

# Behavioral Health Crisis Center of East Idaho 2016 Annual Report

This has been a second year of growth for the crisis center. Our total client episodes have increased over 2015 numbers, and it is expected that there will continue to be a continuing but more gradual increase in client numbers over time.

During the past two years, the crisis center has become a vital part of the system of care for behavioral health in our region. The crisis center serves as a triage system and hub for community referrals where people can find help for their needs and be referred into appropriate care for their situation.

Every step forward leaves them better able to function and either maintain or work toward self-sufficiency. Clients are involved in every step of addressing their own needs, thereby teaching them a valuable life skill and building their confidence that they can help themselves.

Our main focus moving forward will be to continue to explore opportunities for community support from our area partners and also for available funding opportunities. This service has proven to be a game changer for so many people, and our partners recognize that. Translating that value into financial support will be the challenge because of always fluctuating economic conditions and available funding opportunities.

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## **BHCC Advisory Board Members**

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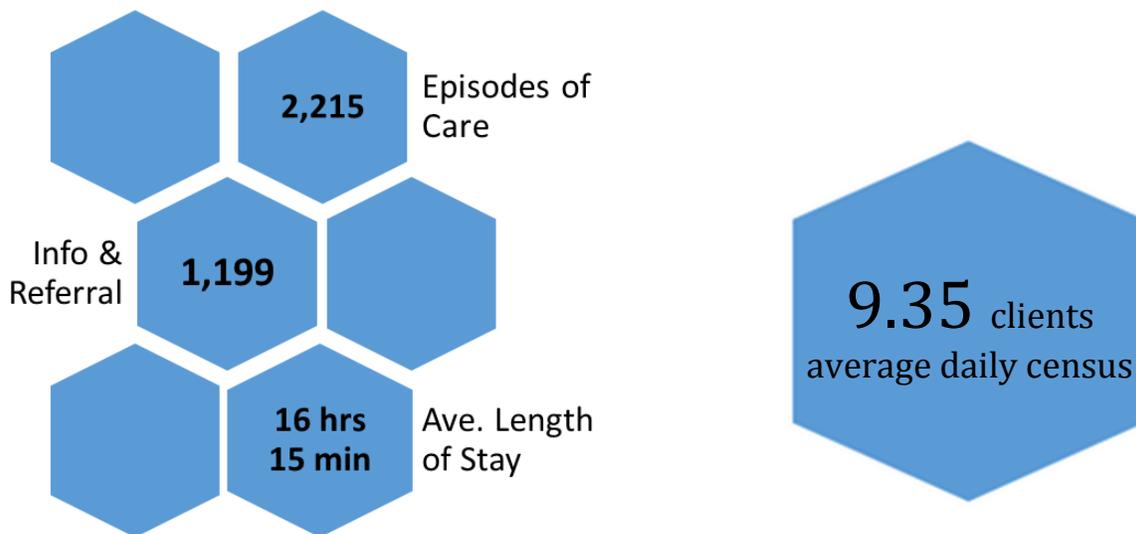
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Our services save money in the system through many indirect avenues. Community partners work with us to help people access services that will enable our client to stabilize and live more productive lives and also to help people avoid the systems that cost our state money. That financial prevention downstream is not always easy to quantify with a specific dollar value, such as the cost of keeping people out of legal trouble and saving court costs, probation officer caseloads, and avoided jail or prison stays.

The past two years has also brought more support and buy-in from community partners. This year the crisis center was granted \$6,000 by the City of Idaho Falls to support client needs. There has been a reduction in cost of the security contract vehicle through which the Bonneville County Sherriff's Office continues to provide the 24-hour security required by Idaho Code.

One of our fundraising challenges is the depth of support that will be available through fundraising in order to achieve 50% sustainability. It is improbable that half of our budget will be supplemented by community donations alone. Our local United Way agency reaches an annual goal of approximately \$500,000, and that amount is divided among twenty local agencies.

It will be a challenge to meet a 50% funding level when programming costs are approximately 80% of our initial funding level. It is not possible to reduce those costs as the number of clients is increasing.

