



KNOX COUNTY
TENNESSEE

“State of Mental Health Report”

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Our Process

Key Informant Survey

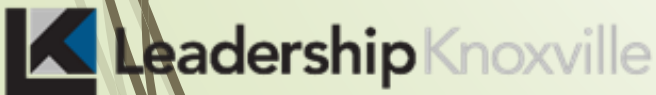
Key Informant / Partner Interviews

Data Collection & Analysis

Indicators



Project Partners



OFFICE of the DISTRICT
ATTORNEY GENERAL
6th Judicial District • Charmé P. Allen

Prevalence

1 in 5 residents
became

2 in 5 in Knox
County¹

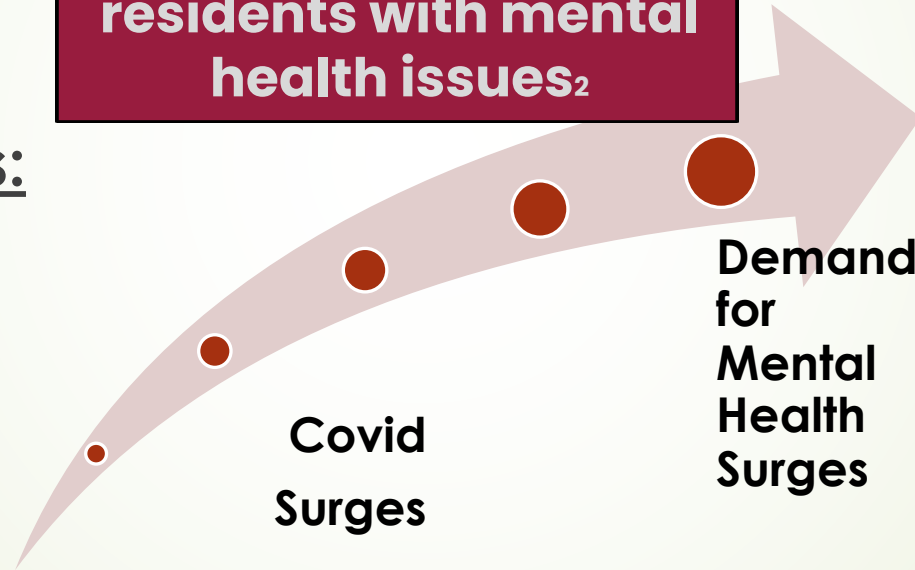


Surging Mental Health Needs

204,968
Knox County
residents with mental
health issues₂

Duration of Symptoms:

- ➔ 2 weeks or more
- ➔ Immediate if life threatening



Onset & Early Intervention



➤ 50% by age 14₃

➤ 75% by age 24₄

➤ 10 – 12 years Treatment Delay₅



Assets:

- Mental Health 101
- Screen NOW!
- KCS / McNabb clinicians at 33 schools₆



Knox County PUBLIC Sector Access

➔ Public Sector = Medicaid, Medicare, Uninsured Resident



Federally Designated



Mental Health Professional Shortage Area⁷



Clinical Staff Turnover has DOUBLED⁸



Public Sector Access



Knox County PRIVATE Sector Access

- employer provided insurance, self insured employers, self-pay individuals

of Mental Health Providers,

psychiatrists, nurses, social workers, counselors, psychologists

Davidson County 2,277

Knox County 1,772

Shelby County 1,339

Hamilton County 780

Less than 10% of private practicing professionals in Knox County are taking new patients¹¹

of Mental Health Providers

per 100,000 residents¹⁰

Knox County 370 per 100k

Davidson County 318 per 100k

Hamilton County 213 per 100k

Shelby County 144 per 100k

MHA developed a list of Knox County professionals taking new patients¹²

Special Population Access

Diversity of Professionals



- Few black mental health professionals¹³



- Few Spanish speaking mental health professionals



- Persons of color have limited access to culturally & linguistically appropriate care¹⁴



- Hispanic, Black, and multiracial populations have experienced the highest rates of symptoms since the pandemic began¹⁵



Child Psychiatry Desert

- Knox County is a “*Child Psychiatry Desert*” per parent key informant.¹⁶ This child has to see psychiatrist in Nashville due to lack of access¹⁷

