







STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Aroostook	Contact Person	Month	Jan
Address	PO Box 1018	Lorraine Chamberlain	Fiscal Year	2012
	Caribou, ME 04736	Contact Phone Number		
		207-498-6431		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	5	Females	7				
	Adults	Males	71	Females	25				
Age Range	Children	<5y.o.	1	5-9	0	10-14	3	15-17	8
	Adults	18-21	5	22-35	23	36-60	56	61 & Older	12
Payment Source	Children	MaineCare	10	Private Ins.	2	Uninsured	0	Medicare	
	Adults	MaineCare	43	Private Ins.	17	Uninsured	36	Medicare	

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	163	1437
b. Total number of all INITIAL face to face contacts.	12	96
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	23	62

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	4	8
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	5	21
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	5	19
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2485
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		28
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		59

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
3	7	2	0

**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
9	1	2		

**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	1	5
b. Family/Relative/Other Residence		
c. Other Community Setting (Work, School, Police Dept., Public Place)	0	4
d. SNF, Nursing Home, Boarding Home		5
e. Residential Program (Congregate Community Residence, Apartment Program)	1	3
f. Homeless Shelter	0	0
g. Provider Office		0
h. Crisis Office	3	12
i. Emergency Department	7	29
j. Other Hospital Location	0	26
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)		12
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>12</b>	<b>96</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	2	3
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up		
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	5	58
d. Admission to Crisis Stabilization Unit	3	4
e. Inpatient Hospitalization-Medical	0	8
f. Voluntary Psychiatric Hospitalization	2	15
g. Involuntary Psychiatric Hospitalization		7
h. Admission to Detox Unit		1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>12</b>	<b>96</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Aroostook		Jan
		SFY2012
No.	Result	STANDARD
IV.35	<b>23%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	25.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	91%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	90%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Atlantic	Contact Person	Month	Jan
Address	1 Stackpole Rd	Theresa Brown	Fiscal Year	2012
	Machias	Contact Phone Number		
		207-255-0996		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	8	Females	8				
	Adults	Males	49	Females	43				
Age Range	Children	<5y.o.	0	5-9	0	10-14	8	15-17	8
	Adults	18-21	7	22-35	27	36-60	52	61 & Older	6
Payment Source	Children	MaineCare	9	Private Ins.	3	Uninsured	4	Medicare	
	Adults	MaineCare	55	Private Ins.	9	Uninsured	13	Medicare	15

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	723	4037
b. Total number of all INITIAL face to face contacts.	16	92
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	3	42

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	3	42
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	3	9
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	2	8
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		3226
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		46
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		45

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	5	1 to 2 hours	4	2 to 4 hours	7	More than 4 hours	
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	9	3 to 6 hours	4	6 to 8 hours	2	8 to 14 hours	1	More than 14 hours	
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)		10
b. Family/Relative/Other Residence		
c. Other Community Setting (Work, School, Police Dept., Public Place)	5	3
d. SNF, Nursing Home, Boarding Home		2
e. Residential Program (Congregate Community Residence, Apartment Program)		
f. Homeless Shelter		
g. Provider Office		
h. Crisis Office	2	9
i. Emergency Department	9	46
j. Other Hospital Location		15
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)		7
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>16</b>	<b>92</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up		14
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	3	28
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	6	22
d. Admission to Crisis Stabilization Unit	3	4
e. Inpatient Hospitalization-Medical		10
f. Voluntary Psychiatric Hospitalization	3	10
g. Involuntary Psychiatric Hospitalization	1	2
h. Admission to Detox Unit		2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>16</b>	<b>92</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Atlantic	Jan	SFY2012
No.	Result	STANDARD
IV.35	13%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	35.1 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	89%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Community Health & Counseling Services	Contact Person	Month	Jan
Address	PO Box 425 Bangor, ME 04402-0425	Tom Lynn	Fiscal Year	2012
		Contact Phone Number		
		947-0366 ext. 344		

I. Consumer Demographics (Unduplicated Counts - Face to Face)									
Gender	Children	Males	13	Females	16				
	Adults	Males	86	Females	72				
Age Range	Children	<5y.o.	1	5-9	1	10-14	13	15-17	12
	Adults	18-21	19	22-35	43	36-60	82	61 & Older	14
Payment Source	Children	MaineCare	24	Private Ins.	4	Uninsured	1	Medicare	0
	Adults	MaineCare	101	Private Ins.	54	Uninsured	3	Medicare	0

II. Summary of All Crisis Contacts										CHILDREN	ADULT
a. Total number of telephone contacts.										318	1366
b. Total number of all INITIAL face to face contacts.										29	158
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER										5	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.										9	52

III. Initial Crisis Contact Information										CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.										4	25
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).										17	54
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.										16	46
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.											4140
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.											102
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.											56

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :									
Less than 1 hour	24	1 to 2 hours	5	2 to 4 hours	0	More than 4 hours	0		

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:									
Less than 3 hours	28	3 to 6 hours	1	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0

IV. Site of Initial Face to Face Contacts										CHILDREN	ADULT
Number of face to face contacts seen in :											
a. Primary Residence (Home)										5	8
b. Family/Relative/Other Residence										2	2
c. Other Community Setting (Work, School, Police Dept., Public Place)										5	7
d. SNF, Nursing Home, Boarding Home										0	0
e. Residential Program (Congregate Community Residence, Apartment Program)										0	1
f. Homeless Shelter										0	0
g. Provider Office										0	1
h. Crisis Office										6	28
i. Emergency Department										10	102
j. Other Hospital Location										1	9
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)										0	0
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										29	158

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)										CHILDREN	ADULT
Number of face to face contacts that resulted in:											
a. Crisis stabilization with no referral for mental health/substance abuse follow-up										1	14
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up										1	17
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up										17	58
d. Admission to Crisis Stabilization Unit										7	25
e. Inpatient Hospitalization-Medical										1	21
f. Voluntary Psychiatric Hospitalization										2	16
g. Involuntary Psychiatric Hospitalization										0	4
h. Admission to Detox Unit										0	3
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										29	158

AMHI CONSENT DECREE FEEDBACK REPORT		
Community Health & Counseling Services		Jan SFY2012
No.	Result	STANDARD
IV.35	13%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	26.2 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	85%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Crisis & Counseling Centers	Contact Person	Month	Jan
Address	10 Caldwell Road	Nicole Auclair	Fiscal Year	2012
	Augusta, ME 04330	Contact Phone Number		
		207-626-3448 ext. 1155		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	29	Females	37				
	Adults	Males	157	Females	160				
Age Range	Children	<5y.o.	0	5-9	6	10-14	35	15-17	25
	Adults	18-21	27	22-35	108	36-60	161	61 & Older	21
Payment Source	Children	MaineCare	52	Private Ins.	12	Uninsured	2	Medicare	0
	Adults	MaineCare	226	Private Ins.	45	Uninsured	35	Medicare	11

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	506	3430
b. Total number of all INITIAL face to face contacts.	66	317
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	5	82

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	8
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	25	109
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	24	102
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		4048
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		212
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		103

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	1	1 to 2 hours	28	2 to 4 hours	36	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	64	3 to 6 hours	2	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	20	41
b. Family/Relative/Other Residence	0	4
c. Other Community Setting (Work, School, Police Dept., Public Place)	8	4
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	2	2
f. Homeless Shelter	0	4
g. Provider Office	0	7
h. Crisis Office	6	33
i. Emergency Department	30	213
j. Other Hospital Location	0	4
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	5
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>66</b>	<b>317</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	9
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	10	32
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	26	130
d. Admission to Crisis Stabilization Unit	19	49
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	11	82
g. Involuntary Psychiatric Hospitalization	0	14
h. Admission to Detox Unit	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>66</b>	<b>317</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Crisis & Counseling Centers	Jan	SFY2012
No.	Result	STANDARD
IV.35	<b>30%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	12.8 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	94%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Counseling Services Inc.	Contact Person	Month	Jan
Address	PO Box 1010	Jennifer Goodwin	Fiscal Year	2012
	Saco, ME 04072	Contact Phone Number		
		207-282-1500		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	38	Females	38				
	Adults	Males	78	Females	114				
Age Range	Children	<5y.o.	0	5-9	7	10-14	31	15-17	38
	Adults	18-21	28	22-35	51	36-60	96	61 & Older	17
Payment Source	Children	MaineCare	50	Private Ins.	24	Uninsured	2	Medicare	
	Adults	MaineCare	94	Private Ins.	43	Uninsured	51	Medicare	4

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	185	670
b. Total number of all INITIAL face to face contacts.	81	229
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	4	18

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	6	36
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	13	54
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	13	54
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		6358
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		137
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		58

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	0	1 to 2 hours	25	2 to 4 hours	35	More than 4 hours	21
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	48	3 to 6 hours	23	6 to 8 hours	3	8 to 14 hours	3	More than 14 hours	4
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	7
b. Family/Relative/Other Residence		
c. Other Community Setting (Work, School, Police Dept., Public Place)		
d. SNF, Nursing Home, Boarding Home		1
e. Residential Program (Congregate Community Residence, Apartment Program)		
f. Homeless Shelter		
g. Provider Office	4	2
h. Crisis Office	25	54
i. Emergency Department	49	165
j. Other Hospital Location		
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)		

NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts      Sec. IV Total      81      229

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	5
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	23	58
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	22	72
d. Admission to Crisis Stabilization Unit	10	11
e. Inpatient Hospitalization-Medical		4
f. Voluntary Psychiatric Hospitalization	24	53
g. Involuntary Psychiatric Hospitalization		21
h. Admission to Detox Unit	1	5

NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts      Sec. V Total      81      229

AMHI CONSENT DECREE FEEDBACK REPORT		
Counseling Services Inc.		Jan SFY2012
No.	Result	STANDARD
IV.35	<b>32%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	27.8 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>85%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Evergreen Behavioral Services	Contact Person	Month	Jan
Address	131 Franklin Health Commons Ste A	Crystal Harting	Fiscal Year	2012
	Farmington ME 04938	Contact Phone Number		
		207-779-2843		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	8	Females	5				
	Adults	Males	12	Females	18				
Age Range	Children	<5y.o.	0	5-9	0	10-14	5	15-17	8
	Adults	18-21	8	22-35	8	36-60	10	61 & Older	4
Payment Source	Children	MaineCare	8	Private Ins.	5	Uninsured	0	Medicare	0
	Adults	MaineCare	21	Private Ins.	7	Uninsured	2	Medicare	0

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	51	120
b. Total number of all INITIAL face to face contacts.	14	33
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	5	2

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	0
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	6	8
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	6	8
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		715
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		13
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		16

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
13	1	0	0

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
9	5	0	0	0

IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	0	1
b. Family/Relative/Other Residence	0	1
c. Other Community Setting (Work, School, Police Dept., Public Place)	0	2
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	0
h. Crisis Office	7	10
i. Emergency Department	7	14
j. Other Hospital Location	0	5
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>14</b>	<b>33</b>

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	5
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	3	8
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	6	12
d. Admission to Crisis Stabilization Unit	1	1
e. Inpatient Hospitalization-Medical	0	1
f. Voluntary Psychiatric Hospitalization	3	5
g. Involuntary Psychiatric Hospitalization	0	1
h. Admission to Detox Unit	0	
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>14</b>	<b>33</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Evergreen Behavioral Services		Jan SFY2012
No.	Result	STANDARD
IV.35	18%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	21.7 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	88%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

<<<<- Note: This cell should be no greater than IV.i.

