

Abstract

Mental illness is a leading cause of disability, early death, and chronic medical co-morbidities. Access to mental healthcare is a necessity for mentally ill individuals experiencing a mental health crisis in the community. Mobile crisis teams [MCTs] have evolved as an important service to fill the gap between mental health crisis in the community and standard of care such as hospitalization. In order to address MCT underutilization from lack of referrals the project manager [PM] designed an educational intervention on MCT services and referral process to improve the knowledge base of clinical social workers [CSWs] and enhance the MCT referral process. Findings from a comprehensive literature review revealed essential advantages for utilization of MCT services to assist mentally ill individuals. The findings demonstrated improved clinical outcomes for those receiving treatment in the community using interventions such as MCTs. MCTs reduce costs for qualified mental health services and decreased rehospitalization of mentally ill individuals experiencing a crisis. The outcome of the nursing practice change increased utilization of MCT services. Both the Interaction Model of Client Health Behavior and the evidence-based practice PEACE framework were used to guide the quality improvement [QI] implementation process. The results of this QI project demonstrated a 33% increase in the knowledge of CSWs which impacted greater utilization of MCT services. Rates of utilization as a result of the intervention demonstrated an 183% increase. In conclusion this QI nurse-led project sustained the change to improved patient-centered outcomes and reduced re-hospitalization for individuals experiencing a mental health crisis in the community.

Key words: mobile crisis teams, access to mental health services, knowledge base and referral process., PEACE framework, evidence-based nursing practice.