

Behavioral Health Services in Baltimore City

Public Health & Environment Committee March 12, 2025



- Overview of Behavioral Health System Baltimore (BHSB) and Public Behavioral Health System (PBHS)
- Behavioral Health Crisis Response System
- Provider Accountability
- Opportunities for Partnership

BEHAVIORAL HEALTH SYSTEM BALTIMORE

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that manages Baltimore City's behavioral health system — the system of care that addresses emotional health and well-being and provides services for substance use and mental health disorders.



Vision

We envision a city where people thrive in communities that promote and support behavioral health and wellness.



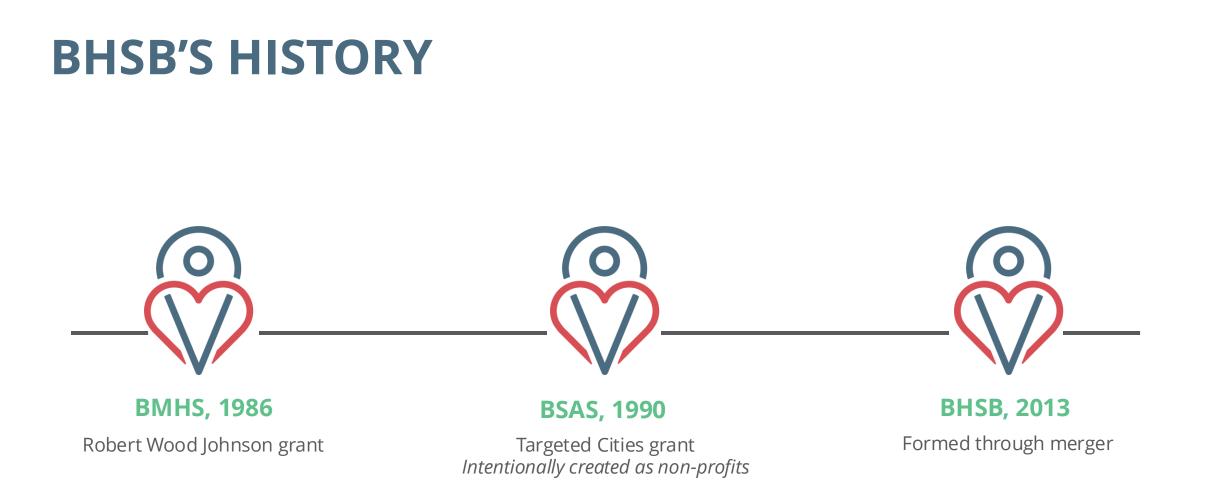
Mission

We work to develop, implement and align resources, programs and policies that support the behavioral health and wellness of individuals, families and communities.



Values

Integrity, Equity, Innovation, Collaboration, Quality.