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STATE OF MAINE Monthly Crisis Report

Agency	Mid-Coast Mental Health Center	Contact Person	Month	Jan
Address	12 Union St., Rockland, ME 04841	Patti Isnardi	Fiscal Year	2012
		Contact Phone Number		
		701-4476		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	9	Females	13				
	Adults	Males	56	Females	51				
Age Range	Children	<5y.o.	0	5-9	1	10-14	12	15-17	9
	Adults	18-21	18	22-35	39	36-60	43	61 & Older	7
Payment Source	Children	MaineCare	16	Private Ins.	6	Uninsured	0	Medicare	0
	Adults	MaineCare	47	Private Ins.	16	Uninsured	20	Medicare	24

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	41	208
b. Total number of all INITIAL face to face contacts.	22	118
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	3	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	2	16

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	5	7
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	9	16
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	9	16
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2794
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		84
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		29

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	21	1 to 2 hours	0	2 to 4 hours	0	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	12	3 to 6 hours	9	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	3
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	1
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	0
h. Crisis Office	5	17
i. Emergency Department	13	86
j. Other Hospital Location	0	8
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	3
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>22</b>	<b>118</b>
<b>Sec. IV Total</b>	<b>22</b>	<b>118</b>

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	2
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	0	4
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	11	42
d. Admission to Crisis Stabilization Unit	5	7
e. Inpatient Hospitalization-Medical	0	2
f. Voluntary Psychiatric Hospitalization	6	38
g. Involuntary Psychiatric Hospitalization	0	4
h. Admission to Detox Unit	0	19
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>22</b>	<b>118</b>
<b>Sec. V Total</b>	<b>22</b>	<b>118</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Mid-Coast Mental Health Center		Jan SFY2012
No.	Result	STANDARD
IV.35	<b>36%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	23.7 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	96%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Oxford County Mental Health	Contact Person	Month	Jan
Address	150 Congress Street	Karen Hodgkins	Fiscal Year	2012
	Rumford, Maine 04276	Contact Phone Number		
		207 364-3549		

I. Consumer Demographics (Unduplicated Counts - Face to Face)									
Gender	Children	Males	6	Females	7				
	Adults	Males	22	Females	30				
Age Range	Children	<5y.o.	0	5-9	3	10-14	3	15-17	7
	Adults	18-21	9	22-35	15	36-60	24	61 & Older	4
Payment Source	Children	MaineCare	8	Private Ins.	4	Uninsured	1	Medicare	0
	Adults	MaineCare	36	Private Ins.	10	Uninsured	5	Medicare	2

II. Summary of All Crisis Contacts										CHILDREN	ADULT
a. Total number of telephone contacts.										30	86
b. Total number of all INITIAL face to face contacts.										13	52
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER										2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.										5	16

III. Initial Crisis Contact Information										CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.										1	1
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).										5	12
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.										4	12
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.											2129
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.											32
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.											16

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :									
Less than 1 hour	11	1 to 2 hours	2	2 to 4 hours	0	More than 4 hours	0		

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:									
Less than 3 hours	8	3 to 6 hours	3	6 to 8 hours	0	8 to 14 hours	2	More than 14 hours	0

IV. Site of Initial Face to Face Contacts										CHILDREN	ADULT
Number of face to face contacts seen in :											
a. Primary Residence (Home)										1	2
b. Family/Relative/Other Residence										0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)										1	1
d. SNF, Nursing Home, Boarding Home										0	2
e. Residential Program (Congregate Community Residence, Apartment Program)										0	0
f. Homeless Shelter										0	0
g. Provider Office										0	0
h. Crisis Office										4	8
i. Emergency Department										7	34
j. Other Hospital Location										0	5
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)										0	0
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										13	52

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)										CHILDREN	ADULT
Number of face to face contacts that resulted in:											
a. Crisis stabilization with no referral for mental health/substance abuse follow-up										0	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up										5	12
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up										5	9
d. Admission to Crisis Stabilization Unit										1	19
e. Inpatient Hospitalization-Medical										0	1
f. Voluntary Psychiatric Hospitalization										2	9
g. Involuntary Psychiatric Hospitalization										0	1
h. Admission to Detox Unit										0	0
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										13	52

AMHI CONSENT DECREE FEEDBACK REPORT		
Oxford County Mental Health		Jan SFY2012
No.	Result	STANDARD
IV.35	19%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	40.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	92%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE <div style="border: 1px solid green; background-color: #e0f7fa; padding: 2px; display: inline-block;">GREEN ON A TURQUOISE BACKGROUND.</div>		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE <div style="border: 1px solid red; background-color: #ffc107; padding: 2px; display: inline-block;">RED BOLD ON A GOLD BACKGROUND</div>		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Jan
Address	REGION I	Beth Delano	Fiscal Year	2012
	50 Moody St Saco ME 04072	Contact Phone Number		
		294-4530		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	40	Females	35				
	Adults	Males		Females					
Age Range	Children	<5y.o.	0	5-9	11	10-14	30	15-17	34
	Adults	18-21		22-35		36-60		61 & Older	
Payment Source	Children	MaineCare	47	Private Ins.	18	Uninsured	10	Medicare	0
	Adults	MaineCare		Private Ins.		Uninsured		Medicare	

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	324	324
b. Total number of all INITIAL face to face contacts.	78	78
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	7	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	11	11

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	23	23
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	43	43
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	43	43
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		1723
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		23
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		51

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	77	1 to 2 hours	1	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	46	3 to 6 hours	27	6 to 8 hours	0	8 to 14 hours	2	More than 14 hours	3
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	20	20
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	25	25
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	1	1
f. Homeless Shelter	0	0
g. Provider Office	1	1
h. Crisis Office	4	4
i. Emergency Department	27	27
j. Other Hospital Location	0	0
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>78</b>	<b>78</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	4	4
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	13	13
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	39	39
d. Admission to Crisis Stabilization Unit	10	10
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	11	11
g. Involuntary Psychiatric Hospitalization	1	1
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>78</b>	<b>78</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Jan SFY2012
No.	Result	STANDARD
IV.35	15%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	22.1 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	95%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Jan
Address	50 Moody St. Saco ME	Beth Delano	Fiscal Year	2012
	REGION II	Contact Phone Number		
		294-4530		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	18	Females	22				
	Adults	Males	44	Females	49				
Age Range	Children	<5y.o.	0	5-9	6	10-14	15	15-17	19
	Adults	18-21	12	22-35	23	36-60	48	61 & Older	10
Payment Source	Children	MaineCare	27	Private Ins.	11	Uninsured	2	Medicare	0
	Adults	MaineCare	43	Private Ins.	17	Uninsured	33	Medicare	0

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	79	286
b. Total number of all INITIAL face to face contacts.	41	97
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	3	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	0	21

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	5	18
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	16	26
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	17	24
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2655
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		45
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		36

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	34	1 to 2 hours	6	2 to 4 hours	1	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	13	3 to 6 hours	22	6 to 8 hours	2	8 to 14 hours	1	More than 14 hours	3
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	2	5
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	6
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	1
g. Provider Office	0	2
h. Crisis Office	10	15
i. Emergency Department	28	61
j. Other Hospital Location	0	1
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	6
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>41</b>	<b>97</b>
<b>Sec. IV Total</b>	<b>41</b>	<b>97</b>

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	6	21
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	11	29
d. Admission to Crisis Stabilization Unit	9	21
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	15	19
g. Involuntary Psychiatric Hospitalization	0	6
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>41</b>	<b>97</b>
<b>Sec. V Total</b>	<b>41</b>	<b>97</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Jan SFY2012
No.	Result	STANDARD
IV.35	<b>26%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	27.4 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>84%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	92%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Tri-County	Contact Person	Month	Jan
Address	230 Bartlett St. Lewiston, ME, 04240	Laurie Cyr Martel	Fiscal Year	2012
		Contact Phone Number		
		207-783-4695		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	12	Females	30				
	Adults	Males	74	Females	60				
Age Range	Children	<5y.o.	0	5-9	8	10-14	16	15-17	18
	Adults	18-21	16	22-35	47	36-60	61	61 & Older	10
Payment Source	Children	MaineCare	33	Private Ins.	14	Uninsured	1	Medicare	0
	Adults	MaineCare	107	Private Ins.	15	Uninsured	12	Medicare	16

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	124	389
b. Total number of all INITIAL face to face contacts.	42	134
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	3	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	1	10

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	1	7
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	16	54
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	16	51
d. SUM TOTAL time <i>in minutes</i> for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		5910
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		88
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		38