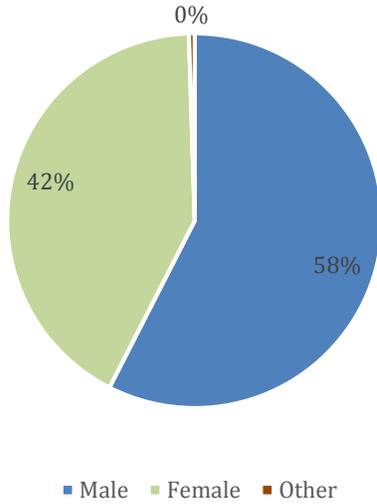


**Counties Served:**

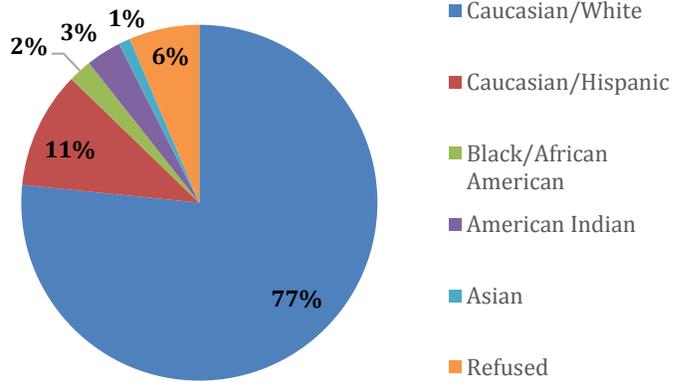
The crisis center served clients from 20 Idaho counties during 2016, as well as a few clients who were from out of state. The counties with the largest percentage of clients are Bonneville (31%), Bingham (5%), Bannock (5%), and Jefferson (3%).

## Client Demographics

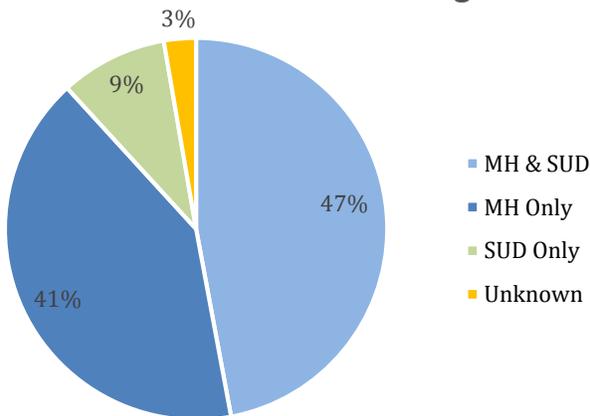
### Gender



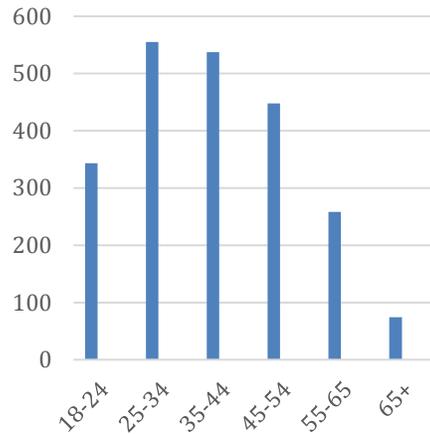
### Ethnicity



### Diagnosis



### Age



31% of our clients are between the ages of 30 – 40 years old

## Hospitals and Health Care Referrals

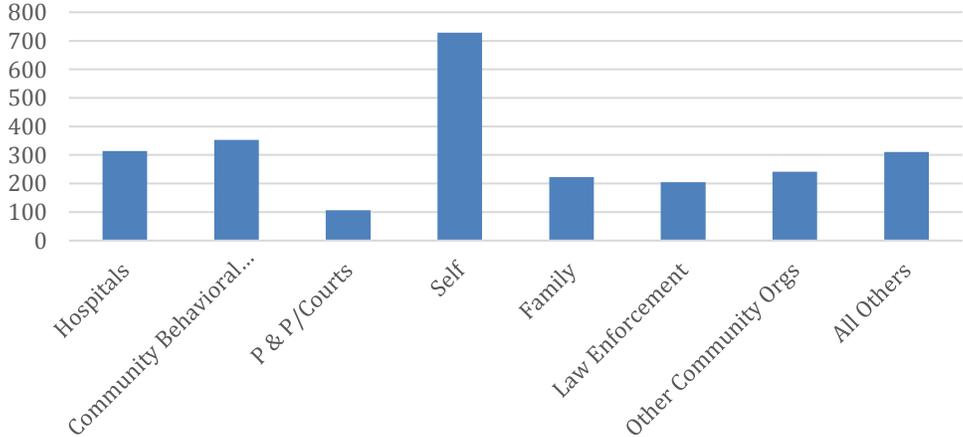
The Behavioral Health Crisis Center provided 3,414 episodes of care during 2016 to people from 20 Idaho counties. The referral numbers from the behavioral health system to the crisis center are as follows:

