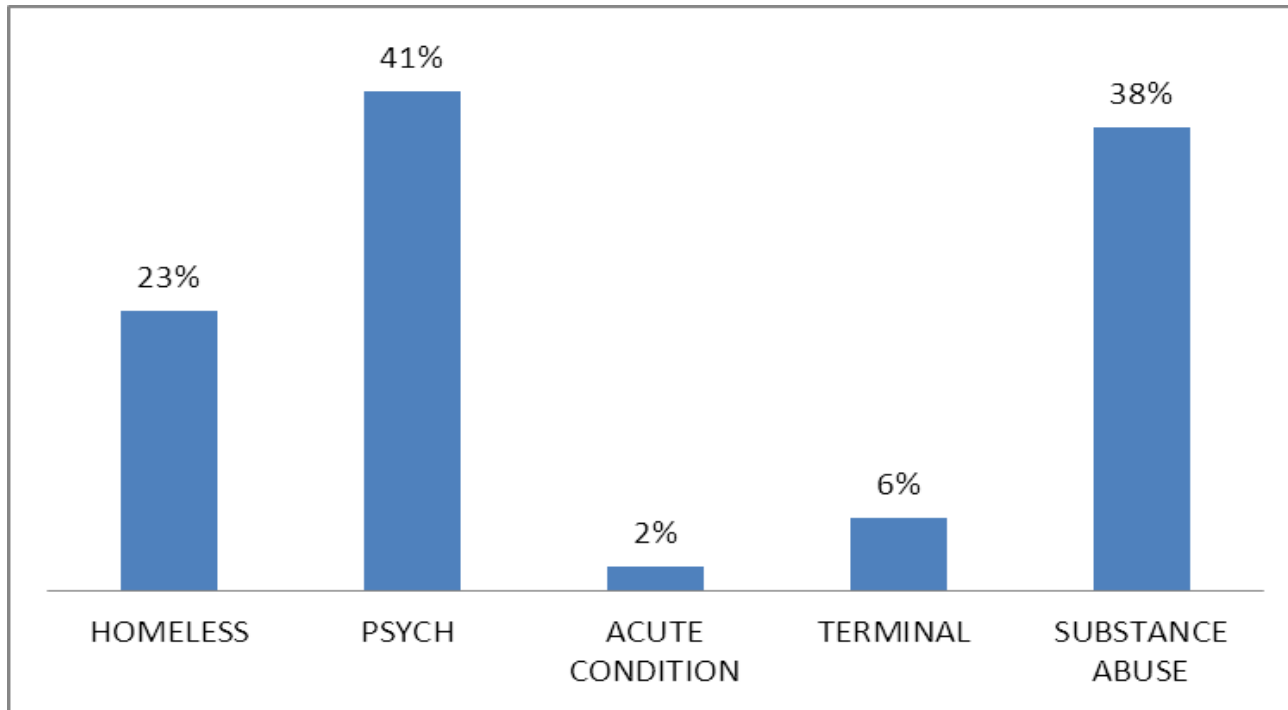
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- Grady operates 911 for the city of Atlanta
- Grady Hospital is the largest public hospital in Georgia
- Emergency room diversion team – evaluates approximately 800 patients per month.  
Typically diverts 60% to a more appropriate level of care.
- Prior to our joint project, only option was to send an ambulance to callers and transport to the ER
- Pilot in 2012 started with 911 transferring appropriate calls to GCAL
- Next Phase involved BHL Clinician riding with EMS
- Made it a permanent team in 2013
- Now doing home visits between calls for frequent 911

Callers



# Top 88 Grady EMS Frequent 911 callers 2012





# On the Scene

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**Paramedic** evaluates the individual for any medical conditions.

The **Mental Health Professional** then evaluates the individual in need under their licensure and expertise. (Mobile Crisis Response Services (MCRS) from BHL)

- Interventions include de-escalation, crisis evaluation, and appropriate service linkage.
- Linkages may include appointments, referral to community services, or hospitalization as a last resort. Goals include an overall decrease in the number of hospitalizations and presentations to emergency departments.
- 60-80% of individuals are diverted from ED and hospitalization.
- Of those hospitalized, many are referred directly to mental health facilities and bypass the ER.

# Benefits of Co-response

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- Frequent EMS training on de-escalation techniques needed
- Send the MH SUV rather than ambulance
- MH Paramedics in a relaxed dress (golf shirts)
- Transition law enforcement into a supportive role instead of primary role
- Removing onscene time constraints of a typical ambulance
- Continuity of care if transport required
- **Team encourages Law Enforcement Officer to remove criminal charges**

## Benefits of Having a Behavioral Health Professional Co-responding

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Evaluate individual's surroundings and engage individual and family for future home visit.

Interact with caregiver to provide GCAL resources

Execute order for involuntary evaluation if necessary

At ED, EMS and MH transfer of care.