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	31	1 to 2 hours	10	2 to 4 hours	1	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	36	3 to 6 hours	6	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	4	7
b. Family/Relative/Other Residence	1	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	3	4
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	2
f. Homeless Shelter	0	0
g. Provider Office	0	2
h. Crisis Office	4	20
i. Emergency Department	30	96
j. Other Hospital Location	0	3
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>42</b>	<b>134</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	3	15
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	9	16
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	10	28
d. Admission to Crisis Stabilization Unit	4	26
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	16	48
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>42</b>	<b>134</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Tri-County	Jan	SFY2012
No.	Result	STANDARD
IV.35	<b>36%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>44.1</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	94%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	94%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	YI	Contact Person	Month	Jan
Address	50 Lydia Lane	Veronica Ross	Fiscal Year	2012
	South Portland, Me 04106	Contact Phone Number		
		207-523-5068		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	4	Females	0				
	Adults	Males	79	Females	86				
Age Range	Children	<5y.o.		5-9		10-14	4	15-17	
	Adults	18-21	10	22-35	43	36-60	90	61 & Older	14
Payment Source	Children	MaineCare	3	Private Ins.	1	Uninsured	0	Medicare	0
	Adults	MaineCare	69	Private Ins.	16	Uninsured	48	Medicare	32

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	0	1350
b. Total number of all INITIAL face to face contacts.	4	185
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	2	209

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	7
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	2	57
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	2	55
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		3818
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		13
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		172

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	1	1 to 2 hours	0	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	0	3 to 6 hours	0	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	2	45
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	16
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	4
f. Homeless Shelter	0	3
g. Provider Office	1	15
h. Crisis Office	0	89
i. Emergency Department	0	13
j. Other Hospital Location	0	0
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>4</b>	<b>185</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	15
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	0	32
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	3	112
d. Admission to Crisis Stabilization Unit	0	25
e. Inpatient Hospitalization-Medical	0	1
f. Voluntary Psychiatric Hospitalization	0	0
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>4</b>	<b>185</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	YI	Jan SFY2012
No.	Result	STANDARD
IV.35	0%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	20.6 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	96%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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# Maine Department of Health and Human Services Integrated Monthly Crisis Report

STATEWIDE  
 January 2012



Continuous Quality  
 Improvement Services  
 An Office of the  
 Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

## I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	190	Females	218				
	Adults	Males	728	Females	708				
Age Range	Children	<5y.o.	2	5-9	43	10-14	175	15-17	186
	Adults	18-21	159	22-35	427	36-60	723	61 & Older	119
Payment Source	Children	MaineCare	287	Private Ins.	104	Uninsured	23	Medicare	0
	Adults	MaineCare	842	Private Ins.	249	Uninsured	258	Medicare	104

## II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	2544	13703
b. Total number of all INITIAL face to face contacts.	418	1589
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	27	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	70	541

## III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	52	182
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	160	463
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	157	438
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		40001
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		823
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		679

contact	CHILDREN	ADULT
Less than 1 hour	221	89
1 to 2 hours	89	82
2 to 4 hours	82	21
More than 4 hours	21	
	53%	21%
		20%
		5%

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis :	
Less than 3 hours	282
3 to 6 hours	103
6 to 8 hours	9
8 to 14 hours	9
More than 14 hours	10
	67%
	25%
	2%
	2%

## IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	61	154
b. Family/Relative/Other Residence	3	7
c. Other Community Setting (Work, School, Police Dept., Public Place)	50	73
d. SNF, Nursing Home, Boarding Home	0	10
e. Residential Program (Congregate Community Residence, Apartment Program)	4	13
f. Homeless Shelter	0	8
g. Provider Office	6	30
h. Crisis Office	76	299
i. Emergency Department	217	886
j. Other Hospital Location	1	76
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	33
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>418</b>	<b>1589</b>
<b>Sec. IV Total</b>	<b>100%</b>	<b>100%</b>

## V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	13	88
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	73	241
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	161	611
d. Admission to Crisis Stabilization Unit	72	202
e. Inpatient Hospitalization-Medical	1	48
f. Voluntary Psychiatric Hospitalization	95	306
g. Involuntary Psychiatric Hospitalization	2	61
h. Admission to Detox Unit	1	32
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>418</b>	<b>1589</b>
<b>Sec. V Total</b>	<b>100%</b>	<b>100%</b>

STATE OF MAINE  
Monthly Crisis Report  
January 2012  
SFY 2012

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## ADULTS ONLY

Adult AMHI CONSENT DECREE FEEDBACK REPORT		
<u>No.</u>	<u>Result</u>	<u>STANDARD</u>
IV.35	23.1%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	25.2 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV.37	95%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	95%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.

STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Aroostook	Contact Person	Month	Feb
Address	PO Box 1018	Lorraine Chamberlain	Fiscal Year	2012
	Caribou, ME 04736	Contact Phone Number		
		207-498-6431		

I. Consumer Demographics (Unduplicated Counts - Face to Face)									
Gender	Children	Males	18	Females	9				
	Adults	Males	54	Females	43				
Age Range	Children	<5y.o.	1	5-9	3	10-14	14	15-17	9
	Adults	18-21	7	22-35	43	36-60	41	61 & Older	6
Payment Source	Children	MaineCare	22	Private Ins.	4	Uninsured	1	Medicare	
	Adults	MaineCare	63	Private Ins.	12	Uninsured	22	Medicare	

II. Summary of All Crisis Contacts		CHILDREN	ADULT
a. Total number of telephone contacts.		162	1186
b. Total number of all INITIAL face to face contacts.		27	97
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER		1	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.		35	87

III. Initial Crisis Contact Information		CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.		5	9
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).		12	23
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.		10	21
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.			2853
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.			39
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.			50

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :							
Less than 1 hour	7	1 to 2 hours	13	2 to 4 hours	6	More than 4 hours	1

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:									
Less than 3 hours	22	3 to 6 hours	5	6 to 8 hours		8 to 14 hours		More than 14 hours	

IV. Site of Initial Face to Face Contacts		CHILDREN	ADULT	
Number of face to face contacts seen in :				
a. Primary Residence (Home)		3	3	
b. Family/Relative/Other Residence				
c. Other Community Setting (Work, School, Police Dept., Public Place)		2	0	
d. SNF, Nursing Home, Boarding Home			5	
e. Residential Program (Congregate Community Residence, Apartment Program)		1	1	
f. Homeless Shelter		0	1	
g. Provider Office			2	
h. Crisis Office		6	16	
i. Emergency Department		12	41	
j. Other Hospital Location		2	19	
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)		1	9	
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts		Sec. IV Total	27	97

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)		CHILDREN	ADULT	
Number of face to face contacts that resulted in:				
a. Crisis stabilization with no referral for mental health/substance abuse follow-up		2	8	
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up				
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up		15	56	
d. Admission to Crisis Stabilization Unit		6	8	
e. Inpatient Hospitalization-Medical		0	5	
f. Voluntary Psychiatric Hospitalization		4	15	
g. Involuntary Psychiatric Hospitalization			3	
h. Admission to Detox Unit			2	
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts		Sec. V Total	27	97

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Aroostook		Feb
		SFY2012
No.	Result	STANDARD
IV.35	19%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	29.4 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	92%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	91%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Atlantic	Contact Person	Month	Feb
Address	1 Stackpole Rd	Annette Adams	Fiscal Year	2012
	Machias	Contact Phone Number		
		2550996		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	7	Females	16				
	Adults	Males	34	Females	34				
Age Range	Children	<5y.o.		5-9	3	10-14	12	15-17	8
	Adults	18-21	7	22-35	20	36-60	33	61 & Older	8
Payment Source	Children	MaineCare	15	Private Ins.	4	Uninsured	4	Medicare	
	Adults	MaineCare	45	Private Ins.	13	Uninsured	10	Medicare	7

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	748	3676
b. Total number of all INITIAL face to face contacts.	23	68
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	4	31

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	4	31
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	4	5
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	4	4
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2773
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		42
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		25

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	9	1 to 2 hours	5	2 to 4 hours	5	More than 4 hours	4
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	15	3 to 6 hours	6	6 to 8 hours	2	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	6	4
b. Family/Relative/Other Residence	1	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	2
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	1
h. Crisis Office	8	6
i. Emergency Department	5	42
j. Other Hospital Location	1	7
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	1	6
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>23</b>	<b>68</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	10
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	3	15
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	12	13
d. Admission to Crisis Stabilization Unit	5	3
e. Inpatient Hospitalization-Medical	1	11
f. Voluntary Psychiatric Hospitalization	1	13
g. Involuntary Psychiatric Hospitalization	0	1
h. Admission to Detox Unit	0	2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>23</b>	<b>68</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Atlantic	Feb	SFY2012
No.	Result	STANDARD
IV.35	<b>21%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>40.8</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>99%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>80%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report													
Agency	Community Health & Counseling Services		Contact Person			Month		Feb					
Address	PO Box 425		Tom Lynn			Fiscal Year		2012					
	Bangor, ME 04402-0425		Contact Phone Number										
			947-0366 ext. 344										
<b>I. Consumer Demographics (Unduplicated Counts - Face to Face)</b>													
Gender	Children	Males	9	Females	11								
	Adults	Males	62	Females	63								
Age Range	Children	<5y.o.	0	5-9	0	10-14	7	15-17	13				
	Adults	18-21	12	22-35	35	36-60	0	61 & Older	0				
Payment Source	Children	MaineCare	16	Private Ins.	2	Uninsured	2	Medicare	0				
	Adults	MaineCare	76	Private Ins.	44	Uninsured	5	Medicare	0				
<b>II. Summary of All Crisis Contacts</b>										CHILDREN	ADULT		
a. Total number of telephone contacts.										195	1076		
b. Total number of all INITIAL face to face contacts.										20	125		
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER										3			
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.										4	42		
<b>III. Initial Crisis Contact Information</b>										CHILDREN	ADULT		
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.										2	29		
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).										9	45		
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.										7	42		
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.											3615		
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.											65		
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.											60		
CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :													
Less than 1 hour	11	1 to 2 hours	8	2 to 4 hours	1	More than 4 hours	0						
CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:													
Less than 3 hours	19	3 to 6 hours	0	6 to 8 hours	0	8 to 14 hours	1	More than 14 hours	0				
<b>IV. Site of Initial Face to Face Contacts</b>										CHILDREN	ADULT		
Number of face to face contacts seen in :													
a. Primary Residence (Home)										2	6		
b. Family/Relative/Other Residence										2	3		
c. Other Community Setting (Work, School, Police Dept., Public Place)										3	7		
d. SNF, Nursing Home, Boarding Home										0	0		
e. Residential Program (Congregate Community Residence, Apartment Program)										0	0		
f. Homeless Shelter										0	0		
g. Provider Office										1	2		
h. Crisis Office										3	33		
i. Emergency Department										9	65		
j. Other Hospital Location										0	7		
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)										0	2		
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										Sec. IV Total		20	125
<b>V. Initial Crisis Resolution (Mutually Exclusive &amp; Exhaustive)</b>										CHILDREN	ADULT		
Number of face to face contacts that resulted in:													
a. Crisis stabilization with no referral for mental health/substance abuse follow-up										0	9		
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up										5	13		
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up										7	44		
d. Admission to Crisis Stabilization Unit										6	29		
e. Inpatient Hospitalization-Medical										1	9		
f. Voluntary Psychiatric Hospitalization										1	15		
g. Involuntary Psychiatric Hospitalization										0	4		
h. Admission to Detox Unit										0	2		
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										Sec. V Total		20	125

