

An Evaluation of the Grand Response Access Network on Demand Model (GRAND Model): Evidence of Effective Outcomes Summary Brief, June 2022

By:

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This is a summary brief of an evaluation of GRAND Mental Health's (GRAND) Grand Response Access Network on Demand Model (GRAND Model), conducted by the National Association of State Mental Health Program Directors Research Institute (NRI). The purpose was to establish the evidence that the GRAND Model effectively produces the following outcomes: reductions in inpatient hospitalizations, increased service utilization among adult GRAND clients, cost savings from decreased inpatient hospitalizations, and cost savings to law enforcement from decreased transportation time. The methodology for the evaluation consisted of documents review, interviews with GRAND leadership and staff, and secondary data analysis and verification.

GRAND is a 501c(3) non-profit organization that has provided integrated mental health, physical health, and substance abuse services to adults and children in Northeast and Northcentral Oklahoma since 1979. In 2015, GRAND leadership recognized the need for a lower level of care for people experiencing a mental health crisis. To meet this goal, the GRAND Model was developed and it consists of three components, 1) Urgent Recovery Centers (URC) that provide 24/7 crisis stabilization services; 2) iPads with the GRAND Model integrated support access app that are distributed to GRAND patients, first responders, hospitals, and other community partners in order to provide instant access to a GRAND therapist anytime, anywhere; and 3) all iPad and crisis calls are answered by fully trained, engaged, and awake clinicians who are on-site at a URC. These three service delivery elements must be present to replicate or reproduce the GRAND Model's outcomes.

Findings showed that when compared to the baseline year 2015 --

- Inpatient hospitalizations among GRAND adult clients at any Oklahoma psychiatric hospital fell from 959 (2015) to 66 (2021), a reduction of 93.1%.
- Inpatient hospitalizations among GRAND adult client at Wagoner Hospital fell from 841 (2015) to 0 (2021), a reduction of 100% (Figure 1).
- Inpatient bed days among GRAND adult clients at Wagoner Hospital fell from 1,115 (2015) to 0 (2021), a reduction of 100%.
- From 2016-2021, decreases in inpatient hospitalizations saved more than \$62 million dollars (Table 2).
- The number of adult clients served increased by 163.5% from 4,326 (2015) to 11,401 (2021) (Figure 1).
- Law enforcement in seven counties saved 576 days in time spent transporting clients (Table 2).
- Law enforcement in seven counties saved over \$718,000 from reductions in time and distance and spent transporting clients (Table 2).

The evidence from this evaluation unequivocally shows that the GRAND Model has been exceedingly effective at reducing inpatient hospitalizations, increasing outpatient service utilization, and producing cost savings for GRAND and law enforcement. Additionally, as GRAND serves a predominantly rural population, the GRAND Model show strong evidence that it works for the unique needs of rural communities. The outcomes seen by GRAND are likely unattainable without the same pieces in place – multiple URCs, mental health devices for

clients and community partners, and awake crisis clinicians who answer the calls onsite from the URC. Together, these elements have produced unbridled access to mental health care by creating multiple levels of care that provide the least restrictive level of care possible that is best for the individual.

Figure 1. Number of Unique Adults Served by GRAND and Number of GRAND Adult Clients who Went Inpatient at Wagoner Hospital, 2015 - 2021

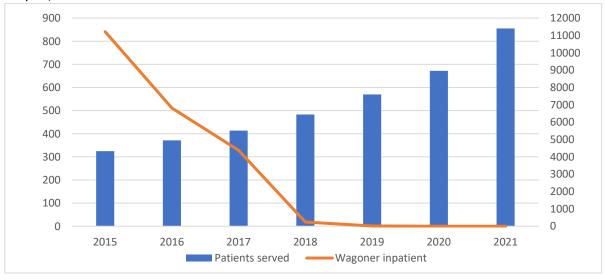


Table 1. Estimated Cost Savings from Reducing Inpatient Hospitalizations Among GRAND Adult Clients, 2015 - 2021

Year	Estimated number who did not	Estimated cost savings	Dollar value and inflation	
	go inpatient		rate	
2015	0		\$1.03 (.12%)	
2016	433	\$3,088,971.58	\$1.05 (1.26%)	
2017	735	\$5,353,145.77	\$1.07 (2.13%)	
2018	1,218	\$9,067,379.14	\$1.09 (2.49%)	
2019	1,499	\$11,340,797.83	\$1.11 (1.76%)	
2020	1,856	\$14,193,384.33	\$1.13 (1.23%)	
2021	2,442	\$19,445,639.46	\$1.18 (4.70%)	
Total estimated cost savings = \$ 62,489,318.10				

Table 2. Cumulative Number of Minutes and Miles Saved by Law Enforcement Transporting Clients to a URC in Seven Counties, 2016 – January 2022

County	Minutes saved	Miles saved
Craig	315,240	278,462
Delaware	114,880	119,794
Nowata	18,576.8	17,880.8
Mayes	48,082	41,450
Ottawa	187,712	169,946.4
Rogers	53,508	51,861.6
Washington	91,920	125,624
Total	829,918.8	805,018.8

For the full report, please go to www.nri-inc.org or contact Jennifer Bronson at jbronson@nri-inc.org.