If physical and/or chemical restraint are required, a MH patient advocate is on scene.



# Results

Does this approach make a difference?

	2015	2016
<b>Total Calls Handled by the Mental Health/EMS Team</b>	<b>1575</b>	<b>1405</b>
<b>Total diverted from the ER</b>	<b>1083 (69%)</b>	<b>1099 (78%)</b>
<b>Percentage Handled by the SUV team with no ambulance utilization</b>	<b>91%</b>	<b>91%</b>
<b>Reduction in Haldol Utilization in the Field</b>	<b>50%</b>	

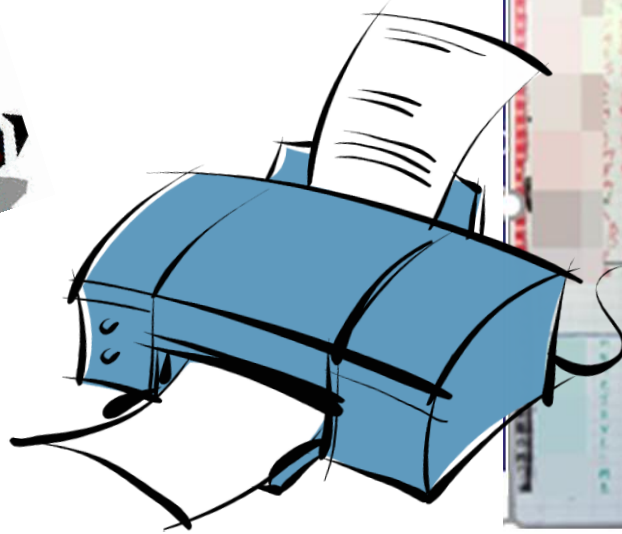


# The Bed Board

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# What we used to have...

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#	BHCC Name	Referral Type	Referral Source	Individuals Name	Age	Gender	Status	Status Detail	PDF Triage Stat	Transit Time	Assess Time	Chief Complaint	Disability	Legal Status	Payer Source	Crisis County
Ed	DeKalb BHCC DeKalb CSB	GCAL	Southern Regional Medical Center	[REDACTED]	22	Male	Awaiting Documentation	Not Applicable	Available			MH	MH	1013	None (Self-Pay)	Clayton
Ed	Valdosta Area BHCC BHCC of South Georgia	GCAL	South Georgia Medical Center	[REDACTED]	36	Male	Under Review	Not Applicable	Available			AD	AD	2013	None (Self-Pay)	Loveland
Ed	DeKalb BHCC DeKalb CSB	GCAL	N/A	[REDACTED]	28	Male			Available			AD	MH/AD	Voluntary	None (Self-Pay)	Clayton
Ed	DeKalb Regional Crisis Center DeKalb CSB	BHCC Walk In	WALK IN	[REDACTED]	33	Male	Arrived	Not Applicable	Unavailable	00:00	07:13	AD	AD	Voluntary	None (Self-Pay)	DeKalb
Ed		BHCC Walk In	self	[REDACTED]	60	Male	Divert to CSU (to be used after Int has arrived @ BHCC)	Not Applicable	Unavailable	00:03	01:37	MH	MH		Medical (Non-ONG)	Dougherty
Ed	Albany Area CSU Albany Area Community Service Board	BHCC Walk In	self BHCC Albany Area CSU Albany Area Community Service Board	[REDACTED]	35	Female	Divert to CSU (to be used after Int has arrived @ BHCC)	Not Applicable	Available	03:50	01:13	MH	MH	1013	None (Self-Pay)	Dougherty
Ed	DeKalb Regional Crisis Center DeKalb CSB	BHCC Walk In	WALK IN	[REDACTED]	52	Female	Arrived	Not Applicable	Unavailable	00:00	05:05	AD	AD	Voluntary	None (Self-Pay)	DeKalb
Ed	The Bradley Center Crisis Stabilization Unit St. Francis Hospital	BHCC Walk In	BHCC Walk In	[REDACTED]	23	Female	Arrived	Not Applicable	Unavailable	00:00	04:46	MH	MH	Voluntary	None (Self-Pay)	Muscogee
Ed	DeKalb Regional Crisis Center DeKalb CSB	BHCC Walk In	WALK IN	[REDACTED]	62	Male	Arrived	Not Applicable	Unavailable	00:00	03:30	AD	AD	Voluntary	None (Self-Pay)	DeKalb
Ed	Cobb/Douglas Crisis Stabilization Program Cobb/Douglas	BHCC Walk In	ACT	[REDACTED]	42	Male	Under Review	Not Applicable	Unavailable			MH	MH	Voluntary	None (Self-Pay)	Cobb