- ✓ 314 referrals from hospitals
- ✓ 353 referrals from community behavioral health agencies

There continues to be a strong referral base from community behavioral health providers. These agencies are able to utilize the crisis center for their clients’ needs for a brief crisis intervention to help stay on track and avoid hospitalizations.

The number of referrals from hospitals has increased 38% over the prior year. This shows continued buy-in from our local hospitals. Our community is able to use the crisis center as a vital component of the system of care and community partners are willing and eager to ensure that people are sent to the correct level of care, thus saving money in unnecessary or inappropriate emergency room usage. At an average of \$2,000 per emergency room visit, we could estimate a \$628,000 savings from averted medical visits. Those visits reduce the amount that Idaho Medicaid is spending on visits for visits to emergency rooms that do not require medical attention.

**Referrals In**



Every client who comes to the crisis center receives an individual assessment by a case manager unless the client refuses. The assessment may be followed up with a safety plan, referrals to community providers or services, or help with skills to prevent/avert future crises or all of these things.

We have a robust list of community resources to refer clients. Our weakness in eastern Idaho, as well as the rest of Idaho, is the number of people who are homeless or are on the verge of homelessness. Nearly half of our clients are in this situation and have many needs to be addressed in order for them to achieve stability. Crisis centers serve people who have a very high level of need. When we see that clients access the crisis center more than once, that is not considered a failure. This is a hopeful outcome as it indicates their continued desire to seek help and to do it appropriately.

## Law enforcement

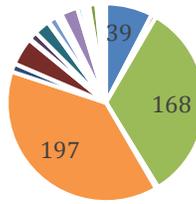
The number of referrals from probation officers, courts and legal counsel continues to increase. The crisis center plays a valuable role in helping people to stay clean and sober and continue to make life changes and avoid recidivism. In 2016, there were 106 referrals from probation/parole, courts or legal counsel. Avoiding relapse and helping people make life changes will prevent costs downstream in public systems and helps people obtain a more stable life.

Bonneville County added a computer system for the jail in the past year that will allow us to have better data going forward as to the number of people with behavioral health issues who are in jail. Officers do not arrest people because they have a behavioral health issue, but sometimes those issues are a factor in committing a crime. We will improve tracking whether we are able to affect that system as better data becomes available.

Our reply forms from law enforcement bringing people to the crisis center shows that there were 45 people who would have been taken to the emergency room and 3 people who would have been taken to jail if the crisis center were not available.

Law enforcement referrals are holding steady. There were 259 referrals from law enforcement agencies in 2015 and 253 law enforcement agency referrals in 2016.

### 512 Law Enforcement referrals since opening



- Bingham County
- Blackfoot Police
- Bonneville County
- Fort Hall Police
- Franklin County
- Idaho Falls Police
- Idaho State Police
- Jefferson County
- Lemhi County
- Madison County
- Other
- Preston Police
- Rexburg Police
- Rigby Police
- Shelley Police
- Bannock County
- Bear Lake County
- Fremont County
- Butte County
- Salmon Police
- Teton County
- Pocatello Police
- Clark County
- Custer County
- Caribou County

## Cost Savings

#### Hospitals

Using a multiplier of \$2,000 per emergency room diversion and the totals of referrals from hospitals (314) and other clients who report that they would have gone to the emergency room if not for the crisis center (16), the following numbers are estimated =  
 $314 + 16 = 330 \times \$2,000 = \$660,000$  cost savings in calendar year 2016