AMHI CONSENT DECREE FEEDBACK REPORT		
Community Health & Counseling Services		Feb SFY2012
No.	Result	STANDARD
IV.35	15%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	28.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV.37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	93%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE <div style="border: 1px solid black; background-color: #90EE90; padding: 2px; display: inline-block;">GREEN ON A TURQUOISE BACKGROUND.</div>		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE <div style="border: 1px solid black; background-color: #FFD700; padding: 2px; display: inline-block;"><b>RED BOLD ON A GOLD BACKGROUND</b></div>		

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STATE OF MAINE Monthly Crisis Report

Agency	Crisis & Counseling Centers	Contact Person	Month	Feb
Address	10 Caldwell Road Augusta, ME 04330	Nicole Auclair	Fiscal Year	2012
		Contact Phone Number 207-213-4535 Direct Line		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	42	Females	33				
	Adults	Males	140	Females	141				
Age Range	Children	<5y.o.	0	5-9	4	10-14	20	15-17	51
	Adults	18-21	31	22-35	77	36-60	145	61 & Older	28
Payment Source	Children	MaineCare	59	Private Ins.	14	Uninsured	2	Medicare	0
	Adults	MaineCare	198	Private Ins.	47	Uninsured	24	Medicare	12

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	772	2946
b. Total number of all INITIAL face to face contacts.	75	281
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	1	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	12	72

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	8
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	25	118
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	24	117
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		3030
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		187
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		93

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	5	1 to 2 hours	43	2 to 4 hours	27	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	74	3 to 6 hours	1	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	21	38
b. Family/Relative/Other Residence	1	2
c. Other Community Setting (Work, School, Police Dept., Public Place)	8	5
d. SNF, Nursing Home, Boarding Home	0	3
e. Residential Program (Congregate Community Residence, Apartment Program)	5	3
f. Homeless Shelter	0	3
g. Provider Office	0	5
h. Crisis Office	4	24
i. Emergency Department	36	188
j. Other Hospital Location	0	8
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>75</b>	<b>281</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	13
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	7	42
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	39	111
d. Admission to Crisis Stabilization Unit	15	35
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	14	72
g. Involuntary Psychiatric Hospitalization	0	8
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>75</b>	<b>281</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Crisis & Counseling Centers	Feb	SFY2012
No.	Result	STANDARD
IV.35	<b>28%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	10.8 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	99%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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**STATE OF MAINE Monthly Crisis Report**

<b>Agency</b>	Counseling Services Inc.	<b>Contact Person</b>	Month	Feb
<b>Address</b>	PO Box 1010	Jennifer Goodwin	<b>Fiscal Year</b>	2012
	Saco, ME 04072	<b>Contact Phone Number</b>		
		207-282-1500		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

<b>Gender</b>	<b>Children</b>	Males	34	Females	48				
	<b>Adults</b>	Males	72	Females	90				
<b>Age Rang</b>	<b>Children</b>	<5y.o.	0	5-9	8	10-14	37	15-17	37
	<b>Adults</b>	18-21	21	22-35	44	36-60	77	61 & Older	20
<b>Payment Source</b>	<b>Children</b>	MaineCare	61	Private In	17	Uninsured	4	Medicare	
	<b>Adults</b>	MaineCare	92	Private In	29	Uninsured	30	Medicare	11

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	197	542
b. Total number of all <i>INITIAL</i> face to face contacts.	91	190
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	1	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	4	16

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
previously developed with the individual was used.	4	31
b. Number of <i>INITIAL</i> face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	14	53
the crisis.	14	53
face contact or when individual was ready and able to be seen to initial face to face contact.		6170
that contact.		123
of that contact.		43

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out:**

Less than 1 hour	0	1 to 2 hours	28	2 to 4 hours	37	More than 4 hours	26
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	46	3 to 6 hours	29	6 to 8 hours	7	8 to 14 hours	7	More than 14 hours	2
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in:</i>		
a. Primary Residence (Home)	2	6
b. Family/Relative/Other Residence		
c. Other Community Setting (Work, School, Police Dept., Public Place)	2	8
d. SNF, Nursing Home, Boarding Home		1
e. Residential Program (Congregate Community Residence, Apartment Program)		
f. Homeless Shelter		
g. Provider Office		
h. Crisis Office	26	34
i. Emergency Department	61	141
j. Other Hospital Location		
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)		

**NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts**      **Sec. IV Total**      91      190

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up		3
b. Crisis stabilization with <i>referral to new provider</i> for mental health/substance abuse follow-up	33	38
c. Crisis stabilization with <i>referral back to current provider</i> for mental health/substance abuse follow-up	31	54
d. Admission to Crisis Stabilization Unit	12	14
e. Inpatient Hospitalization-Medical	1	2
f. Voluntary Psychiatric Hospitalization	14	60
g. Involuntary Psychiatric Hospitalization		16
h. Admission to Detox Unit		3

**NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts**      **Sec. V Total**      91      190

AMHI CONSENT DECREE FEEDBACK REPORT

Counseling Services Inc.

Feb

SFY2012

No.	Result	STANDARD
IV.35	<b>40%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>32.5</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV.37	<b>87%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>100%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.

NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE

**GREEN ON A TURQUOISE BACKGROUND.**

IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE

**RED BOLD ON A GOLD BACKGROUND**

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STATE OF MAINE Monthly Crisis Report

Agency	Evergreen Behavioral Services	Contact Person	Month	Feb
Address	131 Franklin Health Commons Ste A	Crystal Harting	Fiscal Year	2012
	Farmington ME 04938	Contact Phone Number		
		207-779-2843		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	6	Females	5				
	Adults	Males	13	Females	20				
Age Range	Children	<5y.o.	0	5-9	1	10-14	6	15-17	4
	Adults	18-21	8	22-35	10	36-60	9	61 & Older	6
Payment Source	Children	MaineCare	6	Private Ins.	4	Uninsured	0	Medicare	0
	Adults	MaineCare	15	Private Ins.	10	Uninsured	4	Medicare	4

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	54	198
b. Total number of all INITIAL face to face contacts.	11	34
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	1	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	5	14

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	0
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	2	10
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	2	10
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		662
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		15
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		17

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	9	1 to 2 hours	2	2 to 4 hours	0	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	10	3 to 6 hours	1	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	0	2
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	0	0
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	2
h. Crisis Office	8	9
i. Emergency Department	2	15
j. Other Hospital Location	1	5
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>11</b>	<b>34</b>
<b>Sec. IV Total</b>		

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	3
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	4	14
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	5	11
d. Admission to Crisis Stabilization Unit	0	2
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	2	3
g. Involuntary Psychiatric Hospitalization	0	1
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>11</b>	<b>34</b>
<b>Sec. V Total</b>		

AMHI CONSENT DECREE FEEDBACK REPORT		
Evergreen Behavioral Services		Feb SFY2012
No.	Result	STANDARD
IV.35	12%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	19.5 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	94%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
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STATE OF MAINE Monthly Crisis Report

Agency	Mid-Coast Mental Health Center	Contact Person	Month	Feb
Address	12 Union St., Rockland, ME 04841	Patti Isnardi	Fiscal Year	2012
		Contact Phone Number		
		701-4476		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	7	Females	10				
	Adults	Males	52	Females	61				
Age Range	Children	<5y.o.	0	5-9	2	10-14	7	15-17	8
	Adults	18-21	9	22-35	42	36-60	41	61 & Older	21
Payment Source	Children	MaineCare	12	Private Ins.	3	Uninsured	2	Medicare	0
	Adults	MaineCare	40	Private Ins.	20	Uninsured	13	Medicare	41

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	20	201
b. Total number of all INITIAL face to face contacts.	17	125
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	3	20

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	4	11
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	6	18
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	6	17
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		1942
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		91
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		33

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
17	0	0	0

**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
9	7	0	0	1

**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	2	4
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	2	0
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	1
h. Crisis Office	5	21
i. Emergency Department	8	91
j. Other Hospital Location	0	5
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	3
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>17</b>	<b>125</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	2	7
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	7	48
d. Admission to Crisis Stabilization Unit	3	9
e. Inpatient Hospitalization-Medical	1	1
f. Voluntary Psychiatric Hospitalization	4	40
g. Involuntary Psychiatric Hospitalization	0	6
h. Admission to Detox Unit	0	13
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>17</b>	<b>125</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Mid-Coast Mental Health Center		Feb SFY2012
No.	Result	STANDARD
IV.35	<b>37%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	15.5 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	94%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE  GREEN ON A TURQUOISE BACKGROUND.  IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE <b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Oxford County Mental Health	Contact Person	Month	Feb
Address	150 Congress Street	Karen Hodgkins	Fiscal Year	2012
	Rumford, Maine 04276	Contact Phone Number		
		207 364-3549		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	9	Females	12				
	Adults	Males	30	Females	25				
Age Range	Children	<5y.o.	0	5-9	3	10-14	11	15-17	7
	Adults	18-21	7	22-35	12	36-60	33	61 & Older	3
Payment Source	Children	MaineCare	17	Private Ins.	3	Uninsured	1	Medicare	0
	Adults	MaineCare	36	Private Ins.	8	Uninsured	5	Medicare	6