Menu | Pending SCR Status | 7/28/2017 | 8/28/2017 | All Regions | View Notes | Export to XLS | Export to Xlsx | Export to CSV | Export to PDF | Download RTR | Clear Sorting | Collapse All | Expand All | 25 | 10 | tbtake@hrcorp.com

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#	Wait Time	Ref Location Type	Individuals Name	Age	Gender	Status	Status Detail	PDF Triage Stat	Type of MTA	Facility Name	Referral Source	Contracted Region	Chief Complaint	Disability	Payer Source	
Ed	05:04	Hospital ED	[REDACTED]	57	Male	Under Review	Awaiting Documentation	Available	SCR	62	Universal Health Services SCI received hospital RI	Medical Staff (Emergency Room) Floyd Medical Center	I	MH	MH/AD	None (Self-Pay)

10 | tbtake@hrcorp.com Administration Login Session ID: 30123384\_QRC\_2235

And we now have Electronic referrals...

Menu | Pending Referral Status | 7/28/2017 | 8/28/2017 | Region 1 Adult | View Notes | Export to XLS | Export to Xlsx | Export to CSV | Export to PDF | Download RTR and Attachments | Clear Sorting | Collapse All | Expand All | 25 | 10 | tbtake@hrcorp.com

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#	Wait Time	Ref Location Type	Cobb/Douglas Crisis Stabilization Program Reviewed	RTU / Residential Treatment Unit Reviewed	Treatment Services Reviewed	Avita CSU Reviewed	Rome Adult CSU Reviewed	Individuals Name	Age	Gender	Status	Status Detail	Denial Explanation	Referral Docs Available	Type of Facility	MTA	Referral Source
Ed	51:02	Hospital ED						[REDACTED]	58	Male					RTR	CSU	406 Medical Staff (Emergency Room) Weststar Kennestone Hospital
Ed	48:40	Community						[REDACTED]	27	Female					RTR	CSU	405 Self N/A
Ed	20:00	Hospital Floor / ICU						[REDACTED]	54	Male	Under Review	Continued Review			RTR	CSU	1309 Medical Staff (Hospital Floor) Northside Hospital
Ed	13:25	Hospital ED						[REDACTED]	60	Female	Under Review	Initial Referral			RTR	CSU	366 Medical Staff (Emergency Room) Kennestone Hospital
Ed	03:35	Hospital ED						[REDACTED]	54	Male					RTR	CSU	6 Medical Staff (Emergency Room) Cornestone Medical Center
Ed	02:39	Hospital ED						[REDACTED]	29	Male	Under Review	Awaiting Documentation			RTR	CSU	159 Medical Staff (Emergency Room) Northside Hospital Forsyth
Ed	01:56	Hospital ED						[REDACTED]	29	Male					RTR	CSU	116 Medical Staff (Emergency Room) Northeast Georgia Medical Center Braselton
Ed	01:41	Hospital ED						[REDACTED]	21	Female					RTR	CSU	101 Medical Staff (Emergency Room) Northeast Georgia Medical Center Braselton
Ed	00:43	Hospital Floor / ICU						[REDACTED]	57	Male					RTR	CSU	43 Medical Staff (Hospital Floor) Cartersville Medical Center
Ed	00:27	Hospital ED						[REDACTED]	62	Male					RTR	CSU	27 Medical Staff (Emergency Room) Richmond Regional Medical Center

Menu | Individuals Editor | SH Pending Status | 7/28/2017 | 8/28/2017 | All Groups | View Comments | SH Transfer Required Data Updated by CTR/SCR | Export to XLS | Export to Xlsx | Export to CSV | Export to PDF | Download RTR | Download

