

Community Wellness Response Team (CWRT) Update

Staffing/Teams:

Staffing Shift Analysis – County CWRT		Staffing Shift Analysis – BACS CWRT		Total # Teams Across Crisis Programs	
# of Teams/Shift		# of Teams/Shift			
AM Shift (7:30am-3:30pm)	3	AM Shift (7:30am-3:30pm)	2	AM Shift (7:30am-3:30pm)	5
PM Shift (12:00pm-8:00pm)	2	PM Shift (12:00pm-8:00pm)	2	PM Shift (12:00pm-8:00pm)	4
NOC Shift (8:00pm-7:00am)	0	NOC Shift (8:00pm-7:00am)	2	NOC Shift (8:00pm-7:00am)	2
Total # Teams MTD:	5	Total # Teams MTD:	6	Total # Teams MTD:	11

Calls for Service:

988 Call Data		CWRT Call Data	
# Calls to 988	1,372	# of CWRT Calls from 988	80
# Calls referred to CWRT	75	# of CWRT Calls from the Hope Line	16
# Calls 988 resolved	1,293	Total # of CWRT Calls	96
# 988 – welfare checks	4	# Calls resolved telephonically	2
		# Calls further assessed for mobile response	94
		# Calls cancelled	37

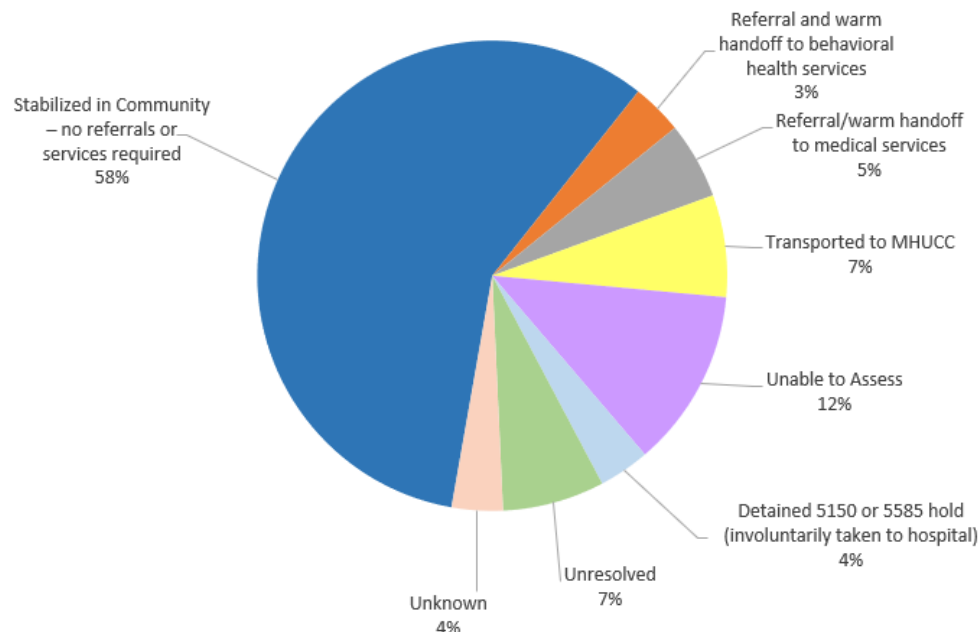
CWRT Responses & Dispositions:

Mobile Response Dispositions**			
Stabilized in Community – no referrals or services required	33	Refused CWRT Services	0
Referral and warm handoff to behavioral health services	2	Detained 5150 or 5585 hold (involuntarily taken to hospital)	2
Referral/warm handoff to medical services	3	Detained by Law Enforcement	0
Transported to MHUCC	4	Other	0
Transported to MHTC	0	Unresolved	4
Unable to Locate	0	Unknown	2
Unable to Assess	7	Total # Mobile Responses	57
Risk Assessment Elements***			
Other Mental Health	56	Self-reported possession of a firearm	0
Screened as harm to self	56	Substance Use	56
Screened as harm to others	56		

*Note: “Unresolved” is a disposition option the response team can select from a drop-down list in BHL. “Unknown” is the number of mobile responses without a disposition entry in BHL.

**Note: The sum of risk assessment elements exceeds the total number of mobile responses, because clients can have multiple risk elements.

Mobile Response Dispositions
N = 57



Success Stories:

An African American woman was feeling overwhelmed by past traumas and lacked familial or friend support. She reached out to the 988 Suicide & Crisis Lifeline while at work because she reported feeling lonely, unmotivated, and unseen. She sought in-person support from the CWRT team. CWRT arrived on site and utilized trauma informed interventions while listening and validating the client’s struggles and mental health battles. Together, the three discussed potential support groups, strategies to connect with current providers, and positive coping skills tailored to her interests and hobbies. Following the initial call, the CWRT team conducted a follow-up contact, discovering that this client had enrolled in a partial hospitalization program and was feeling more hopeful after our conversation.