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	27	89
b. Total number of all INITIAL face to face contacts.	21	55
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	4	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	9	18

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	1	0
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	11	20
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	11	19
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		1097
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		34
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		18

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	18	1 to 2 hours	3	2 to 4 hours	0	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	16	3 to 6 hours	5	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	3
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	3	0
d. SNF, Nursing Home, Boarding Home	0	1
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	1	1
h. Crisis Office	3	13
i. Emergency Department	11	35
j. Other Hospital Location	0	1
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>21</b>	<b>55</b>
<b>Sec. IV Total</b>		

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	8	14
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	7	15
d. Admission to Crisis Stabilization Unit	3	15
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	2	6
g. Involuntary Psychiatric Hospitalization	0	2
h. Admission to Detox Unit	0	2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>21</b>	<b>55</b>
<b>Sec. V Total</b>		

AMHI CONSENT DECREE FEEDBACK REPORT		
Oxford County Mental Health		Feb SFY2012
No.	Result	STANDARD
IV.35	15%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	19.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	95%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	95%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Feb
Address	50 Moody St Saco ME 04072	Beth Delano	Fiscal Year	2012
		Contact Phone Number		
		294-4530		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	43	Females	27				
	Adults	Males		Females					
Age Range	Children	<5y.o.	0	5-9	4	10-14	44	15-17	22
	Adults	18-21		22-35		36-60		61 & Older	
Payment Source	Children	MaineCare	38	Private Ins.	31	Uninsured	1	Medicare	0
	Adults	MaineCare		Private Ins.		Uninsured		Medicare	

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	324	324
b. Total number of all INITIAL face to face contacts.	72	72
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	5	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	8	0

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	17	17
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	33	33
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	33	33
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		1332
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		21
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		50

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	68	1 to 2 hours	4	2 to 4 hours	0	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	44	3 to 6 hours	26	6 to 8 hours	1	8 to 14 hours	0	More than 14 hours	1
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	15	15
b. Family/Relative/Other Residence	2	2
c. Other Community Setting (Work, School, Police Dept., Public Place)	21	21
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	1	1
h. Crisis Office	11	11
i. Emergency Department	22	22
j. Other Hospital Location	0	0
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>72</b>	<b>72</b>
<b>Sec. IV Total</b>	<b>72</b>	<b>72</b>

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	0
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	17	17
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	32	32
d. Admission to Crisis Stabilization Unit	11	11
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	12	12
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>72</b>	<b>72</b>
<b>Sec. V Total</b>	<b>72</b>	<b>72</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Feb SFY2012
No.	Result	STANDARD
IV.35	17%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	18.5 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Feb
Address	50 Moody St. Saco ME	Beth Delano	Fiscal Year	2012
		Contact Phone Number		
		294-4530		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	20	Females	17				
	Adults	Males	51	Females	66				
Age Range	Children	<5y.o.	0	5-9	3	10-14	20	15-17	14
	Adults	18-21	7	22-35	41	36-60	55	61 & Older	14
Payment Source	Children	MaineCare	17	Private Ins.	18	Uninsured	2	Medicare	0
	Adults	MaineCare	61	Private Ins.	14	Uninsured	42	Medicare	0

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	69	279
b. Total number of all INITIAL face to face contacts.	38	126
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	5	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	0	6

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	4	29
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	9	33
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	9	33
d. SUM TOTAL time <i>in minutes</i> for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		3858
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		60
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		32

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	29	1 to 2 hours	7	2 to 4 hours	2	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	24	3 to 6 hours	8	6 to 8 hours	4	8 to 14 hours	1	More than 14 hours	1
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	5
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	4	6
d. SNF, Nursing Home, Boarding Home	0	2
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	2
h. Crisis Office	9	17
i. Emergency Department	22	89
j. Other Hospital Location	0	0
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	5
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>38</b>	<b>126</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	4
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	16	23
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	7	48
d. Admission to Crisis Stabilization Unit	2	13
e. Inpatient Hospitalization-Medical	0	1
f. Voluntary Psychiatric Hospitalization	12	30
g. Involuntary Psychiatric Hospitalization	0	7
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>38</b>	<b>126</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Feb SFY2012
No.	Result	STANDARD
IV.35	<b>29%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>30.6</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>73%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>100%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Tri-County	Contact Person	Month	Feb
Address	230 Bartlett St. Lewiston, ME, 04240	Laurie Cyr Martel	Fiscal Year	2012
		Contact Phone Number		
		207-783-4695		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	26	Females	28				
	Adults	Males	76	Females	46				
Age Range	Children	<5y.o.	0	5-9	9	10-14	22	15-17	23
	Adults	18-21	13	22-35	38	36-60	62	61 & Older	9
Payment Source	Children	MaineCare	47	Private Ins.	9	Uninsured	0	Medicare	0
	Adults	MaineCare	97	Private Ins.	9	Uninsured	10	Medicare	23

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	151	365
b. Total number of all INITIAL face to face contacts.	54	122
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	5	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	3	10

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	7
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	16	53
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	14	47
d. SUM TOTAL time <i>in minutes</i> for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		5370
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		78
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		33

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	42	1 to 2 hours	9	2 to 4 hours	3	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	51	3 to 6 hours	0	6 to 8 hours	1	8 to 14 hours	0	More than 14 hours	2
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	0	6
b. Family/Relative/Other Residence	0	1
c. Other Community Setting (Work, School, Police Dept., Public Place)	2	4
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	1
f. Homeless Shelter	1	0
g. Provider Office	1	1
h. Crisis Office	4	17
i. Emergency Department	45	89
j. Other Hospital Location	1	3
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>54</b>	<b>122</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	6	21
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	8	17
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	14	26
d. Admission to Crisis Stabilization Unit	9	16
e. Inpatient Hospitalization-Medical	0	1
f. Voluntary Psychiatric Hospitalization	17	38
g. Involuntary Psychiatric Hospitalization	0	3
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>54</b>	<b>122</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Tri-County	Feb SFY2012
No.	Result	STANDARD
IV.35	<b>34%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>44.0</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>91%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>89%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	YI	Contact Person	Month	Feb
Address	50 Lydia Lane	Veronica Ross	Fiscal Year	2012
	South Portland, Me 04106	Contact Phone Number		
		207-523-5068		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	2	Females	1				
	Adults	Males	99	Females	87				
Age Range	Children	<5y.o.	0	5-9	1	10-14	2	15-17	0
	Adults	18-21	8	22-35	50	36-60	101	61 & Older	11
Payment Source	Children	MaineCare	2	Private Ins.	0	Uninsured	1	Medicare	0
	Adults	MaineCare	75	Private Ins.	18	Uninsured	64	Medicare	42

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	3	1341
b. Total number of all INITIAL face to face contacts.	3	201
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	0	225

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	9
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	3	72
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	3	69
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		4696
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		13
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		188

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	3	1 to 2 hours	0	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	0	3 to 6 hours	0	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	2	32
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	12
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	11
f. Homeless Shelter	0	2
g. Provider Office	0	14
h. Crisis Office	0	115
i. Emergency Department	0	13
j. Other Hospital Location	0	2
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>3</b>	<b>201</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	11
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	2	45
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	1	113
d. Admission to Crisis Stabilization Unit	0	26
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	0	5
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>3</b>	<b>201</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	YI	Feb SFY2012
No.	Result	STANDARD
IV.35	2%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	23.4 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	96%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

<<<<- Note: This cell should be no greater than IV.i.

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# Maine Department of Health and Human Services Integrated Monthly Crisis Report

STATEWIDE  
 February 2012



Continuous Quality  
 Improvement Services  
 An Office of the  
 Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

## I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	223	Females	217				
	Adults	Males	683	Females	676				
Age Range	Children	<5y.o.	1	5-9	41	10-14	202	15-17	196
	Adults	18-21	130	22-35	412	36-60	597	61 & Older	126
Payment Source	Children	MaineCare	312	Private Ins.	109	Uninsured	20	Medicare	0
	Adults	MaineCare	798	Private Ins.	224	Uninsured	229	Medicare	146

## II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	2722	12223
b. Total number of all INITIAL face to face contacts.	452	1496
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	28	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	87	541

## III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	41	181
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	452	483
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	137	465
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		37398
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		768
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		642

contact	CHILDREN	ADULT
Less than 1 hour	218	122
1 to 2 hours	122	81
2 to 4 hours	81	31
More than 4 hours	31	
	48%	27%
		18%
		7%

## CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis :

	CHILDREN	ADULT
Less than 3 hours	330	88
3 to 6 hours	88	15
6 to 8 hours	15	9
8 to 14 hours	9	
More than 14 hours		7
	73%	19%
		3%
		2%

## IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	59	124
b. Family/Relative/Other Residence	6	8
c. Other Community Setting (Work, School, Police Dept., Public Place)	49	65
d. SNF, Nursing Home, Boarding Home	0	12
e. Residential Program (Congregate Community Residence, Apartment Program)	6	16
f. Homeless Shelter	1	6
g. Provider Office	4	32
h. Crisis Office	87	316
i. Emergency Department	233	831
j. Other Hospital Location	5	57
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	2	29
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>452</b>	<b>1496</b>
<b>Sec. IV Total</b>	<b>100%</b>	<b>100%</b>

## V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	11	84
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	105	245
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	177	571
d. Admission to Crisis Stabilization Unit	72	181
e. Inpatient Hospitalization-Medical	4	30
f. Voluntary Psychiatric Hospitalization	83	309
g. Involuntary Psychiatric Hospitalization	0	51
h. Admission to Detox Unit	0	25
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>452</b>	<b>1496</b>
<b>Sec. V Total</b>	<b>100%</b>	<b>100%</b>

## ADULTS ONLY

Adult AMHI CONSENT DECREE FEEDBACK REPORT		
<u>No.</u>	<u>Result</u>	<u>STANDARD</u>
IV.35	24.1%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	25.0 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV.37	94%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	96%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.

STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Aroostook	Contact Person	Month	Mar
Address	PO Box 1018	Lorraine Chamberlain	Fiscal Year	2012
	Caribou, ME 04736	Contact Phone Number		
		207-498-6431		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	10	Females	2				
	Adults	Males	60	Females	41				
Age Range	Children	<5y.o.	1	5-9	1	10-14	3	15-17	8
	Adults	18-21	7	22-35	23	36-60	65	61 & Older	6
Payment Source	Children	MaineCare	9	Private Ins.	2	Uninsured	1	Medicare	
	Adults	MaineCare	47	Private Ins.	22	Uninsured	32	Medicare	

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	143	1232
b. Total number of all INITIAL face to face contacts.	12	101
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	28	90

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	11
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	4	25
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	4	25
d. SUM TOTAL time <i>in minutes</i> for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2621
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		38
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		53

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	4	1 to 2 hours	3	2 to 4 hours	5	More than 4 hours	1
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	10	3 to 6 hours	2	6 to 8 hours		8 to 14 hours		More than 14 hours	
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	1	1
b. Family/Relative/Other Residence		
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	0
d. SNF, Nursing Home, Boarding Home		6
e. Residential Program (Congregate Community Residence, Apartment Program)	0	2
f. Homeless Shelter	0	0
g. Provider Office		0
h. Crisis Office	2	14
i. Emergency Department	8	41
j. Other Hospital Location	0	25
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	12
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>12</b>	<b>101</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	13
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up		
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	10	44
d. Admission to Crisis Stabilization Unit	0	12
e. Inpatient Hospitalization-Medical	0	7
f. Voluntary Psychiatric Hospitalization	2	17
g. Involuntary Psychiatric Hospitalization		6
h. Admission to Detox Unit		2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>12</b>	<b>101</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Aroostook		Mar
		SFY2012
No.	Result	STANDARD
IV.35	23%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	26.0 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	90%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	AMHC-Atlantic	Contact Person	Month	Mar
Address	1 Stackpole Rd	Annette Adams	Fiscal Year	2012
	Machias	Contact Phone Number		
		2550996		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	14	Females	12				
	Adults	Males	53	Females	45				
Age Range	Children	<5y.o.	0	5-9	0	10-14	19	15-17	7
	Adults	18-21	7	22-35	40	36-60	39	61 & Older	12
Payment Source	Children	MaineCare	22	Private Ins.	3	Uninsured	1	Medicare	
	Adults	MaineCare	45	Private Ins.	16	Uninsured	21	Medicare	16

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	1058	4876
b. Total number of all INITIAL face to face contacts.	26	98
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	5	41

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	5	41
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	8	10
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	8	9
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2445
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		48
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		49

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	7	1 to 2 hours	16	2 to 4 hours	3	More than 4 hours	0
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CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	19	3 to 6 hours	6	6 to 8 hours	1	8 to 14 hours	0	More than 14 hours	0
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IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	5
b. Family/Relative/Other Residence	1	1
c. Other Community Setting (Work, School, Police Dept., Public Place)	1	3
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	1
h. Crisis Office	6	15
i. Emergency Department	15	48
j. Other Hospital Location	0	13
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	12
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>26</b>	<b>98</b>
<b>Sec. IV Total</b>		

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	16
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	6	26
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	9	14
d. Admission to Crisis Stabilization Unit	6	5
e. Inpatient Hospitalization-Medical	0	14
f. Voluntary Psychiatric Hospitalization	4	22
g. Involuntary Psychiatric Hospitalization	0	1
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>26</b>	<b>98</b>
<b>Sec. V Total</b>		

AMHI CONSENT DECREE FEEDBACK REPORT		
AMHC-Atlantic		Mar
		SFY2012
No.	Result	STANDARD
IV.35	23%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	24.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	90%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report										AMH						
										Community Health & C						
Agency	Community Health & Counseling Services			Contact Person		Month		Mar		No.	Result					
Address	PO Box 425			Tom Lynn		Fiscal Year		2012		IV.35	13%	No more tr				
	Bangor, ME 04402-0425			Contact Phone Number						IV.36	24.8	90% of Cris Average Minutes within an a				
I. Consumer Demographics (Unduplicated Counts - Face to Face)																
Gender	Children	Males	10	Females	25											
	Adults	Males	71	Females	68											
Age Range	Children	<5y.o.	1	5-9	4	10-14	13	15-17	17	IV. 37	100%	90% of all I Hours of In				
	Adults	18-21	14	22-35	34	36-60	77	61 & Older	14							
Payment Source	Children	MaineCare	22	Private Ins.	9	Uninsured	4	Medicare	0							
	Adults	MaineCare	81	Private Ins.	54	Uninsured	4	Medicare	0							
II. Summary of All Crisis Contacts										CHILDREN	ADULT	IV.38	75%	90% of all F Worker, th		
a. Total number of telephone contacts.										332	1232					
b. Total number of all INITIAL face to face contacts.										35	139					
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER										3		NOTE: IF STANDARD IS MET, THE				
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.										3	73	GREEN ON A TURQUOISE				
III. Initial Crisis Contact Information										CHILDREN	ADULT					
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.										6	24	IF STANDARD IS NOT MET				
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).										15	40	RED BOLD ON A GOLD B				
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.										13	30					
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.											3450					
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.											76	<<<< Note: This cell should be no greater than				
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.											63	<<<< NOTE: This cell should be no greater than				
CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :																
Less than 1 hour	29	1 to 2 hours	6	2 to 4 hours	0	More than 4 hours	0									
CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:																
Less than 3 hours	32	3 to 6 hours	1	6 to 8 hours	0	8 to 14 hours	2	More than 14 hours	0							
IV. Site of Initial Face to Face Contacts										CHILDREN	ADULT					
Number of face to face contacts seen in :																
a. Primary Residence (Home)										6	11					
b. Family/Relative/Other Residence										1	1					
c. Other Community Setting (Work, School, Police Dept., Public Place)										5	8					
d. SNF, Nursing Home, Boarding Home										0	0					
e. Residential Program (Congregate Community Residence, Apartment Program)										0	0					
f. Homeless Shelter										0	2					
g. Provider Office										1	5					
h. Crisis Office										5	32					
i. Emergency Department										16	76					
j. Other Hospital Location										0	2					
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)										1	2					
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										Sec. IV Total		35	139	<<<< Note: This cell should appear to be turqo		
V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)										CHILDREN	ADULT					
Number of face to face contacts that resulted in:																
a. Crisis stabilization with no referral for mental health/substance abuse follow-up										0	10					
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up										3	17					
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up										12	59					
d. Admission to Crisis Stabilization Unit										13	22					
e. Inpatient Hospitalization-Medical										0	10					
f. Voluntary Psychiatric Hospitalization										7	17					
g. Involuntary Psychiatric Hospitalization										0	1					
h. Admission to Detox Unit										0	3					
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts										Sec. V Total		35	139	<<<< Note: This cell should appear to be turqo		

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DECREE FEEDBACK REPORT		
Services	Mar	SFY2012
<u>STANDARD</u>		
of face to face contacts result in Psychiatric Hospitalization.		
[REDACTED]		
Calls Requiring Face to Face Assessments are responded to within 30 minutes from the end of the phone call.		
[REDACTED]		
Face Assessments Result in Resolution for the Consumer Within 8 Hours of Face to Face Assessment.		
[REDACTED]		
In all Contacts in which the client has a Community Support Worker notified of the crisis.		
[REDACTED]		
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STATE OF MAINE Monthly Crisis Report

Agency	Crisis & Counseling Centers	Contact Person	Month	Mar
Address	10 Caldwell Road Augusta, ME 04330	Nicole Auclair	Fiscal Year	2012
		Contact Phone Number		
		207-626-3448 ext. 1155		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	47	Females	47				
Adults	Males	144	Females	151					
Age Range	Children	<5y.o.	0	5-9	6	10-14	51	15-17	37
	Adults	18-21	26	22-35	100	36-60	139	61 & Older	30
Payment Source	Children	MaineCare	73	Private Ins.	18	Uninsured	3	Medicare	0
	Adults	MaineCare	212	Private Ins.	38	Uninsured	34	Medicare	11

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	807	3298
b. Total number of all INITIAL face to face contacts.	94	295
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	7	68

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	2	9
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	29	99
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	28	99
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		3548
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		200
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		94

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
4	56	34	0

**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
91	3	0	0	0

**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	40	47
b. Family/Relative/Other Residence	0	3
c. Other Community Setting (Work, School, Police Dept., Public Place)	8	7
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	2
f. Homeless Shelter	0	0
g. Provider Office	0	6
h. Crisis Office	9	19
i. Emergency Department	37	201
j. Other Hospital Location	0	7
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	3
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>94</b>	<b>295</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	8
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	21	41
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	30	120
d. Admission to Crisis Stabilization Unit	26	45
e. Inpatient Hospitalization-Medical	0	1
f. Voluntary Psychiatric Hospitalization	17	65
g. Involuntary Psychiatric Hospitalization	0	15
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>94</b>	<b>295</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Crisis & Counseling Centers	Mar	SFY2012
No.	Result	STANDARD
IV.35	<b>27%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	12.0 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Counseling Services Inc.	Contact Person	Month	Mar
Address	PO Box 1010	Jennifer Goodwin	Fiscal Year	2012
	Saco, ME 04072	Contact Phone Number		
		207-282-1500		

