

Final Report KernBHRS Smart911 2018-2021

Project Overview

Kern County's Smart911 Special Needs Registry is an initiative designed to improve outcomes for people experiencing a mental health emergency when they or their families call 911. The initiative has several goals: 1) to increase access to services, particularly for underserved groups; 2) to increase the quality of services; and 3) to promote interagency collaboration throughout the county. Smart911 is a product created by the company Rave Mobile Safety.

Residents of Kern County can create a Smart911 profile for free and manage their online account with a username and password. Users voluntarily share details about mental health conditions, medications, medical needs, and mobility issues that they or their family members have. Dispatchers gain access to this information only during a 911 call and at no other time. Kern BHRS and RAVE provided Smart911 trainings to public safety dispatchers and patrol. This ensured that all public safety answering points (PSAPS) and first responders knew how to access Smart911 information during a call.

Smart911 began as an Innovations project funded by the Mental Health Services Act (MHSA) in California. Innovations projects are funded provisionally for up to five years as a way to test new and emerging projects that are believed to be beneficial for the public. Evaluations of Innovations projects are used to help inform the decision to adopt initiatives as a regular part of the county's budget at the end of this trial period and to share the knowledge gleaned through the project implementation with other jurisdictions. This evaluation report provides a full summary of the data collected during the evaluation of the program, from June 2018 to October 2021.



Enrollments



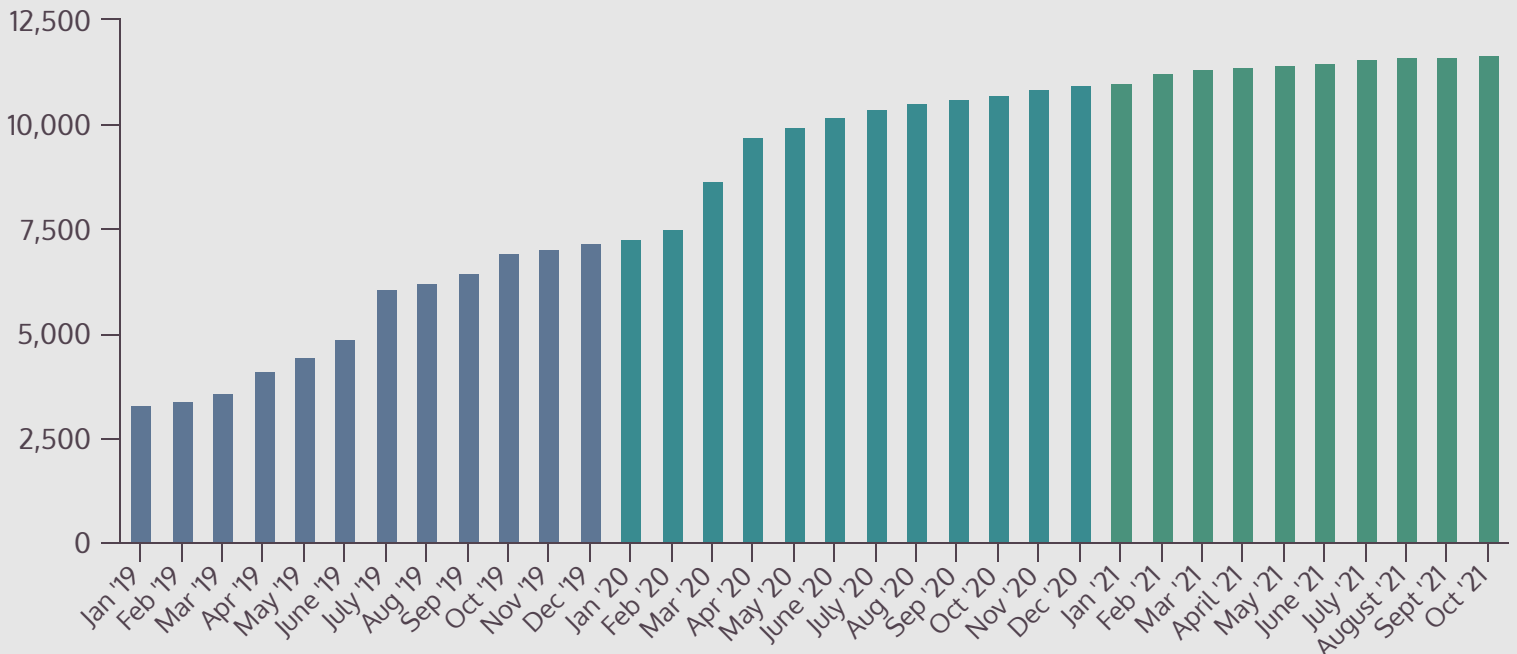
11,684

People have enrolled in Smart911 in Kern County since the beginning of the project.