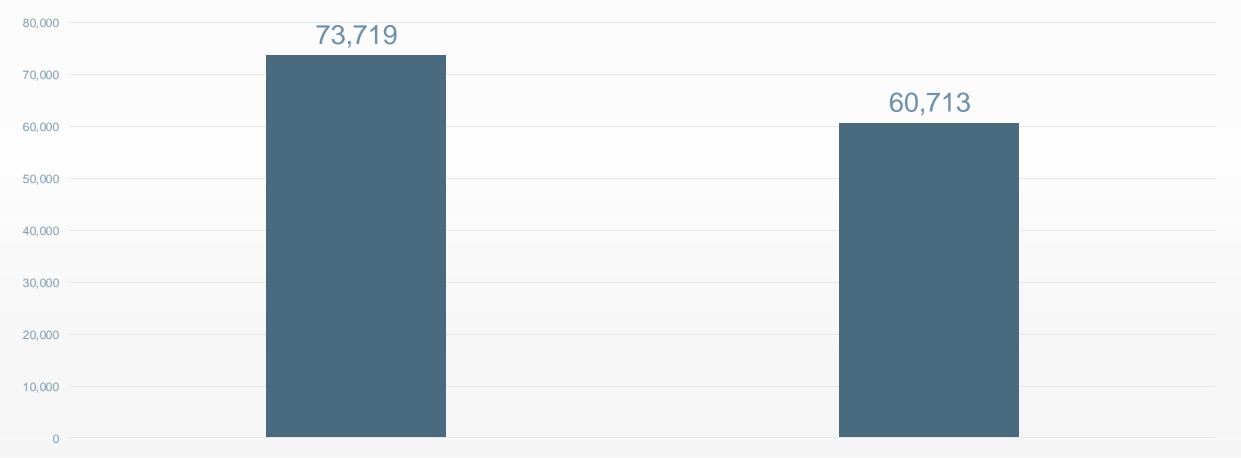




STATE SYSTEM CONTEXT



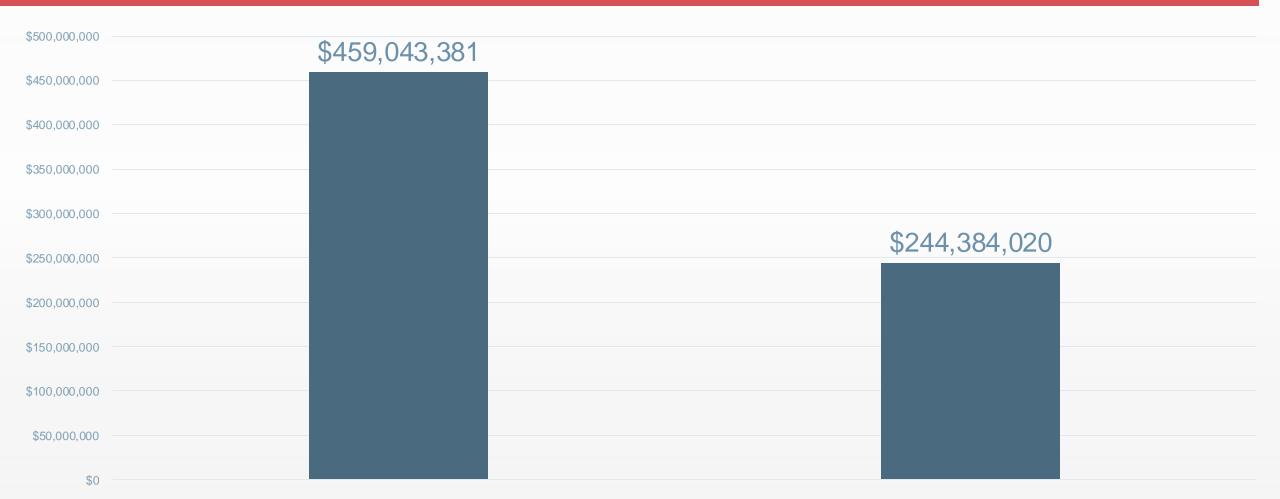
PUBLIC BEHAVIORAL HEALTH SYSTEM - PEOPLE SERVED – BALTIMORE CITY



Mental Health

Substance Use Disorder

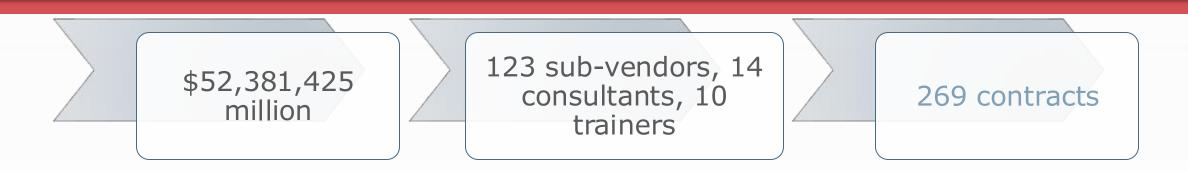
PUBLIC BEHAVIORAL HEALTH SYSTEM – EXPENDITURES – BALTIMORE CITY



Mental Health

Substance Use Disorder

FY 23 GRANT FUNDING



For services Medicaid doesn't pay for including but not limited to:

- Peer support services
- Recovery housing and other housing supports
- Crisis response
- Harm reduction
- Public outreach & education MH 1st aid, 988, etc.
- Specialty services language access, older adults, criminal justice involved, homeless outreach
- 17 competitive procurements in FY 23

Priorities

Advocate for policies and practices that strengthen the behavioral health system and improve access to care.

