



Mobile Response and Stabilization Services (MRSS)

What is Mobile Response and Stabilization Services

Mobile Response and Stabilization Services (MRSS) is the national best practice crisis care model for youth and families. MRSS teams provide voluntary, community-based behavioral health mobile response and stabilization services. Teams respond in person when a young person, their caregiver or a third-party requests support. This is typically done through a regional crisis line, provider crisis line or in the future 988 in Washington.

Teams provide in-person outreach to the location of the youth. MRSS teams respond to homes, schools, emergency departments, crisis receiving centers, existing behavioral health provider agencies, primary care providers, youth shelters, or any other community location. Teams respond with a clinician and parent and/or youth peer and provide developmentally appropriate de-escalation and crisis intervention.

Who We Serve

- ▶ Youth, young people up to age 20, and their families

Why This Matters

- ▶ These services improve safety, provide timely intervention, and help people remain in their home or community.
- ▶ Facility-based care is reserved for the most acute needs ensuring availability when necessary.
- ▶ Support is recovery-focused, strength-based, family-driven and delivered to you.

In person outreach and support for youth and families

Our Vision

A crisis system that ensures:

-  **Someone to Contact** – MRSS requires a single point of access that is not 911
-  **Someone to Respond** – In-person mobile response
-  **A Safe Place for Help** – By providing in-home and community-based stabilization services
-  **Referrals and warm handoffs** to natural supports and the right level of ongoing care

Goals

- ▶ Based on national MRSS best practices
- ▶ 24/7 access to crisis response and de-escalation
- ▶ Teams respond without requiring prior authorization or formal referral, ensuring timely, responsive support wherever the youth or young person is
- ▶ The youth and their caregivers determine what constitutes a crisis and when help is needed
- ▶ Developmentally appropriate, trauma-informed response and de-escalation
- ▶ Work with youth, young adult and family to determine strengths and needs
- ▶ In person risk assessment and safety planning
- ▶ Help caregivers to keep young people safe at home, schools, and communities
- ▶ Works with family to identify natural and community support
- ▶ Teams include a peer and clinician
- ▶ In-home Stabilization phase available for up to 8 weeks
- ▶ Reduces emergency department use and unnecessary law enforcement contact for behavioral health needs
- ▶ Reduces family court or child welfare involvement, and facility based out-of-home placements

Contact Us

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