Enrollment in the Smart911 service was substantial for a Kern County program. The program continued to grow every month, although enrollment slowed considerably in 2020.

Detailed analysis of monthly data reveals that promotional events for Smart911 are often followed by increases in signups. A second driver of signups may be natural disasters such as wildfires.

Individuals Enrolled in Smart911 - Cumulative Totals



Family Enrollments

A key feature of the application is that family members are able to enroll under a single Smart911 profile, combining information from multiple members of the same household under a single telephone number. This makes it easy for one member of the family to register the needs of other members.

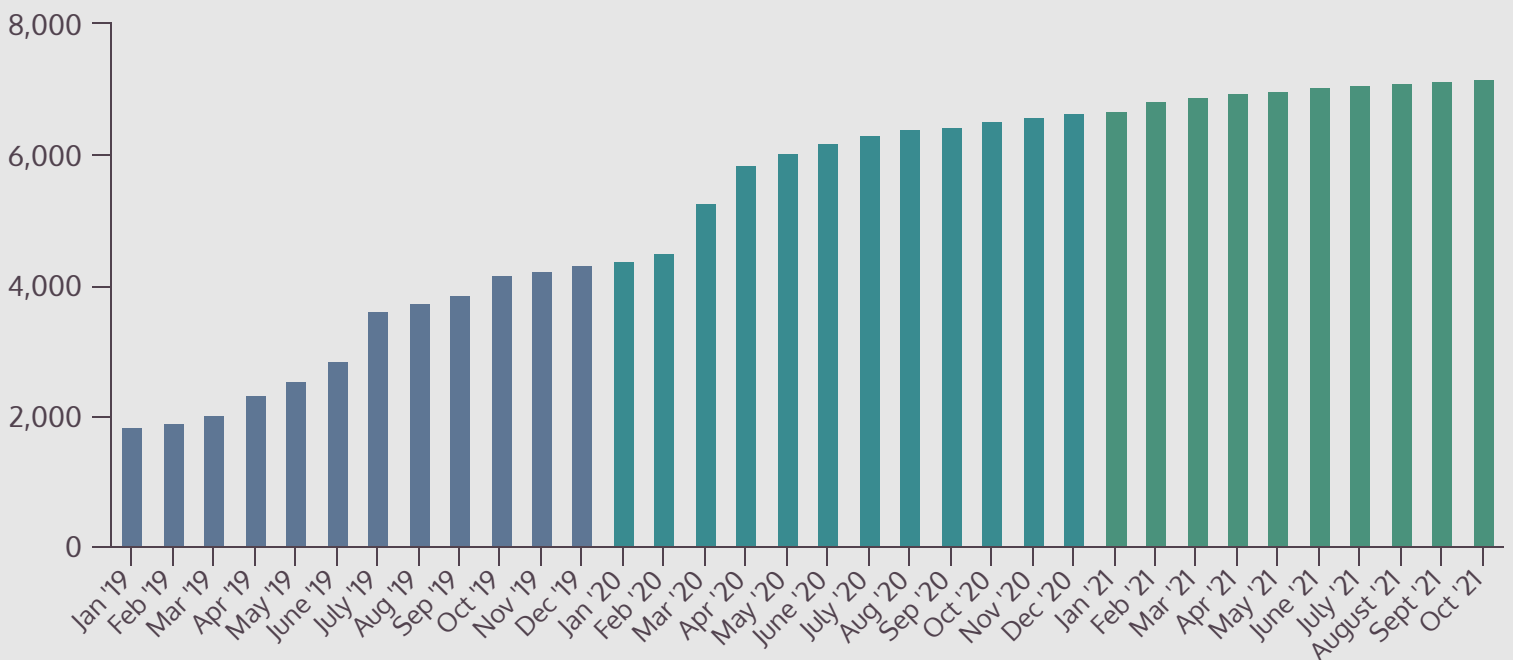
Family enrollment trends follow the same pattern as individual enrollment, with the largest gains in enrollment at the beginning of the project and slower increases in subsequent months. The average Kern profile contains information about 2 individuals.