- KCS contracted students to social worker ratio 1 SW per middle & high school¹⁸

- No contract social workers at KCS elementary schools¹⁹



Perfect Storm

**Demand for Mental
Health Care**

Public & Private Access



National Indicators

Adult Workers
Struggling with their Mental Health₂₀

➡ **51%**

133, 104 Knox County
based workers₂₁



Healthcare Workers
Struggling with their Mental Health₂₂

➡ **71%**

27,633 Knox County based
health care workers

Knox County Poor Mental Health Days Dashboard

Cost of Poor Mental Health Days

per month²⁶

White Collar	\$94,425,400 per month
Blue Collar	\$25,747,517 per month
Total Cost	\$121,172,917 per month

Estimated
50%
productivity
decline

= \$60,586,458

Cost of Poor Mental Health Days

per year²⁷

Davidson County	\$2.8B – 4.6B
Shelby County	\$2.4B – 4.2B
Knox County	\$1.58B – 2.75B
Hamilton County	\$1.24B – 2B

Adults Poor Mental Health Days

per month

Hamilton County	4.6 days/month
Knox County	4.3 days/month
Davidson County	4.2 days/month
Shelby County	4.2 days/month



Adults Poor Mental Health Days

per year²⁸

Hamilton County	55.2 days/year
Knox County	51.6 days/year
Davidson County	50.4 days/year
Shelby County	50 days/year



Knox County Suicide Dashboard

Suicide Attempts

Rate of Intentional self Harm with IP / ER Admission per 100k₂₈

Davidson County	162.2
Knox County	140.9
Hamilton County	133.6
Shelby County	109.7

Suicide Attempts

per 100k population₂₉

Knox County	17 per 100k
Hamilton County	13.5 per 100k
Davidson County	12.8 per 100k
Shelby County	11.4 per 100k

Suicides

Economic Impact of Suicide ATTEMPTS₃₀

Davidson County	\$40.933M
Shelby County	36.006M
Knox County	23.782M

-\$1.32953M Economic Impact of each Suicide death₃₁

Amount removed from the economy

Shelby County	\$143,589,240
Davidson County	\$118,328,179
Knox County	\$107,691,930
Hamilton County	\$66,476,500

Crisis Services Assets

Mobile Crisis, 911 & 988



Mobile Crisis³²

- 6328 resident triaged calls
- 2543 in-person assessment visits



911 Center³³

- 2941 total mental health, suicide threat, attempt or suicide Calls



988 Suicide call line³⁴

- to be activated in 2022

Children's / Family Crisis Walk In Center³⁵

- opened in 2021

Crisis Stabilization Units³⁶

- 307 residents served
- Immediate access to care
- Hospital admissions avoided



- Children's Crisis Stabilization Unit
- Opening 2022 (McNabb & Children's Hospital)



Hospital Indicators

Hospitals



- Lakeshore Closed 2011-2012



- Tennova Closed



- NEW HOSPITAL Opening April 2022 - *Center for Behavioral Medicine – Knoxville*³⁷



- NEW HOSPITAL Opening May 2022 *East Tennessee Behavioral Health*³⁸

Emergency Room Use

- 8,500 patients sought care in Knox County emergency departments³⁹



- Direct result of inadequate access

- Urgent care needed vs. emergency care

- COST - \$22.7575M per year



- State hospital admissions rose 31% from 2017

- Private hospital admissions rose 25.% from 2017



Criminal Justice - Mental Health Assets

BHUCC – Behavioral Health Urgent Care Center

Diverted from jail ⁴³	97%
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Did not return to BHUUC ⁴⁴	78%
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9
Offenses

public intoxication, public
indecenty, panhandling,
blocking a sidewalk /
doorway, criminal
trespassing, disorderly
conduct, resisting arrest,
abuse of 911, under-age
consumption

Service Recipients brought by KPD Officers	98%
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Service Recipients brought by KCSO Deputies	2%
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460 people served⁴²

Co-Responder Unit

less than 24/7 coverage.

KPD & McNabb Center ⁴⁵	262 persons served ⁴⁷
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Diversion Rate	98% ⁴⁸
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256 / 262 persons⁴⁹

Should Knox County
have one too?