I. Consumer Demographics (Unduplicated Counts - Face to Face)									
Gender	Children	Males	39	Females	53				
	Adults	Males	90	Females	104				
Age Range	Children	<5y.o.	0	5-9	9	10-14	45	15-17	38
	Adults	18-21	26	22-35	54	36-60	94	61 & Older	20
Payment Source	Children	MaineCare	47	Private Ins.	39	Uninsured	6	Medicare	
	Adults	MaineCare	92	Private Ins.	43	Uninsured	50	Medicare	9

II. Summary of All Crisis Contacts									CHILDREN	ADULT
a. Total number of telephone contacts.									172	610
b. Total number of all INITIAL face to face contacts.									103	216
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER									2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.									8	10

III. Initial Crisis Contact Information									CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.									9	19
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).									18	38
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.									18	38
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.										7669
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.										138
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.										52

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :								
Less than 1 hour	1	1 to 2 hours	43	2 to 4 hours	29	More than 4 hours	30	

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:									
Less than 3 hours	65	3 to 6 hours	20	6 to 8 hours	8	8 to 14 hours	6	More than 14 hours	4

IV. Site of Initial Face to Face Contacts									CHILDREN	ADULT
Number of face to face contacts seen in :										
a. Primary Residence (Home)									4	3
b. Family/Relative/Other Residence										
c. Other Community Setting (Work, School, Police Dept., Public Place)									3	8
d. SNF, Nursing Home, Boarding Home										
e. Residential Program (Congregate Community Residence, Apartment Program)										
f. Homeless Shelter										
g. Provider Office									1	
h. Crisis Office									40	43
i. Emergency Department									55	161
j. Other Hospital Location										1
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)										
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts							Sec. IV Total		103	216

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)									CHILDREN	ADULT
Number of face to face contacts that resulted in:										
a. Crisis stabilization with no referral for mental health/substance abuse follow-up										4
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up									28	72
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up									38	53
d. Admission to Crisis Stabilization Unit									16	7
e. Inpatient Hospitalization-Medical										2
f. Voluntary Psychiatric Hospitalization									21	67
g. Involuntary Psychiatric Hospitalization										9
h. Admission to Detox Unit										2
NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts							Sec. V Total		103	216

AMHI CONSENT DECREE FEEDBACK REPORT		
Counseling Services Inc.		Mar SFY2012
No.	Result	STANDARD
IV.35	<b>35%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>35.5</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>88%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>100%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Evergreen Behavioral Services	Contact Person	Month	Mar
Address	131 Franklin Health Commons Ste A	Crystal Harting	Fiscal Year	2012
	Farmington ME 04938	Contact Phone Number		
		207-779-2843		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	3	Females	5				
	Adults	Males	22	Females	13				
Age Range	Children	<5y.o.	0	5-9	0	10-14	4	15-17	4
	Adults	18-21	8	22-35	13	36-60	12	61 & Older	2
Payment Source	Children	MaineCare	6	Private Ins.	2	Uninsured	0	Medicare	0
	Adults	MaineCare	22	Private Ins.	5	Uninsured	6	Medicare	2

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	60	181
b. Total number of all INITIAL face to face contacts.	10	40
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	5	12

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	1	2
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	2	8
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	2	8
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		642
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		18
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		21

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	8	1 to 2 hours	2	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	10	3 to 6 hours	0	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	1	5
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	0	1
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	0
h. Crisis Office	4	13
i. Emergency Department	4	18
j. Other Hospital Location	1	2
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>10</b>	<b>40</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	4	10
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	5	21
d. Admission to Crisis Stabilization Unit		0
e. Inpatient Hospitalization-Medical		0
f. Voluntary Psychiatric Hospitalization		2
g. Involuntary Psychiatric Hospitalization		4
h. Admission to Detox Unit		2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>10</b>	<b>40</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Evergreen Behavioral Services		Mar SFY2012
No.	Result	STANDARD
IV.35	15%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	16.1 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	98%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Mid-Coast Mental Health Center	Contact Person	Month	Mar
Address	12 Union St., Rockland, ME 04841	Patti Isnardi	Fiscal Year	2012
		Contact Phone Number		
		701-4476		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	15	Females	13				
	Adults	Males	66	Females	56				
Age Range	Children	<5y.o.	0	5-9	2	10-14	11	15-17	15
	Adults	18-21	16	22-35	45	36-60	44	61 & Older	17
Payment Source	Children	MaineCare	18	Private Ins.	8	Uninsured	2	Medicare	0
	Adults	MaineCare	39	Private Ins.	23	Uninsured	15	Medicare	44

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	21	161
b. Total number of all INITIAL face to face contacts.	28	149
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	1	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	6	6

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	6	5
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	9	21
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	9	20
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2787
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		98
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		38

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
24	3	1	0

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
19	6	0	1	0

IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	5	3
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	4	0
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	2
h. Crisis Office	5	22
i. Emergency Department	14	106
j. Other Hospital Location	0	10
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	6
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>28</b>	<b>149</b>

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	2	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	2	14
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	15	51
d. Admission to Crisis Stabilization Unit	1	11
e. Inpatient Hospitalization-Medical	0	6
f. Voluntary Psychiatric Hospitalization	8	42
g. Involuntary Psychiatric Hospitalization	0	4
h. Admission to Detox Unit	0	20
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>28</b>	<b>149</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
Mid-Coast Mental Health Center		Mar SFY2012
No.	Result	STANDARD
IV.35	<b>31%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	18.7 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	91%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	95%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
<b>RED BOLD ON A GOLD BACKGROUND</b>		

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STATE OF MAINE Monthly Crisis Report

Agency	Oxford County Mental Health	Contact Person	Month	Mar
Address	150 Congress Street	Karen Hodgkins	Fiscal Year	2012
	Rumford, Maine 04276	Contact Phone Number		
		207 364-3549		

I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	9	Females	8				
	Adults	Males	32	Females	20				
Age Range	Children	<5y.o.	0	5-9	2	10-14	9	15-17	6
	Adults	18-21	4	22-35	21	36-60	24	61 & Older	3
Payment Source	Children	MaineCare	14	Private Ins.	3	Uninsured	0	Medicare	0
	Adults	MaineCare	39	Private Ins.	5	Uninsured	6	Medicare	2

II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	32	109
b. Total number of all INITIAL face to face contacts.	17	52
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	2	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	8	22

III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	0
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	5	17
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	5	17
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		1385
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		28
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		21

CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :

Less than 1 hour	1 to 2 hours	2 to 4 hours	More than 4 hours
15	2	0	0

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:

Less than 3 hours	3 to 6 hours	6 to 8 hours	8 to 14 hours	More than 14 hours
12	5	0	0	0

IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	2
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	0	0
d. SNF, Nursing Home, Boarding Home	0	1
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	0	0
h. Crisis Office	3	11
i. Emergency Department	11	30
j. Other Hospital Location	0	7
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>17</b>	<b>52</b>
<b>Sec. IV Total</b>		

V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	2
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	8	21
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	1	7
d. Admission to Crisis Stabilization Unit	3	9
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	4	10
g. Involuntary Psychiatric Hospitalization	0	1
h. Admission to Detox Unit	0	2
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>17</b>	<b>52</b>
<b>Sec. V Total</b>		

AMHI CONSENT DECREE FEEDBACK REPORT		
Oxford County Mental Health		Mar SFY2012
No.	Result	STANDARD
IV.35	<b>21%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	26.6 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	94%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Mar
Address	50 Moody St Saco ME 04072	Beth Delano	Fiscal Year	2012
		Contact Phone Number		
		294-4530		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	50	Females	44				
	Adults	Males		Females					
Age Range	Children	<5y.o.	0	5-9	12	10-14	40	15-17	42
	Adults	18-21		22-35		36-60		61 & Older	
Payment Source	Children	MaineCare	55	Private Ins.	34	Uninsured	5	Medicare	0
	Adults	MaineCare		Private Ins.		Uninsured		Medicare	

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	505	505
b. Total number of all INITIAL face to face contacts.	97	97
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	7	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	26	0

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	12	12
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	35	35
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	35	35
d. SUM TOTAL time <i>in minutes</i> for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		2058
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		42
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		54

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	92	1 to 2 hours	5	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	53	3 to 6 hours	38	6 to 8 hours	5	8 to 14 hours	0	More than 14 hours	1
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	25	25
b. Family/Relative/Other Residence	4	4
c. Other Community Setting (Work, School, Police Dept., Public Place)	18	18
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	1	1
h. Crisis Office	6	6
i. Emergency Department	43	43
j. Other Hospital Location	0	0
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>97</b>	<b>97</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	1
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	23	23
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	45	45
d. Admission to Crisis Stabilization Unit	14	14
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	14	14
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>97</b>	<b>97</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Mar SFY2012
No.	Result	STANDARD
IV.35	14%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	21.2 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	99%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	100%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Sweetser	Contact Person	Month	Mar
Address	50 Moody St. Saco ME	Beth Delano	Fiscal Year	2012
		Contact Phone Number		
		294-4530		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	26	Females	28				
	Adults	Males	62	Females	67				
Age Range	Children	<5y.o.	0	5-9	3	10-14	31	15-17	20
	Adults	18-21	18	22-35	38	36-60	58	61 & Older	15
Payment Source	Children	MaineCare	24	Private Ins.	25	Uninsured	5	Medicare	0
	Adults	MaineCare	63	Private Ins.	29	Uninsured	37	Medicare	0

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	82	244
b. Total number of all INITIAL face to face contacts.	54	136
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	6	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	0	13

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	9	21
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	18	22
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	18	22
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		4925
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		73
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		38