7,160

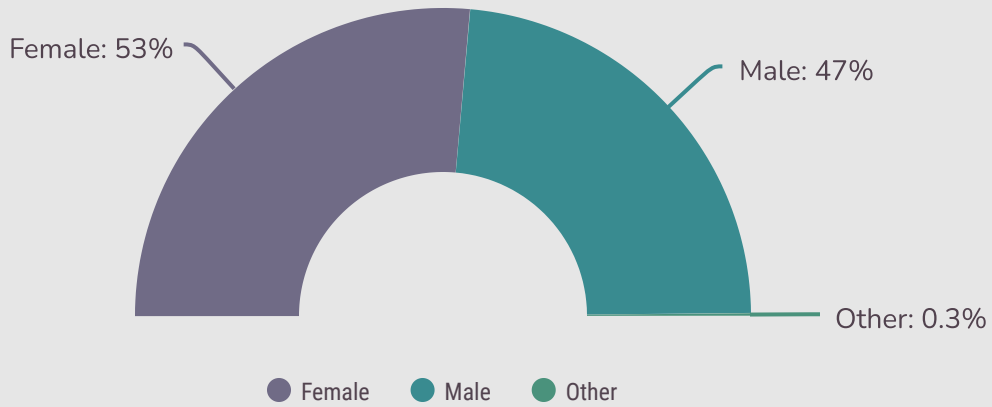
Families have enrolled in Smart911 in Kern County since the beginning of the project.

Families (Profiles) Enrolled in Smart911 - Cumulative Totals



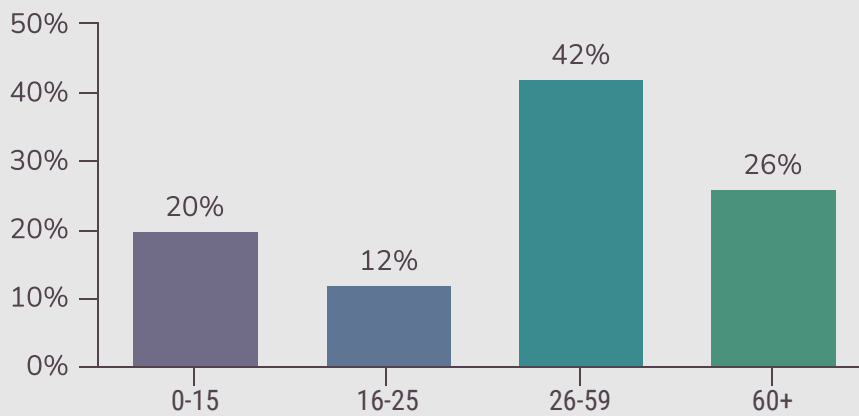
Demographics

Gender of Enrollees



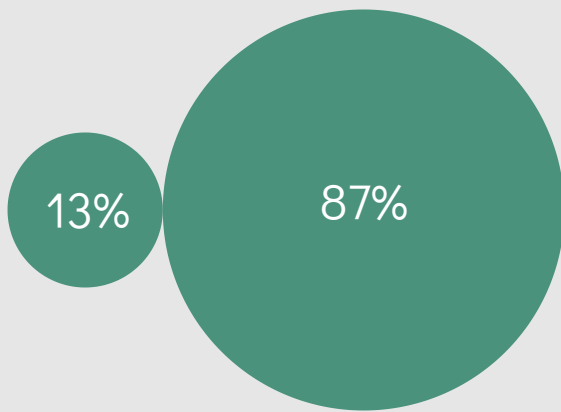
Women are more likely than men to have Smart911 accounts in Kern County. The gender distribution in the Kern population is close to 51% male, 49% female (US Census, County Population by Characteristics: 2010-2019). This difference from the population is statistically significant ($p < .001$). This means that, all things being equal, women are more likely to enroll than are men. (While the "other" category rounds to 0%, it is shown here for completeness.)

Age Distribution of Enrollees



People 25 and younger are less likely to have Smart911 accounts than their share of the population would suggest. (US Census, ACS, 2019). This difference from the population is statistically significant for both 0-15 and 16-25 age groups ($p < .001$). Meanwhile, people 60 and older, who account for 16% of the population, were much more likely to sign up than expected.