Policy priorities for 2024 and 2025:

- Address Maryland's behavioral health workforce shortage
- Expand the peer workforce and further integrate these professionals into the system of care
- Sustainably fund Maryland's 988 helpline and related behavioral health crisis response services
- Strengthen and expand quality behavioral health services for children, youth, and families
- Establish Overdose Prevention Sites and other effective harm reduction and recovery strategies to prevent fatal overdose
- Improve quality and accountability within the public behavioral health system



BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM

CRISIS SYSTEM REGIONAL INFRASTRUCTURE



The regional 988 Helpline answers over 2,500 incoming 988 calls a month and makes over 1,400 outbound calls (follow-ups and care coordination).



99 counselors and 5 dispatchers answering 988 calls.

40 of the counselors and 5 of the dispatchers have been hired within the past year.



Mobile response teams.

18 shifts per day. Available 24/7. Serves across the lifespan. Over 100 dispatches per month.



Open Access scheduling for same/next day outpatient appointments for lower-acuity callers. Served over 900 new consumers January-June 2023



Bed registry for community-based inpatient facilities.

CRISIS SYSTEM REGIONAL INFRASTRUCTURE



Community engagement and outreach

Support culture change to increase awareness and use of the 988 helpline as an alternative to calling 911 or using the ED. Community shaped marketing.



Sobering services

35 beds. Serves more than 350 people monthly



Regional CALL988 Campaign

Paid marketing to increase awareness and use of the 988 Helpline



Community Ambassadors Program

Trusted people in communities spreading the word about 988



Regional accountability structure BHSB oversees regional services and system accountability

National number, local response



Three organizations formally partnered to answer local calls and texts to the CALL 988 Helpline. Free Confidential Support









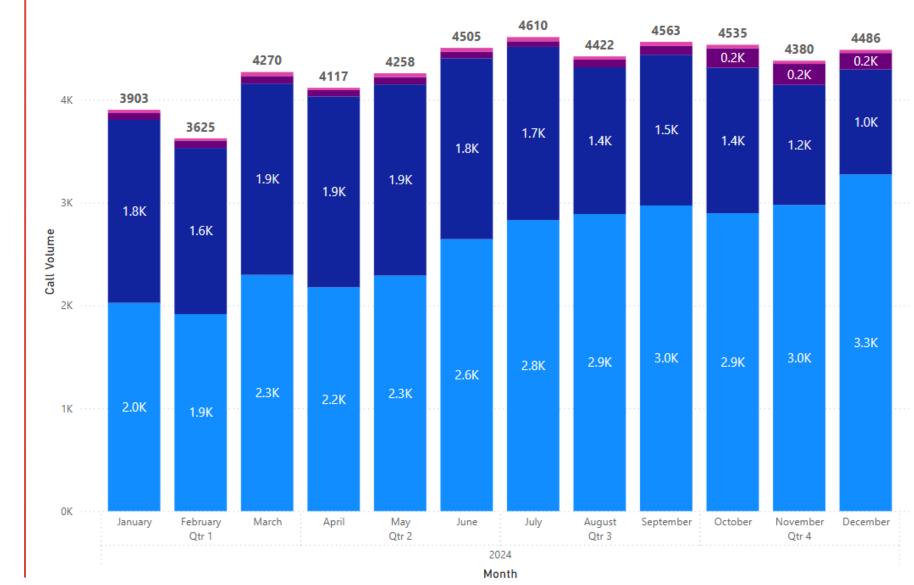
988 HELPLINE CRISIS DISPATCH MATRIX

The Triage Matrix is designed for 988 phone counselors and dispatchers, to help them determine which calls should be resolved in each of four ways:

Response Type	Description
Phone Support	Services provided by a crisis counselor over the phone including but not limited to: de-escalation, providing resources, safety planning, and providing support to loved ones.
Civilian Mobile Response	A two-person civilian team that responds to behavioral health crises in the community. These teams can include some combination of peers and behavioral health or medical clinicians.
Co-Response	A joint response of law enforcement or emergency medical services and a behavioral health clinician – a combined team (law enforcement and clinician ride together) or by law enforcement or emergency medical services and a civilian mobile response team arriving on scene together in separate vehicles.
Emergency Services	911 engagement for access to fire, emergency medical services, and law enforcement only in situations of medical emergency and immediate and imminent risk of harm to self or others.

Call Volume by Queue

CaseQueue 988 (regional) Here2Help (Baltimore City) MRT referrals from other local lines (regional) 911 Diversion (Baltimore City)



988 REGIONAL HELPLINE

CALL VOLUME ALL PHONE #S

JANUARY 2024 – DECEMBER 2024

Source = Behavioral Health Link

 988 georouting underway starting in September 2024 988 REGIONAL HELPLINE

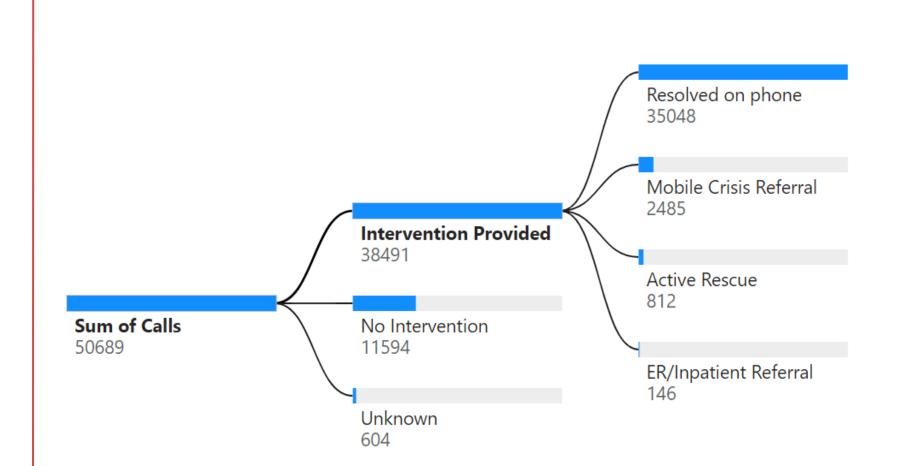
OUTCOMES OF CALLS

ALL PHONE #S

JANUARY 2024 – DECEMBER 2024

Source = Behavioral Health Link

 No Intervention = hang ups, silent calls, wrong #s, nuisance calls



MOBILE RESPONSE TEAM

COMPLETED VISITS

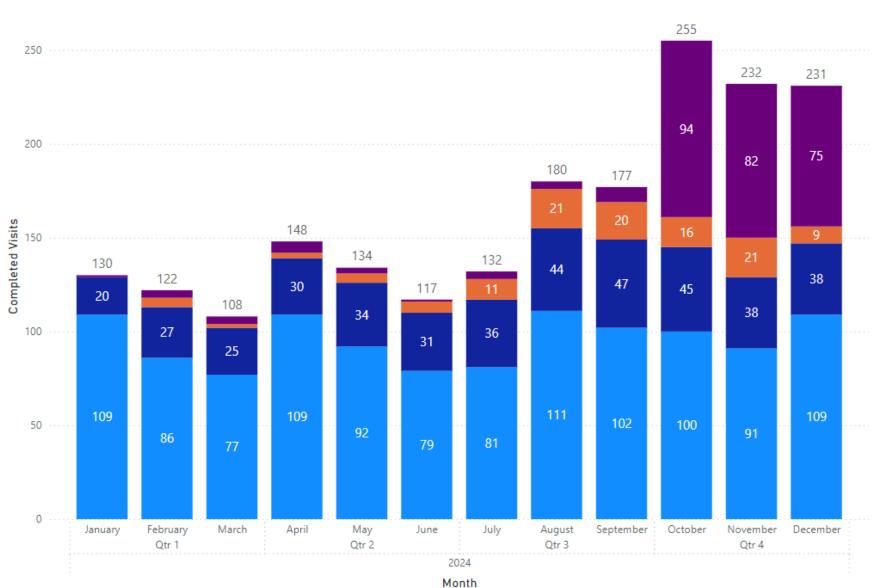
JANUARY 2024 – DECEMBER 2024

Source = Behavioral Health Link

- All completed visits in the region where services were provided by non-law enforcement mobile response teams dispatched through Behavioral Health Link
- Carroll County and Howard County teams started dispatching via BHL in July 2024 and Oct 2024, respectively

Completed Mobile Response Visits

Region • Baltimore City • Baltimore County • Carroll County • Howard County

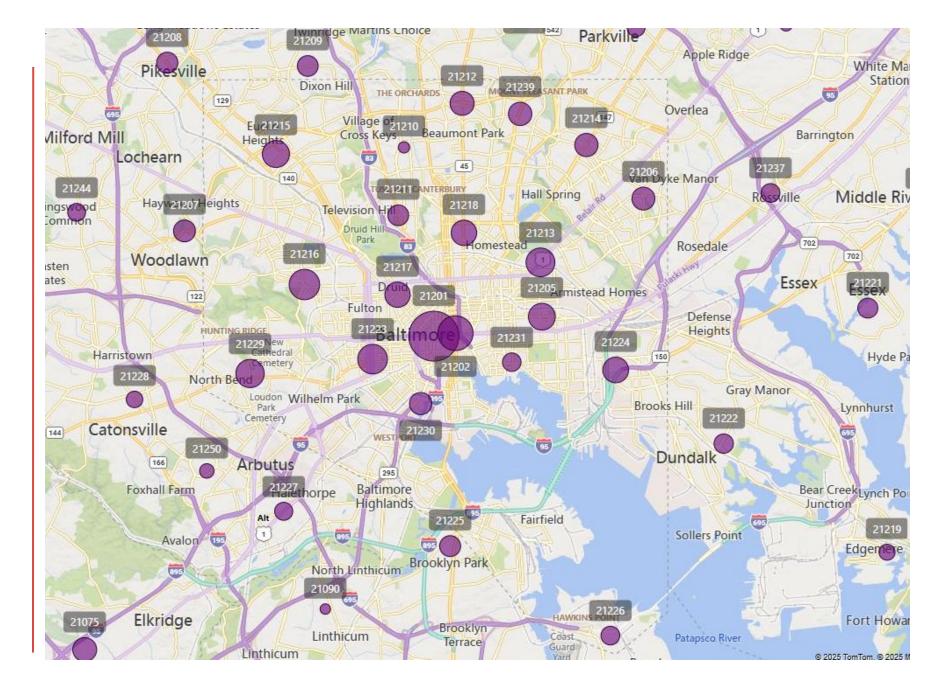


MOBILE RESPONSE TEAM -COMPLETED VISITS PER 100,000 BY ZIP CODE

JANUARY 2024 -DECEMBER 2024

Source = Behavioral Health Link, Maryland Census Data

- All completed visits in the region where services were provided by non-law enforcement mobile response teams dispatched through Behavioral Health Link
- 1,163 completed visits in Baltimore City
- 55% of mobile visits took place at individuals' homes
- Zip codes with the most visits per 100,000: 21201; 21202