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	48	1 to 2 hours	3	2 to 4 hours	2	More than 4 hours	1
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	38	3 to 6 hours	7	6 to 8 hours	1	8 to 14 hours	1	More than 14 hours	7
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	2	9
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	3	1
d. SNF, Nursing Home, Boarding Home	0	1
e. Residential Program (Congregate Community Residence, Apartment Program)	0	0
f. Homeless Shelter	0	0
g. Provider Office	1	3
h. Crisis Office	16	15
i. Emergency Department	32	96
j. Other Hospital Location	0	3
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	8
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>54</b>	<b>136</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	0	4
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	15	24
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	26	49
d. Admission to Crisis Stabilization Unit	5	10
e. Inpatient Hospitalization-Medical	0	3
f. Voluntary Psychiatric Hospitalization	8	36
g. Involuntary Psychiatric Hospitalization	0	9
h. Admission to Detox Unit	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>54</b>	<b>136</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Sweetser	Mar SFY2012
No.	Result	STANDARD
IV.35	<b>33%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>36.2</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>82%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>100%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	Tri-County	Contact Person	Month	Mar
Address	230 Bartlett St. Lewiston, ME, 04240	Laurie Cyr Martel	Fiscal Year	2012
		Contact Phone Number		
		207-783-4695		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	30	Females	25				
	Adults	Males	60	Females	57				
Age Range	Children	<5y.o.	4	5-9	8	10-14	29	15-17	14
	Adults	18-21	12	22-35	32	36-60	62	61 & Older	11
Payment Source	Children	MaineCare	49	Private Ins.	7	Uninsured	1	Medicare	0
	Adults	MaineCare	97	Private Ins.	11	Uninsured	7	Medicare	20

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	141	380
b. Total number of all INITIAL face to face contacts.	55	117
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	11	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	3	12

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	3	10
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	19	62
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	18	60
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		5280
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		71
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		31

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	44	1 to 2 hours	6	2 to 4 hours	4	More than 4 hours	1
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	51	3 to 6 hours	4	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	5	6
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	4	1
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	2
f. Homeless Shelter	0	0
g. Provider Office	0	4
h. Crisis Office	4	17
i. Emergency Department	42	85
j. Other Hospital Location	0	2
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>55</b>	<b>117</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	11	8
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	12	22
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	18	28
d. Admission to Crisis Stabilization Unit	2	15
e. Inpatient Hospitalization-Medical	0	2
f. Voluntary Psychiatric Hospitalization	12	33
g. Involuntary Psychiatric Hospitalization	0	9
h. Admission to Detox Unit	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>55</b>	<b>117</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	Tri-County	Mar SFY2012
No.	Result	STANDARD
IV.35	<b>36%</b>	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	<b>45.1</b> Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	<b>87%</b>	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	<b>97%</b>	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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STATE OF MAINE Monthly Crisis Report

Agency	YI	Contact Person	Month	Mar
Address	50 Lydia Lane	Veronica Ross	Fiscal Year	2012
	South Portland, Me 04106	Contact Phone Number		
		207-523-5068		

**I. Consumer Demographics (Unduplicated Counts - Face to Face)**

Gender	Children	Males	3	Females	3				
	Adults	Males	94	Females	98				
Age Range	Children	<5y.o.	0	5-9	0	10-14	3	15-17	3
	Adults	18-21	8	22-35	60	36-60	98	61 & Older	15
Payment Source	Children	MaineCare	3	Private Ins.	1	Uninsured	2	Medicare	0
	Adults	MaineCare	71	Private Ins.	20	Uninsured	55	Medicare	46

**II. Summary of All Crisis Contacts**

	CHILDREN	ADULT
a. Total number of telephone contacts.	0	1468
b. Total number of all INITIAL face to face contacts.	6	211
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	0	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	1	277

**III. Initial Crisis Contact Information**

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	0	8
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	4	75
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	3	73
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		4325
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		7
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		204

**CHILDREN ONLY: Time from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact break out :**

Less than 1 hour	6	1 to 2 hours	0	2 to 4 hours	0	More than 4 hours	0
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**CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis break out:**

Less than 3 hours	0	3 to 6 hours	0	6 to 8 hours	0	8 to 14 hours	0	More than 14 hours	0
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**IV. Site of Initial Face to Face Contacts**

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	3	42
b. Family/Relative/Other Residence	0	0
c. Other Community Setting (Work, School, Police Dept., Public Place)	2	21
d. SNF, Nursing Home, Boarding Home	0	0
e. Residential Program (Congregate Community Residence, Apartment Program)	0	9
f. Homeless Shelter	0	4
g. Provider Office	0	17
h. Crisis Office	0	108
i. Emergency Department	1	7
j. Other Hospital Location	0	3
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	0	0
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>6</b>	<b>211</b>

**V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)**

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	1	18
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	4	55
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	1	108
d. Admission to Crisis Stabilization Unit	0	24
e. Inpatient Hospitalization-Medical	0	0
f. Voluntary Psychiatric Hospitalization	0	5
g. Involuntary Psychiatric Hospitalization	0	0
h. Admission to Detox Unit	0	1
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>6</b>	<b>211</b>

AMHI CONSENT DECREE FEEDBACK REPORT		
	YI	Mar SFY2012
No.	Result	STANDARD
IV.35	2%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	20.5 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV. 37	100%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	97%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.
NOTE: IF STANDARD IS MET, THEN RESULT CELL WILL BE		
GREEN ON A TURQUOISE BACKGROUND.		
IF STANDARD IS NOT MET, THEN RESULT CELL WILL BE		
RED BOLD ON A GOLD BACKGROUND		

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# Maine Department of Health and Human Services Integrated Monthly Crisis Report

STATEWIDE  
 March 2012



Continuous Quality  
 Improvement Services  
 An Office of the  
 Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

## I. Consumer Demographics (Unduplicated Counts - Face to Face)

Gender	Children	Males	256	Females	265				
	Adults	Males	754	Females	720				
Age Range	Children	<5y.o.	6	5-9	47	10-14	258	15-17	211
	Adults	18-21	146	22-35	460	36-60	712	61 & Older	145
Payment Source	Children	MaineCare	342	Private Ins.	151	Uninsured	30	Medicare	0
	Adults	MaineCare	808	Private Ins.	266	Uninsured	267	Medicare	150

## II. Summary of All Crisis Contacts

	CHILDREN	ADULT
a. Total number of telephone contacts.	3353	14296
b. Total number of all INITIAL face to face contacts.	537	1651
c. Number in II.b. who are children/youth with MENTAL RETARDATION/AUTISM/PERVASIVE DEVELOPMENTAL DISORDER	34	
d. Number of face to face contacts that are ongoing support for crisis resolution/stabilization.	100	624

## III. Initial Crisis Contact Information

	CHILDREN	ADULT
a. Total number of INITIAL face to face contacts in which wellness plan, crisis plan, ISP or advanced directive plan previously developed with the individual was used.	53	162
b. Number of INITIAL face to face contacts who have a Community Support Worker (CI, CRS, ICM, ACT, TCM).	166	452
c. Number of INITIAL face to face contacts who have a Community Support Worker and whose worker was notified of the crisis.	161	436
d. SUM TOTAL time in minutes for all INITIAL face to face contacts in II.b. from determination of need for face to face contact or when individual was ready and able to be seen to initial face to face contact.		41135
e. Number of INITIAL face to face contacts in Emergency Department with final disposition made within 8 hours of that contact.		837
f. Number of INITIAL face to face contacts NOT in Emergency Department with final disposition made within 8 hours of that contact.		718

contact	CHILDREN	ADULT
Less than 1 hour	282	145
1 to 2 hours	145	78
2 to 4 hours	78	33
More than 4 hours	33	
	53%	27%
		15%
		6%

CHILDREN ONLY: Time between completion of initial face-to-face crisis assessment contact and final disposition/resolution of crisis :							
Less than 3 hours	400	3 to 6 hours	92	6 to 8 hours	15	8 to 14 hours	10
	74%		17%		3%		2%
							2%

## IV. Site of Initial Face to Face Contacts

	CHILDREN	ADULT
<i>Number of face to face contacts seen in :</i>		
a. Primary Residence (Home)	98	159
b. Family/Relative/Other Residence	6	9
c. Other Community Setting (Work, School, Police Dept., Public Place)	49	68
d. SNF, Nursing Home, Boarding Home	0	8
e. Residential Program (Congregate Community Residence, Apartment Program)	0	15
f. Homeless Shelter	0	6
g. Provider Office	4	39
h. Crisis Office	100	315
i. Emergency Department	278	912
j. Other Hospital Location	1	75
k. Incarcerated (Local Jail, State Prison, Juvenile Correction Facility)	1	45
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>537</b>	<b>1651</b>
<b>Sec. IV Total</b>	<b>100%</b>	<b>100%</b>

## V. Initial Crisis Resolution (Mutually Exclusive & Exhaustive)

	CHILDREN	ADULT
<i>Number of face to face contacts that resulted in:</i>		
a. Crisis stabilization with no referral for mental health/substance abuse follow-up	18	86
b. Crisis stabilization with referral to new provider for mental health/substance abuse follow-up	126	325
c. Crisis stabilization with referral back to current provider for mental health/substance abuse follow-up	210	599
d. Admission to Crisis Stabilization Unit	86	174
e. Inpatient Hospitalization-Medical	0	45
f. Voluntary Psychiatric Hospitalization	97	330
g. Involuntary Psychiatric Hospitalization	0	59
h. Admission to Detox Unit	0	33
<b>NOTE: Sum of Crisis Resolutions must equal II.b. = Total no. of all INITIAL face-to-face contacts</b>	<b>537</b>	<b>1651</b>
<b>Sec. V Total</b>	<b>100%</b>	<b>100%</b>

## ADULTS ONLY

Adult AMHI CONSENT DECREE FEEDBACK REPORT		
<u>No.</u>	<u>Result</u>	<u>STANDARD</u>
IV.35	23.6%	No more than 20-25% of face to face contacts result in Psychiatric Hospitalization.
IV.36	24.9 Average Minutes	90% of Crisis Phone Calls Requiring Face to Face Assessments are responded to within an average of 30 minutes from the end of the phone call.
IV.37	94%	90% of all Face to Face Assessments Result in Resolution for the Consumer Within 8 Hours of Initiation of the Face to Face Assessment.
IV.38	96%	90% of all Face to Face Contacts in which the client has a Community Support Worker, the Worker is notified of the crisis.