Behavioral Health

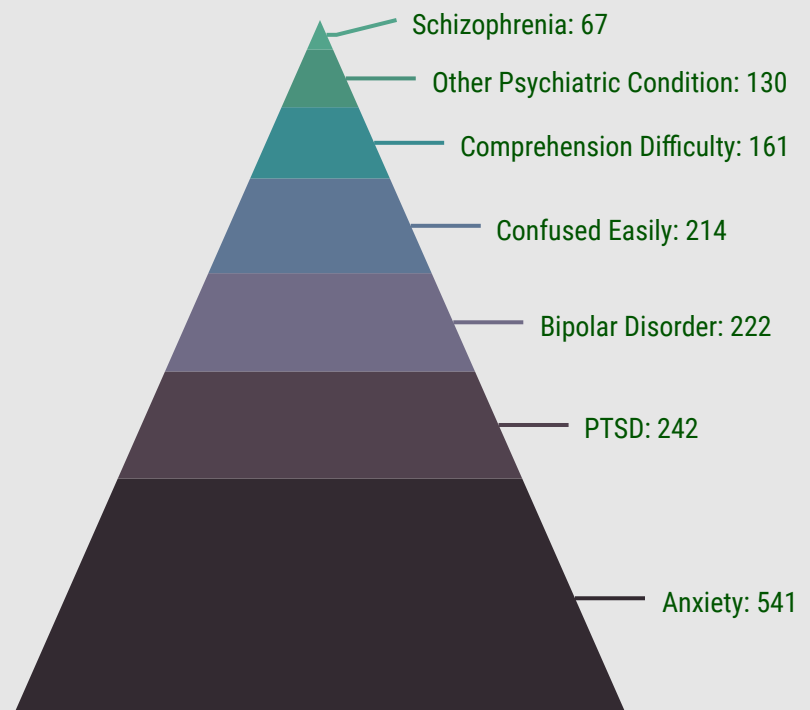


All Behavioral Health Concerns

One of the goals of the Smart911 project is to enroll individuals with a behavioral health concern. Of the 11,684 individuals enrolled in the program since the beginning of the project, 1,547 reported a behavioral health concern. That is, about **13%** of enrolled individuals list a behavioral concern on their profile. The prevalence of mental health needs, broadly defined, in California has been estimated at 16% (California Mental Health and Substance Use System Needs Assessment and Service Plan, 2013).

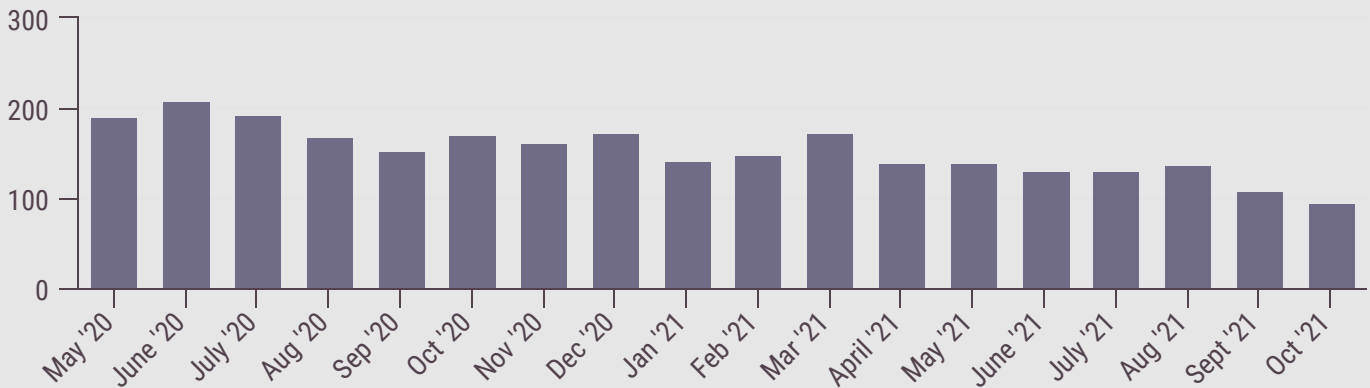
Priority Behavioral Health Concerns

Early in the evaluation, seven priority behavioral health issues were identified to be tracked in monthly enrollments. The pyramid to the right shows the raw numbers of individuals with each of these seven priority issues enrolled in Smart911. The proportion of new enrollees reporting these priority issues is historically between 4%-11% each month.