MOBILE RESPONSE TEAM

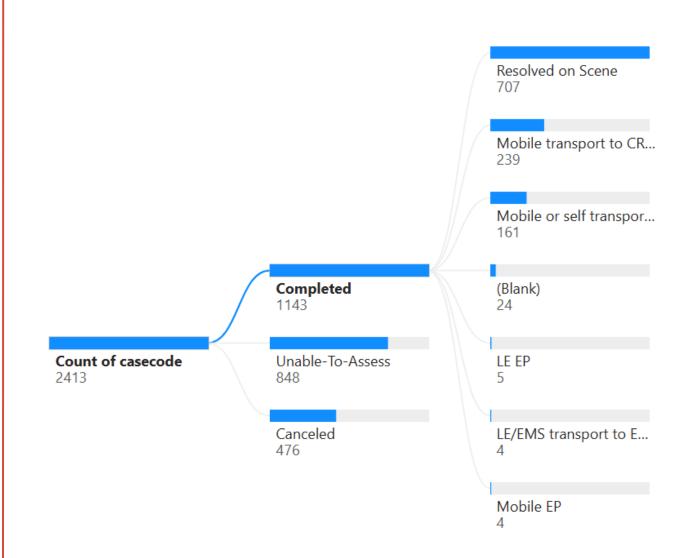
OUTCOME OF VISITS

BALTIMORE CITY

JANUARY 2024 – DECEMBER 2024

Source = Behavioral Health Link

- All completed visits in the region where services were provided by mobile response teams dispatched through Behavioral Health Link
- Began collecting data in December 2023
- 83% resolved without ED visit
- Data reflect multiple teams supported through diverse funding resources



CRISIS STABILIZATION CENTER

- Provides sobering services for people actively intoxicated
- Operates 24/7, accepts walkins, referrals from hospitals, EMS drop off
- Participants receive 30 days of case management post discharge



Admissions by Month

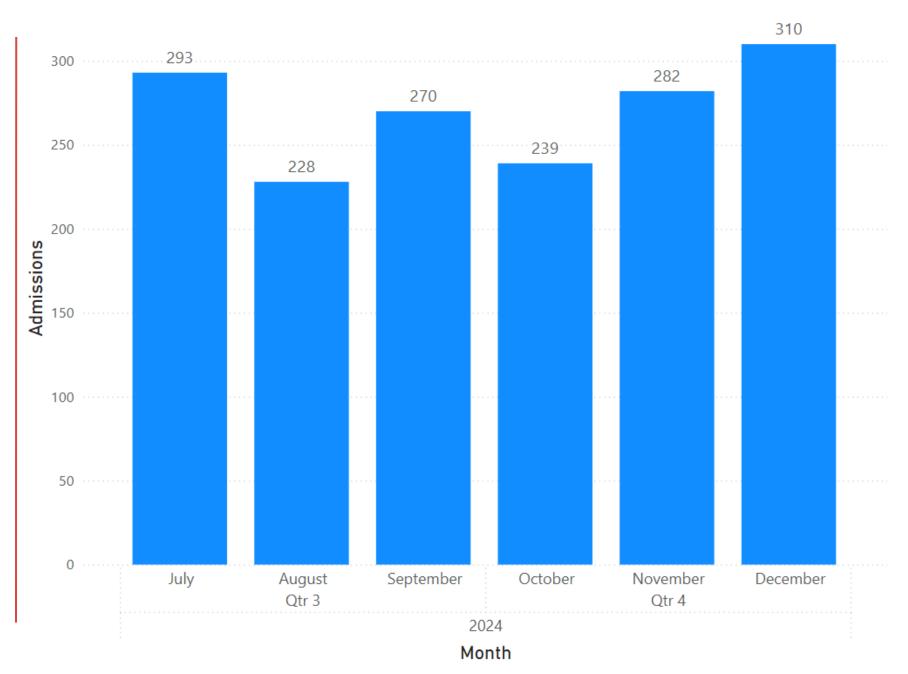
CRISIS STABILIZATION

TOTAL ADMISSION VOLUME

JULY 2024 – DECEMBER 2024

Source = Tuerk House EHR

- 1,622 total admissions:
 - 1,348 unduplicated consumers
 - 205 repeat consumers
- New data source starting July 2024



