2024 DATA BRIEF

Mobile Response & Stabilization Services

This data brief provides highlights from the 2024 Stabilization Services Annual Report and was prepared by Oregon Health & Science University's Data Evaluation and Technical Assistance (DAETA) Team. Data was collected through a collaborative partnership among the DAETA Team, Oregon Health Authority, and Stabilization Services providers. For more information, please visit our website (www.ohsu.edu/DAETA) or email the team (DAETA@ohsu.edu).

What is MRSS?

Mobile Response and Stabilization Services (MRSS) is a publicly-funded behavioral health program that provides rapid access to short-term support for youth (ages 0-20) experiencing a behavioral health crisis.

Case Management

Care Coordination

Skills Training

Med Management

Therapy

Peer Support

Respite Care

Crisis Response

The program can last up to 56 days and is intended to be an extension of the services provided by Mobile Crisis teams. Youth can also access the program through emergency departments or hospitals, crisis walk-in centers, or schools. For more information about program eligibility, visit OHA's website.

Referral Source

Emergency Department/Hospital
Mobile Crisis Team

Crisis Center Other

39% 25% 25% 11%

4,699

Mobile Crisis dispatches to youth 20 and under

1.064

Dispatches resulting in a referral to Stabilization Services

398Youth enrolled in Stabilization Services



Counties with Stabilization Services available

Who is being served?

MRSS Youth Quick Stats

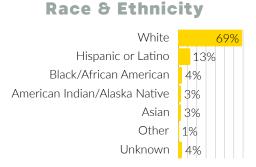
have a known trauma history

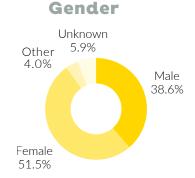
have a a history of prior mental health emergency department visits

have a history of prior suicide attempts

have a history of prior inpatient admissions

have an Intellectual or Developmental Disorder







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What services and supports are received?













Common Reasons for Discharge



Pre- and Post- Scales

The Ohio Scales are a tool that can help measure change and show Stabilization Services' impact on youths' well-being. The scales are completed by the clinician, the youth, and the guardian. Scores from enrollment and discharge show that:



67% of youth experienced decreased behavioral health symptom severity from program enrollment to discharge



70% of youth showed improvement in functional strengths from program enrollment to discharge

Admissions/Presentations While Enrolled



Visited an emergency department for mental health concerns



Used a mental health crisis center or walk-in clinic



Were admitted to a psychiatric inpatient facility

Length of Program





Repeat Mobile Crisis Encounters: Analysis of youth who had additional mobile crisis encounters within 6 months of first crisis call

There were 245 youth who were enrolled in Stabilization Services through a Mobile Crisis dispatch during 2023 or 2024. Data were analyzed to determine the percentage of youth who had additional encounters with a mobile crisis team within six months of their initial dispatch.



13.5% had a repeat MCIS encounter within 6 months