$228 \times \$2,000 = \$456,000$  cost savings in calendar year 2015

**Total cost savings to date for emergency room diversions = \$1,116,000**

#### Law Enforcement

Using 4 hours per encounter at an average wage of \$35 per hour gives a multiplier of \$140, the following numbers are estimated =

$253 \times \$140 = \$35,420$  cost savings in calendar year 2016

$259 \times \$140 = \$36,260$  cost savings in calendar year 2015

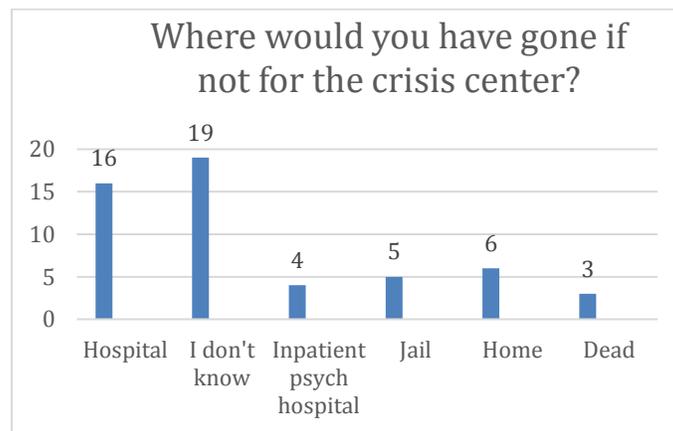
**Total cost savings to date for clients brought by law enforcement = \$71,680**

**Total Savings to Date = \$1,187,680**

## Feedback

We do two types of surveys from the crisis center. The first is a follow up survey with clients to find out how they are doing after coming to the crisis center. These follow-up phone calls help people to stay maintain stability and have that supportive connection once they have left the crisis center. We also verify that they were able to make connections with the referrals as identified in their plan. Further assistance is offered if the plan didn't work as intended or if they are unable to make those connections.

The second survey is an anonymous satisfaction survey for clients. Those results are below.



Clients repeatedly write on the anonymous survey form that the crisis center saved their life. While this seems extreme, so many people who come to the crisis center do not know how to access resources that would help them. To be able to come to a place that will help them find resources and give them hope and support is an invaluable service. We cannot underestimate the change that comes when people finally believe in themselves.

Our community partners see that we make a difference as well. The attached letter for the Department of Veterans Affairs is just one example of how we have become a valuable part of serving people in a way that affects life changes.

Overall, our crisis center has become a vital part of our community system of care. We began with the intention of preventing unnecessary emergency room visits or jail time. We have accomplished that, and our referrals from those two systems continue to be strong. As we move forward, referrals from probation officers, courts, and legal counsel is an area that will see more growth as more in those systems come to understand how crisis center use can prevent that person from going back into incarceration and save money when we can interrupt the cycle of recidivism.



GEORGE E. WAHLEN  
DEPARTMENT OF VETERANS AFFAIRS MEDICAL  
CENTER  
VA Salt Lake City Health Care System  
Pocatello CBOC  
444 Hospital Way Suite 801  
Pocatello, ID 83201  
208-232-6214 PHONE

December 7, 2016

Brenda Price  
Behavioral Health Community Crisis Center  
1650 N. Holmes Ave  
Idaho Falls, ID

Dear Ms. Price,

We are writing to express our appreciation for the services which the Behavioral Health Community Crisis Center has been able to provide for military Veterans in the Idaho Falls area over the last 2 years. The Center has provided support for Veterans that have proven to be quite beneficial. The Center staff have provided a range of services from assisting Veterans with getting connected with VA care, to helping Veterans who have chronic mental illness (CMI) with consistent, regular (at times daily) supportive contacts. There are Veterans who have historically had frequent psychiatric hospitalizations, who have been regularly accessing the support of the Center. The support provided by the Center staff has likely limited the number of necessary psychiatric hospitalizations for these people and increased their level of independence.

Thank you for the great work and dedication of the Behavioral Health Community Crisis Center staff!

Sincerely,

  
Jon Fox, PA-C  
Pocatello & Idaho Falls VA Clinic Manager

  
Barbara Chalmers Bartlett, Ph.D.  
Licensed Psychologist