PROVIDER ACCOUNTABILITY

Provider Accountability

Monitoring for quality and outcomes BHSB provides **leadership**, **management**, **oversight**, and **operations functions** at the local level in collaboration with the BHA and the Medicaid Administrative Services Organization (ASO). Link: Manual for Managing the PBHS in Maryland

BHSB Accountability Functions:

- Conducting regular audits and site visits
- Approving and monitoring Corrective Action Plans, Performance Improvement Plans, and Program Improvement Plans
- <u>Complaints</u> protocols, resolutions, and tracking
- Investigation and Tracking of <u>Critical Incidents</u> suspected abuse/neglect, staff misconduct, suspected fraudulent practices, overdose, death of a participant, etc.

Provider Complaints



Q: Who can submit a complaint about a provider to BHSB?

A: Anyone can submit a complaint about a behavioral health/SUD provider or BHSB to the BHSB Investigations Team. Use the QR code to the left to access the complaint form and process, or visit: File a complaint about a provider or BHSB.

Q: How else can I submit a complaint about a provider to BHSB?

A: You may email: <u>complaints@bhsbaltimore.org</u>, or call 410-637-1900, option 5.

Q: What happens after I report an issue to BHSB?

A: BHSB's Investigations Team will follow up with the complainant within 2 business days to gather additional information.

The team will then conduct a thorough investigation of the complaint received. Complaints are typically resolved within 30 days if they do not require additional involvement from state agencies.

State Actions

The Behavioral Health Administration (BHA) implemented several actions BHA issued a moratorium on new licenses for the following programs:

- · Psychiatric Rehabilitation Programs
- Psychiatric Rehabilitation Programs, Health Home
- · Level 2.5 Partial Hospital Programs
- Level 2.1 Intensive Outpatient Treatment Programs

Moratorium was extended through June 30, 2025.

MDRN no longer approving authorizations for Recovery Housing—effective March 31, 2025

OPPORTUNITIES FOR PARTNERSHIP



COMMUNITY SAFETY DAY

April 26, 2025, 10am-2pm

ABC Park – 501 S. Catherine Street Baltimore, MD 21223

Bring unwanted medications and medical sharps for safe disposal and any documents you need securely shredded.



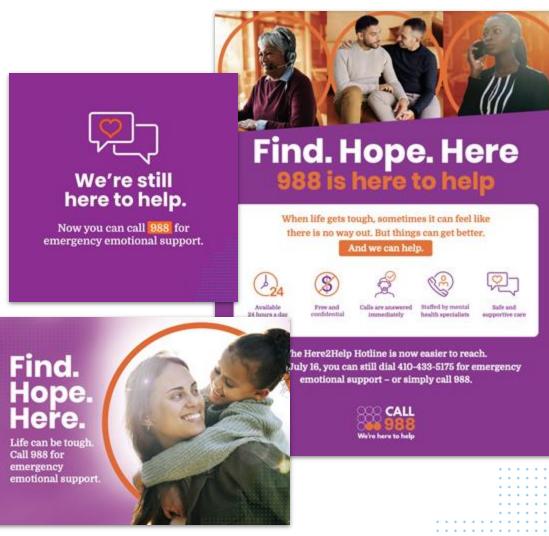
Share materials from the Partner Toolkit



Materials in the Partner Toolkit include:

- Flyers
- Fact Sheets
- Postcards
- Social media content

Visit <u>partners.988helpline.org</u> to access the Partner Toolkit.



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Find more information at bhsbaltimore.org Follow us at @bhsbltimore