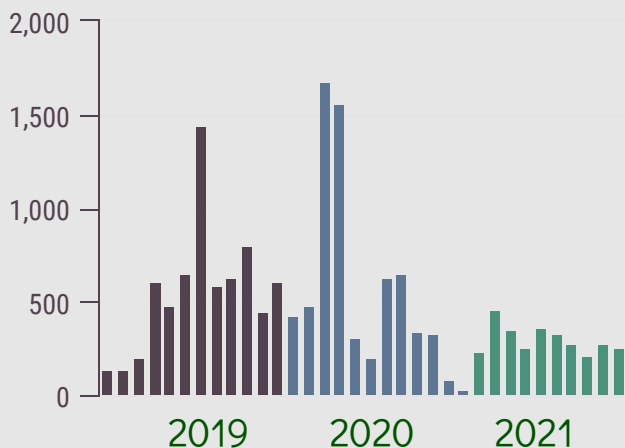
Use of Smart911

Unique "Profile Pops" per Month in the Last Year



When Smart911 subscribers call 911 from their listed number, information appears to the dispatcher and first responders. When this happens, it is called a "profile pop." Profile pops are one indicator of how heavily the Smart911 service is being used. This chart displays the number of unique callers.

Profile Updates per Month



Smart911 users can update their profiles to reflect changes in their living situation or health. Profile updates are a proxy for engagement with the platform. On average about 500 Kern residents update their Smart911 each month.

Users with Behavioral Health Concerns

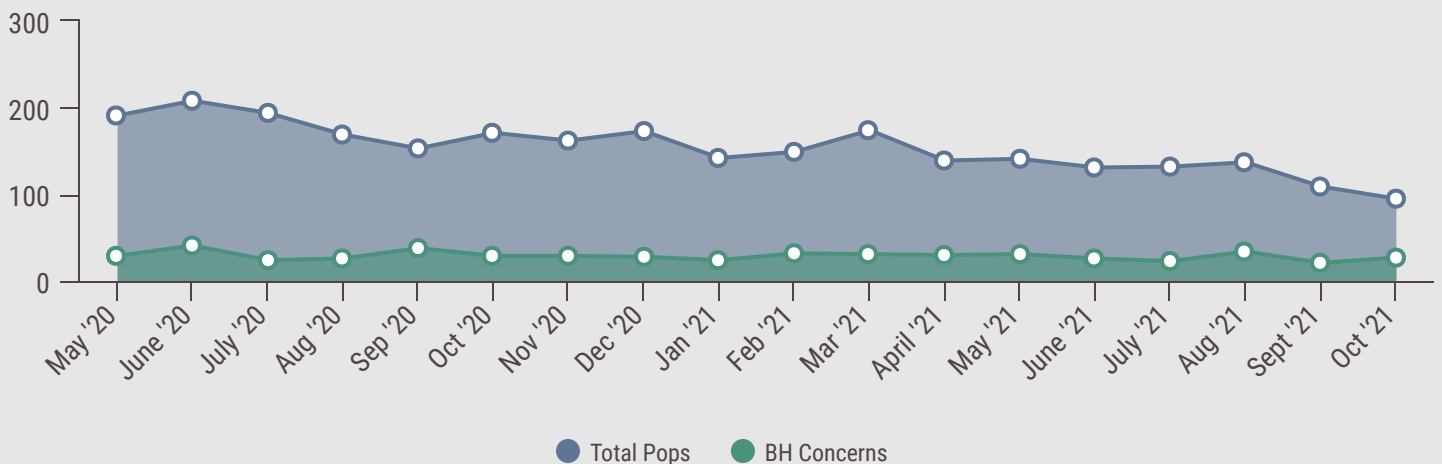
Q

How often is Smart911 used by people with behavioral health concerns?

A
19% of all subscriber calls in the last year were made by people who specified one or more priority behavioral concerns on their profile.

While people with behavioral health conditions made up 13% of users, they made 19% of calls to 911. Thus, people with behavioral health conditions were 43% more likely to call 911 than their share of users would suggest. In some months, users with behavioral health conditions made up more than 1:4 Smart911 calls.

All Profile Pops vs. BH Concern Pops



Survey Findings

Staff Pulse Survey

Conducted in Fall 2018, the Staff Pulse Survey queried KernBHRS staff about perceptions of Smart911 and any training needs. The evaluation team found that KernBHRS staff (n=218) at 22 sites were familiar with Smart911 (88%). However, most staff had not enrolled anyone in the program (82%) and a large proportion (38%) felt they would benefit from additional training.

Client & Family Survey

Conducted in Fall 2018, the Client & Family Survey queried attendees at a mental health resource fair, around half of whom receive mental health services, about Smart911 enrollment. The evaluation team found that most (81%) of those surveyed (n=134) did not have a Smart911 profile. Of those who had a profile, 96% reported they would recommend Smart911 to others. To summarize, few people with mental health needs have a Smart911 profile, but those who do have a profile are satisfied.

