



NEW HAMPSHIRE  
**DHHS**  
DEPARTMENT OF  
**HEALTH & HUMAN SERVICES**

# Mission Zero and Care Traffic Control

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A Collaborative Effort to Eliminate  
Emergency Department Psychiatric Boarding

**March 7, 2024**

# What Makes ED Boarding a Challenge?



Many people wait in the ED for a long time before they can get to an inpatient bed.

This can be hard because the ED is meant for quick help, not for staying a long time.

# Understanding Mission Zero

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- Ongoing statewide, collaborative effort
- Addressing the issues that create emergency department boarding
- Creating 6 priorities to improve behavioral health care

# How Do We Address the Challenge?

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**Front Door Issues**



**Inpatient Supply &  
Coordination Issues**



**Back Door Issues**

# How Will We Get This Done?



# Expansion of Certified Community Behavioral Health Clinics (CCBHC)

Certified  
Community  
Behavioral  
Health Clinics  
(CCBHCs)



- Crisis services 24x7
- Care coordination
- Therapy
- Medication management
- Case management
- Peer support



# Community-Based Crisis Stabilization



- Immediate help
- Assessment and intervention
- Safety and support
- Connection to resources
- Family and community involvement



# Increase in Designated Receiving Facility (DRF) Beds





# Expansions in Care in Step-Down and Less Restrictive Settings

Enhance community and transitional housing services through community mental health centers



# Landlord Incentives to Expand Places to Remain Stably Housed



# Care Traffic Control (CTC)



- Established in New Hampshire Hospital admissions department
- Dedicated staff working on Involuntary Emergency Admissions and Revocation for Conditional Discharge referral requests and placement in DRFs or NHH
- CTC staffing includes psychiatric nurses, social workers, admissions specialists and business analyst roles
- Soft launch of CTC process started 1/16/24
- Full complete launch planned for April 1, 2024
- Plan to be available 24-7-365

# CTC Admissions Overview

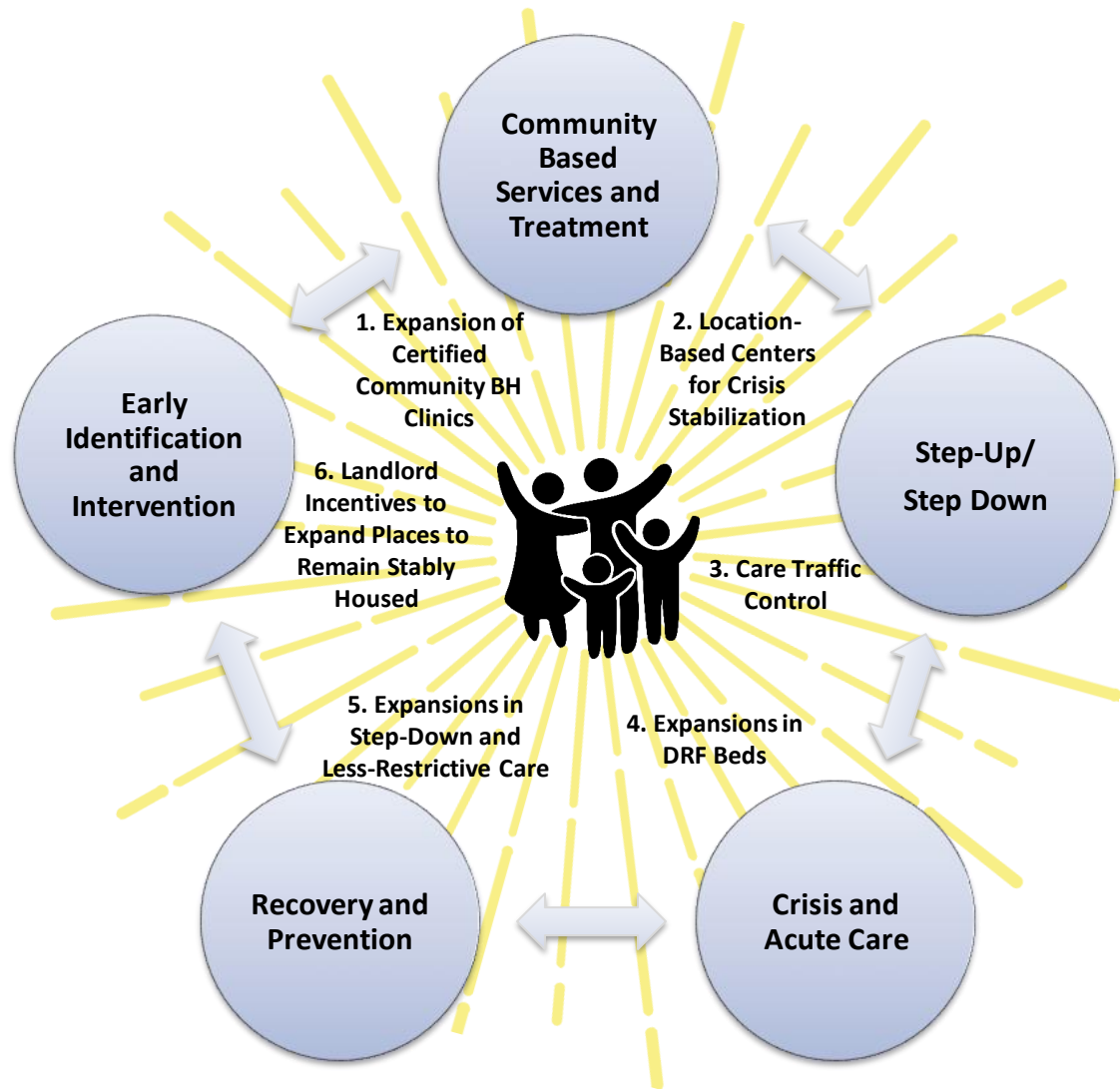
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Patients who are psychiatrically stable enough for non-NHH DRFs will be matched preferentially to DRFs as close to their home as possible.

Patients who are too medically complex for a stand-alone psychiatric facility will be matched to DRFs located within general medical hospitals if possible.

Patients who are too psychiatrically acute for other DRFs will be matched to New Hampshire Hospital.

# How will these efforts align with existing strategies?



“Adaptive challenges can only be addressed through changes in people’s priorities, beliefs, habits, and loyalties. Making progress requires going beyond any authoritative expertise to mobilize discovery.”

- Ron Heifetz, *The Practice of Adaptive Leadership: Tools and Tactics for Changing Your Organization and the World*



# Acronyms

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CCBHC: Certified Community Behavioral Health Clinic

CMHC: Community Mental Health Center

CTC: Care Traffic Control

DHHS: Department of Health & Human Services

DRF: Designated Receiving Facility

ED: Emergency Department

ES: Emergency Services Clinicians

IEA: Involuntary Emergency Admission

RCD: Revocation of Conditional Discharge



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## Questions and Discussion

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