

Wisconsin Legislative Council Special Committee  
Chapter 51 Emergency Detention Review  
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I want to thank the members of this Legislative Council Committee for the opportunity to share how the Crisis Resource Center (CRC) is an innovative solution to unnecessary emergency room and inpatient hospital visits; unnecessary involvement in the criminal justice system, and the prevention of emergency detention.

The inspiration for a Crisis Resource Center (CRC) model started over five years ago with a vision shared by mental health professions from nonprofit organizations, county government, foundations, the police department and the medical community to improve mental health treatment and crisis intervention in Milwaukee County. This vision was supported by numerous local and national foundations and the county who provided the seed money. Thus, the CRC opened its doors in December of 2008.

Today, the Crisis Resource Center (CRC) is a warm and welcoming experience for up to seven (7) adults experiencing a psychiatric crisis. It is staffed by mental health professionals, including peers specialists, nurses, and clinicians who can immediately assess the individual's crisis and start to develop a plan for stabilization.

The CRC provides comprehensive support services including mental health treatment, medication stabilization, psychiatry, peer support, psychosocial groups, and access and linkage to community providers and resources. We believe that the CRC model is the future of psychiatric crisis intervention,

and is the least restrictive and most appropriate level of service for individuals experiencing a psychiatric crisis.

The CRC is committed to being a solution to the growing number of emergency detentions in Milwaukee County. We currently work with the police, the Milwaukee County Behavioral Health Complex and the local emergency departments to divert individuals that do not present an imminent danger to themselves or others. We have many examples where an admission to the CRC resulted in a dropped emergency detention.

Since opening in late 2008, the demand for CRC services has increased 66%, with 80% of admissions being diversions from emergency departments, hospitals, and/or the criminal justice system. The effectiveness of services at the CRC is evidenced by positive outcomes shared by participants as they leave the CRC. We have a 99% satisfaction rating on exit surveys.

Milwaukee County needs to promote voluntary treatment and reduce the number of unnecessary detentions. The CRC is a model, which many individuals experiencing a psychiatric crisis are willing to access on a voluntary basis. The welcoming environment and immediate engagement by our staff is a drastic contrast to the individuals who experience emergency detention by being taken to Psychiatric Crisis Services in handcuffs, waiting for hours, locked in, and watched by security before someone speaks with them.

In order to be a viable solution for emergency detention, the CRC needs the best thinking from the State and Legislature. The grants that sustained the CRC during the start-up phase are ending in the next few months and sustainability is now a major focus.

A growing number of individuals served by the CRC are maintaining contact for ongoing support or assistance post discharge. In the month of September 2010, thirty-three (33) individuals who previously used the CRC on an overnight basis have reconnected with the CRC on a short-term basis (2-4 hours) to seek support for issues, and if the CRC had not been an option, these issues would have escalated to the need for crisis intervention, emergency department and potentially emergency detention.

During the past two years, grants, county funding and Medicaid/Medicare have allowed the CRC to offer services to all individuals. However, more than 40% of the individuals served this year are members of Medicaid Managed Care/HMOs. These organizations want to use the CRC, as a diversion from costly emergency department visits and inpatient hospitalization, however are unwilling to do so as the CRC level of care is not a covered service and they cannot claim the cost of the CRC in their encounter data, and therefore their long-term reimbursement.

We need your help to find a solution. We believe that the CRC is one of the most important resources to decrease unnecessary emergency detention. We believe that having CRC services available in other locations in the county is a viable, cost effective solution. This is why the State and County needs to shift the resources from traditional crisis and inpatient services to alternatives like the CRC, which has better outcomes and at a lower cost. The CRC is around \$400 per day and inpatient care is over \$1,000 per day. The CRC is able to offer post discharge planning and follow-up, which the Behavioral Health Department does not, which we feel, is essential in preventing recidivism.

In summary, we believe that the CRC model is an essential component in the mental health continuum of care. We have documented data that substantiates the reduction of unnecessary emergency department, inpatient hospitalization, criminal justice and emergency detention events. The

CRC is cost effective, non-stigmatizing, respectful, and preserves the dignity of individuals in psychiatric crisis.

Thank you.