Academy Awards Luncheon Attendee Survey

Conducted in May 2019, the Academy Awards Luncheon Attendee Survey polled behavioral health clients, family members and friends of clients, peers and family navigators, law enforcement officers and employees, behavioral health providers, and KernBHRS staff. In this audience segment (n=178), most respondents had heard of Smart911 (72%) and about half (57%) had learned about it from KernBHRS. Nearly all respondents (99%) who had heard of Smart911 said they would recommend it to others.

Staff & Provider Survey

Conducted during Summer 2019, the staff and providers survey again queried staff perceptions of Smart911 and training needs (see Staff Pulse Survey, above). In this sample (n=373), more respondents were familiar with Smart911 than the previous year (91%) and more reported having enrolled clients in Smart911 (25%). However, an even larger proportion than the previous year (51%) felt that they would benefit from additional training to assist clients with enrolling in Smart911. To summarize, as of mid-2019, relatively few staff had ever helped enroll clients in Smart911.

Survey Findings

CIT Officer Survey

Conducted in Summer 2019, the Crisis Intervention Team (CIT) Officer Survey queried the use of Smart911 among law enforcement officers from 10 service areas. Of the officers surveyed (n=112), only 6% had used Smart911 during an emergency response.

Peer Workshop Attendee Survey

Conducted in January 2020, the Peer Workshop Attendee survey queried perceptions of Smart911 among a sample of Kern BHRS peers. All (100%) of respondents (n=19) had heard of Smart911 and most (63%) learned about it from BHRS or another behavioral health provider. 95% reported they would be comfortable with law enforcement having access to their Smart911 profile.

MHSA Community Forum Survey

Conducted in February 2021, the Community Forum Survey queried participants in a public meeting largely attended by Kern BHRS staff on their perceptions of Smart911. The majority of attendees had not created a Smart911 account: the most common reason being that they did not wish to provide personal information to law enforcement. Participants selected Facebook, radio, and billboards as the top suggestions for advertising platforms to promote the service.

Stakeholder Interviews

Year 1 Key Stakeholder Interviews


During FY18-19 structured interviews were conducted with 14 stakeholders from Kern BHRS, Kern County Sheriff's Office, and RAVE. Stakeholders were asked to share their experiences with Smart911, reflect on implementation challenges, and make suggestions for improvements. Three main themes were prominent: (1) use of Smart911 kiosks and iPads; (2) PSAP/staff engagement; and (3) gaining client trust, particularly those with mental or behavioral health needs. Namely, interviewees reported that the kiosk system for signups lacked privacy and took too long. They also reported that staff were reluctant to offer Smart911 due to limited time with clients. Finally, interviewees explained that a very large proportion of clients are wary of giving personal information to law enforcement due to privacy concerns.

Year 2 Key Stakeholder Interviews


During FY19-20, structured interviews were conducted with 12 stakeholders from Kern BHRS and RAVE. Once again, stakeholders were asked to share their experiences with Smart911, reflect on implementation challenges, and make suggestions for improvements. Some of the themes that arose in the prior year's interviews emerged again: staff are reluctant to enroll clients and clients are reluctant to sign up. Interviewees proposed that additional dedicated staff would be useful to promote signups of Kern BHRS clients, but that existing staff limitations did not allow personnel to be easily retasked for this purpose. Interview participants reported that natural disasters during FY19-20, including fires and an earthquake, drove enrollment for Kern residents, regardless of behavioral health concerns.

Findings and Recommendations


1. More than 11,000 Kern residents now use Smart911. Enrollment in the program continues to grow, with noticeable increases after disasters and publicity events. Growth and user engagement slowed noticeably in 2021.

 Recommendation: In the future, programs like Smart911 should explore the possibility of integrating opt-in record sharing in institutional settings as a part of standard intake procedure, allowing records to be copied automatically into the system with less patient involvement.

2. Most signups and calls are from people who do not report a behavioral health concern. However, individuals reporting behavioral health concerns are more likely to call 911 than are people without behavioral health concerns.

 Recommendation: Kern County may wish to continue implementation of programs like Smart911, since such programs fill a gap in existing services recognized by individuals with mental and behavioral health challenges.

3. Some parts of the program have met greater success than others. Those who sign up for the service tend to be very satisfied. However, enrolling individuals with behavioral health concerns has proven more challenging than expected, due to low staff buy-in, a need for additional provider training, and low client trust.

 Recommendation: Kern County agencies with higher capacity to operate and promote the program should consider incorporating Smart911 into the services they offer. Such a transition - to the Kern County Sheriff's Office - is currently in progress.