

# Kansas City Assessment and Triage Center

2600 E. 12<sup>th</sup> Street  
Kansas City, MO 64127

A decorative graphic consisting of several horizontal lines of varying lengths and colors (teal, light blue, white) extending from the right side of the page towards the center.

# Why an Assessment and Triage Center for Kansas City?

Three-year trend data (2012-2014) generated by the Missouri Hospital Association (MHA) indicated that KC area hospital EDs experienced over 8,000 visits per year from patients with substance use disorders (with no other life threatening emergent medical conditions) and over 9,000 visits per year from clients with serious mental illness.

# Why?

- Top 50 Ambulance Users in 2013 had 27-127 ambulance runs.
  - 74% of those users also had contact with Municipal Court
- Top 10 offenders arrested for public intoxication or drinking in public had an average of 10.7 arrests in 2013.
- Top 10 offenders for soliciting employment (panhandling) in 2013 had an average of 34.2 arrests.

# What is the Kansas City Assessment and Triage Center-(KC-ATC)?

An assessment and triage center for persons who are experiencing a mental health or substance use crisis that come into contact with Kansas City Missouri Police Department (KCPD) or an Approved Emergency Department (ED).

- All Voluntary
- NO WALK-IN's
- ONLY Open to KCPD and Approved Emergency Departments

# Participating Hospitals-Year One

- Research Medical Center
- Research Psychiatric Center
- Saint Luke's Hospital -- Kansas City, Barry Rd and Smithville
- Truman Medical Center, Hospital Hill
- North Kansas City Hospital
- St. Joseph Medical Center
- Liberty Hospital

# Public Private Partnership Funding Sources

<b>Entity</b>	<b>Amount</b>
Ascension Health	\$2 million annually for 10 years
City of Kansas City	\$2.5 million – renovation
Area Hospitals	\$1 million annually/2-years
Missouri Department of Mental Health	\$2 million for backdoor mental health services plus state-owned site for the urban core center

# KC-ATC OPEN



# 2 Units with a total of 16 Slots Available

- 8 Slots-Sobering Unit
  - Primary presenting issue is substance use
- 8 Slots-Stabilization Unit
  - Primary presenting issue is mental health



How long can clients  
stay?

Up to 23  
Hours

# Exclusion Criteria

- Under 18
- BP over 190
- Heart Rate over 120 or less than 45
- Blood Glucose under 60 mg/dL or over 250 mg/dL
- Acute or Traumatic Medical Needs--bleeding, unconscious, seizures
- **Combative and requiring restraint** or field sedation
- Adaptive equipment—IV, catheter, oxygen tanks
- In-ability to self-transfer

# KCPD Protocol

- Officer Drops off at Intake and completes an officer drop off form
- Officer completes MH/CIT Report and leaves a copy
- QMHP/MHT or RN will have ROI/Consent signed prior to officer leaving

**In and out in 7-10 minutes**

# Approved ED Protocol

- ED will call KC-ATC and provide client details to the RN or QMHP.
- KC-ATC will determine if there is space available.
- ED will fax a discharge summary/medical assessment summary to KC-ATC prior to transport.
- ED will determine and arrange transport method.
- If there are no slots available at the time, RN will provide a timeline for ED to call back or send a Case Manager (if available) to ED to assess/provide resources.

# What Happens While at KC-ATC?

- Immediate triage and assessment -QMHP will gather collateral information and assess suicide risk
- RN will complete triage/health assessment
- MHT will monitor clients on units at all times, conduct vitals and checks
- Case Manager will conduct CM Assessment, VI-SPDAT, Collaborative Crisis Plan and Discharge Plan
- Rapport Building with Clients
- Psychiatric Evaluation
- Bridge Medications and Case Management

# What Happens at Discharge?

- Linkage back to home/family or friends
- Linkage into or back to CMHC's
- Follow Up and Warm Hand Off's to Providers
- Bridge Case Management/Medications
- Emergency Housing until Permanent Housing is available
- Collaborative Development of a Crisis Plan

# Follow Up Funds

- There are \$2 Million in the DMH Budget for KC-ATC Follow Up Funds.
- Follow up funds can be used for core services or flex funds—residential or outpatient treatment, detox, housing, respite, RCF, start-up funds, utility support, food, clothing, dentures, medications, hygiene items, transportation, labs, dental and physical health
- Wrap around funds for those on Medicaid for Non-Medicaid services

# Target Date for Opening

- Kansas City, Missouri Police Dept (November 1, 2016)
  - Week 1-KCPD CIT Officers
  - Week 2-KCPD-CIT/East and Center Zone
  - Week 3 and 4-ALL KCPD
- ED Admissions (30 days later-December 1, 2016)



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