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#	SH Name	Referral Type	Referral Source	Individuals Name	Age	Gender	Status	Status Detail	PDF Triage Stat	Transit Time	Assess Time	Chief Complaint	Disability	Legal Status	Payer Source	
Ed	Georgia Regional Hospital at Spalding GA Cobb/DCO State Hospital	GCAL	Coffee	[REDACTED]	31	Male	Confirm Contact with Facility and waiting for transport time	Not Applicable	Available				MH	MH	Voluntary	Medical (Non-ONG)
Ed	West Central Georgia Regional Hospital RG GA DIBCOO State Hospital	GCAL	Upson	[REDACTED]	48	Male	Confirm Contact with Facility and waiting for transport time	Not Applicable	Available				MH	MH	1013	None (Self-Pay)
Ed	Georgia Regional Hospital at Savannah GA DIBCOO State Hospital	GCAL	Tattnall	[REDACTED]	54	Female	Confirm Contact with Facility and waiting for transport time	Not Applicable	Available				MH	MH	1013	Unknown
Ed	Georgia Region Hospital Atlanta RI GA DIBCOO State Hospital	GCAL	Tanner Medical Center/Villa Rica	[REDACTED]	45	Male	Arrived	Not Applicable	Available	05:45	04:33		MH	MH/AD	1013	None (Self-Pay)
Ed	Georgia Regional Hospital at Atlanta GA DIBCOO State Hospital	GCAL	Atlanta Medical Center	[REDACTED]	42	Female	Awaiting Documentation	Not Applicable	Available				MH	MH/AD	1013	None (Self-Pay)
Ed	Georgia Regional Hospital at Atlanta GA DIBCOO State Hospital	GCAL	Eastside Medical Center	[REDACTED]	51	Male	Awaiting Documentation	Not Applicable	Available				MH	MH	1013	None (Self-Pay)
Ed	East Central Regional Hospital GA DIBCOO State Hospital	GCAL	Southern Regional Medical Center	[REDACTED]	21	Male	Awaiting Documentation	Not Applicable	Available				MH	MH	1013	None (Self-Pay)
Ed	Georgia Regional Hospital at Atlanta GA DIBCOO State Hospital	GCAL	Newton Medical Center	[REDACTED]	43	Female	Awaiting Documentation	Not Applicable	Available				MH	MH/AD	Voluntary	None (Self-Pay)
Ed	Georgia Regional Hospital at Savannah GA DIBCOO State Hospital	GCAL	Fairview Park Hospital	[REDACTED]	64	Female	Confirm Contact with Facility and waiting for transport time	Not Applicable	Available				MH	MH/AD	1013	None (Self-Pay)
Ed	Georgia Regional Hospital at Atlanta GA DIBCOO State Hospital	GCAL	Southern Regional Medical Center	[REDACTED]	22	Male	Confirm Contact with Facility and waiting for transport time	Not Applicable	Available				MH	MH	1013	None (Self-Pay)



## Current Capabilities

These electronic systems, developed in collaboration with DBHDD, provide a real-time picture of state-funded crisis beds. Real-time data drives time-sensitive decisions. Trending allows methodical study of patterns and drives long-term system improvements.



GCAL and DBHDD partners can easily access information about who is waiting for a bed, how long they have been waiting and how many beds are available 24/7

Transparency makes a difference. We have seen a clear increase in the number of referrals we make, and overall it does take less time for an acceptance to a CSU. While not perfect, there is robust data on wait times, referral patterns, and daily reports.



## Did the Electronic Process Make a Difference?

<b>VOLUME/TIME</b>	<b>FY2013</b>	<b>FY 2015</b>
<i>Number of manual referrals</i>	1,898	589
Average time for each response	12:27	11:32
Total time to final acceptance	16:48	20:04
<b>Electronic Referrals</b>		
<i>Number of electronic referrals</i>	5,381	6,314
Average time for each response	4:29	2:39
Total time to final acceptance	9:50	7:01

# Stories of Hope



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## Real Success Stories: *Supporting Recovery*

"Julie"<sup>1</sup>

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12-year-old Julie sat home alone and considered the weight of the depression she had been struggling with and the anxiety she felt talking to anyone about it. She considered ending her life by using her father's rifle. Perhaps that would be easier.

Instead, Julie called a hotline she found online and spoke with a clinician who provided warm support. BHL staff, Emeka, stayed on the line over an hour until the parents could be contacted and return. The mother was not aware her daughter was depressed and appreciated the collaborative approach. Julie engaged in treatment services and was given an urgent appointment for the next day.

Lives Saved!



## Real Success Stories: *Supporting Recovery*

“Melanie and Joe”<sup>1</sup>

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15-year-old Melanie emailed our corporate website looking for help and received a message to call GCAL if she needed immediate help. When talking to the Clinician, it became clear that she and her 17-year-old boyfriend Joe had made a suicide pact.

The Clinician was able to keep her on the phone while a co-worker determined what school she was attending in East Central Georgia and immediately notified the school counselor who was able to get both Melanie and her boyfriend to the counseling office and notify their parents. The GCAL Clinician stayed involved in the situation until both teenagers received face to face crisis care.

## Active Rescue is Last Resort



John- a 25 year old student called stating that he just found out that he would not be able to return to school the following semester. He was feeling hopeless and was in the midst of a serious suicide attempt. Mary stayed on the phone with him for two hours while staff assisted her in finding his location. EMS arrived just in time.

Help is available 24 hours a day, 7 days a week. This free, confidential hotline provides access to counseling and other services for preventing a crisis or getting through a crisis. Trained and caring professionals will help connect you to services in your area. They can even help you schedule appointments.

## BEFORE IT'S A CRISIS...

Call the Georgia Crisis & Access Line at 1-800-715-4225 if a child or teenager you care about has a developmental disability, mental health, drug, or alcohol problem. Children and teenagers can call the hotline, too.

A crisis has no schedule. Wherever you live in Georgia, help is available 24/7 for problems with developmental disabilities, mental health, drugs or alcohol. Call the Georgia Crisis & Access Line at 1-800-715-4225.





## Contact Information

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