

MRSS

Mobile Response &
Stabilization Services



Helping youth & families right where they are



Butler
Behavioral
Health

SAMHSA

Substance Abuse and Mental Health
Services Administration

Ohio

Department of Mental Health and
Addiction Services



RECOVERY BOARD
OF PREBLE COUNTY



Butler County
Mental Health & Addiction
Recovery Services Board

The Beginning....



24 Hour Crisis Response was available in the Region

However....

- Crisis workers were not trained specifically in family systems.
- In general, very few children and youth were served.
- Variability throughout the region in response and availability.
- Hospital screens provided rather than family system interventions.

Implementation of MRSS.....



Clinical Team began providing MRSS in December 2018.

- BBH is providing one consistent intervention across four-county region.
- After Hours, including evenings and weekends began February, 2019. Hours of operation are 8 am to 10 pm daily.
- Daytime Team has Program Manager, three Licensed Clinicians, two Skill Builders, two Parent Peer Support Specialists
- After Hours Team includes seven Licensed Clinicians scheduled on two calendars (Butler & Preble/Warren & Clinton)

How it works.....

Step 1

The first step is your call. You will talk with a trained staff person about what's happening, and they will take your contact information. They are available 24 hours a day, seven days a week.

Step 2

An MRSS staff person will reach out and arrange to meet. Within a short time, an MRSS staff person will be in touch with you by phone to make arrangements for responding to where you are. The MRSS Staff will arrive within 60 minutes or when convenient for your family.

Step 3

Upon arrival, the MRSS therapist will work with you and your family to help resolve the situation that led to the call. This may include a safety assessment and de-escalation strategies using family systems interventions. The therapist will stay as long as needed until everyone feels calm.

Step 4

Once the situation is calm, the therapist will offer up to 45 days of intensive support which could include home-based psychotherapy, skill building, peer support and referral to on-going community services and resources to help keep your family on the path to success.

Collaboration with Law Enforcement.....



We generally respond to the family without law enforcement.

We collaborate with law enforcement when....

- Safety concerns, such as DV, weapon in the home.
- Situation escalated to the point of needing police involvement.
- Law enforcement is already involved and they are asking for mental health intervention for youth and family.

Response.....



WE GO FOR O's.

The family defines the crisis. We don't screen out, we screen in.

- 94% Referrals requesting immediate response were seen within 60 minutes.
- Outreach was made to 100% referrals. Served 76% of all referrals.
- MRSS Clinical staff is trained in trauma-informed care as well as interventions for youth with ID/DD and ASD



Stress Impacts the Whole Family.....



Interventions seek to identify Family Patterns, not just the immediate crisis.

Identify the family's felt needs and put into place the supports needed for long-term success. This includes referrals to Wraparound/Care Coordination, Parent Peer Support, Mental Health, Substance Use, Community Support Groups

- 72% families received referrals; 46% of referred services had begun by the time of MRSS closing
- 64% families engage in ongoing stabilization services for up to 6 weeks
- 93% families were offered parent peer support, with 27% received while involved in MRSS

Community Stakeholders.....



Over 100 promotional meetings in the Four-County Region in the past eighteen months, include....

Local School Districts
Law Enforcement Agencies, including participation of
18 different Roll Calls
CIT Presentations in all four counties
Outpatient and School-Based Counseling Agencies
Kinship Navigator Support Meetings
Boys and Girls Clubs
Foster Family Advisory Board & Training Days

Alternatives for Violence
Children Services Team Meetings in all four counties
Wraparound and Care Coordination Team Meetings
Early Childhood Collaborative Meetings
Youth Café
Cincinnati Children's Hospital
School Liaison Team Meetings
Board of Developmental Disabilities Team Meetings

Marketing and Outreach.....



MRSS has cohesive marketing tools for the Four-County Region.

Our Regional Project Director led the way in partnering with community stakeholders and a marketing firm, Reverb, to create streamlined marketing and outreach materials.

- www.mobileresponse.org
- One brochure for the region, which includes all of the county hotline numbers.
- Social media posts to reach families directly.
- Tear Offs for Law Enforcement to easily refer youth and families to MRSS.

Working with Community Stakeholders.....



Examples of developing relationships within the systems of care.

Warren County Children Services

- Direct referrals when placement of a child in foster and kinship care or overdose in the presence of a youth. MOU was established with WCCS to further solidify this partnership.

Wraparound/Care Coordination

- MRSS included in safety planning for families. Teams are outline the process for referrals between Wraparound and MRSS for all four counties.

Local School Districts

- Lakota School District includes MRSS in their decision making tree for students and families in distress. East Elementary School in Eaton provides direct referrals for students exhibiting emotional and behavioral concerns in the classroom. Many school districts are utilizing MRSS as a support when a youth has de-escalated during the school day.

Listening to Caregiver Recipients.....



Listening sessions and phone interviews with 21 caregivers who had received services from April through October 2019

- These were conducted by the ENGAGE 2.0 Project Director, Heather Wells MSW (not employed by BBH).
- The caregivers who self-referred to the program were **overwhelming positive** about their experience with the MRSS team and grateful for the program.
- Caregiver comments about their own needs for support and levels of distress indicate that MRSS not **only meets the needs of children but also builds protective factors and resiliency in families**. It is a child abuse and neglect prevention strategy that can also address the impact of trauma.
- Most significant factors influencing caregiver satisfaction were related to the **characteristics and attitudes of MRSS staff** (empathy, respectfulness, etc.).
- In general, families who reported greater benefit from MRSS were **those who were not yet connected to many services**. Those who had greater system involvement, children with more complex diagnoses, or those caregivers who identified themselves as highly knowledgeable reported less benefit and/or satisfaction.

Success stories.....



Of the families who responded to the satisfaction survey....

- 94% families who responded to satisfaction survey somewhat or strongly agree that they would recommended MRSS to others.
- 93% reported they met the goals that they defined at the beginning of treatment.
- 97% said that they learned new skills to be successful.

Foster Parent: *“MRSS was very helpful during their involvement. The therapist and skill builder both gave us insight into what potentially anticipate in the future based on our foster child’s trauma.*”

School Resource Officer: *“...a parent of several students messaging a sub/other parent about life not being worth living. [We were] able to get that information out to the parent and she contacted them...they came right out and were able to get her some good help. So it appears to work pretty good.”*

Parent: *“I wouldn't be where I am right this second, had they not came in and kind of helped me through these hard times. And I know that anytime I need them, I can call. And that's very reassuring for me. “*

For more information.....



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