Specialty Court Indicator

Mental Health Court

Davidson County	Yes
Hamilton County	Yes
Shelby County	Yes
Knox County	No

“Knox County lacks mental health resources available to the courts”

- DAG Charme Allen⁵¹



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Knox Bar Association wants the County to establish Mental Health & Homeless specialty courts



KCSO / JAIL / Issues & Indicators

- 2221 Transports to hospitals last year
- Including 333 to Moccasin Bend
- 26.43% (88) Were refused admission at Moccasin Bend

State Transport Fund

- > Offsets transport costs but funding is neither consistent or adequate

- AVENUE B PROGRAM successfully transfers directly to the BHUCC for intensive FACT program

Discharge Planning

- Jail releases to street after hours increases recidivism
- Releases should be coordinated to Homeless Shelter or Mental Health Center to improve access to those services

- TDOC – Day Reporting Center
- Potential program to replicate to reduce recidivism

Homeless Services Dashboard

Causes of Homelessness

- 28% - No affordable housing
- 21% - Mental Illness
- 16% - Eviction
- 10% - Other
- 9% - Non-violent Family Confrontation
- 8% - Loss of job

Demographics

- 20% are disabled, mostly due to mental health and substance use disorders
- Over 2/3 are uninsured or use TennCare, Medicare, or other state insurance
- 30% of the homeless are Black, compared to 8.9% of Knox County overall



- The rate of chronic, senior and unsheltered homelessness is increasing
- Rate of homeless veterans is decreasing
- Emergency shelters were at 93% capacity (Dec, 2021)
- Rapid Re-Housing Program - Time to Housing reduced by 50%
- Shelter recidivism less than 5%



Recommendations

Access

- Improve public sector access by developing “Talent Recruitment Pool” to recruit a skilled workforce to Knox County by becoming the first metro area in the US to fund a Behavioral Health Workforce “pool” for public sector professionals (recruitment, sign on, retention, other incentives for psychiatrists, nurses, social workers, counselors, and peer specialists)
- Increase the number of Black and Spanish speaking mental health professionals in Knox County to improve access to care for persons of color
- Secure State or other funding for the proposed Psychiatric Emergency Room to relieve the existing emergency rooms of 8,500, mostly non-urgent mental health visits annually and improve residents access to care
- Improve youth access to care by partnering with KCS and providers to improve the ratio of the number of students per social worker / counselor in Knox County Schools (long range target is 250 students per social worker)
- Partner with MHA to create & update provider list (2x per year) of mental health professionals who are taking new patients annually

Recommendations

Evaluate & Improve

- Partner with stakeholders (MHA, Chamber & Employers) to evaluate and improve access to employer funded private sector healthcare
- Evaluate the utilization of the Behavioral Health Urgent Care Center (BHUCC) to identify how Knox County residents can take better advantage of this important resource
- Evaluate potential low-level offenses (charges) to add additional charges to the 9 low-level BHUCC diversion charge list; i.e. possession, non-spousal/partner domestic violence
- Evaluate and improve jail release planning coordination to reduce jail recidivism by coordinating releases with homeless services and mental health providers to eliminate release/drop offs after hours when those services are closed
- Improve jail based mental health services by increasing the jail health budget for screening, treatment, medications
- Evaluate ways to strengthen existing services and collaboration between services ahead implementing 988 (Crisis Services, 911, 988)
- Evaluate need to develop a county-level suicide prevention response
- Increase the highly effective Co-Response Team coverage to fully cover 24/7 operations in the City of Knoxville
- Evaluate the need for a similar Co-Responder Team in Knox County with KCSO

Recommendations

Policy - Legislative

- Work with legislative delegation to craft legislation tying TennCare Behavioral Health provider rates automatically to increases in medical inflation to ensure compensation rates are competitive
- Work with legislative delegation, chamber and employers to pass Mental Health Parity legislation requiring all health insurers to have an adequate provider network requiring 75% of paneled providers to take new patients (increase # providers on panels) to insure improved employee access to care

Policy – County level

- Suspend (NOT TERMINATE) TennCare enrollee benefits of persons booked into the jail and reinstate TennCare benefits prior to release to decrease jail recidivism
- Release persons from jail directly to homeless shelters or mental health facility ONLY during operating hours

Awareness

- Partner with stakeholders (MHA, Chamber, Employers) to make early intervention screenings (free MHA tool) and mental health awareness activities more widely available
- Partner with MHA or other stakeholders to hire staff to promote behavioral health careers in middle & high schools and the community to assist with improving recruitment of persons of color to behavioral health professions

Project Funding

- Extend and annualize the Knox County Mental Health project with the MHA for five years with the MHA to work with stakeholder workgroups to formalize goals, action steps, and funding requirements needed to implement the Knox County Project recommendations.

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About the Mental Health Association of East Tennessee

The Mental Health Association of East Tennessee was established in 1948 to be an independent voice to promote mental health awareness and recovery in our community. Much of our work in over 70 years has centered on building a mental health system which is responsive to the needs of its citizens. These efforts have centered on establishing community-based services and supports for adults and youth.

The community has frequently called upon the Mental Health Association of East Tennessee to invoke its voice and leadership to address crisis services, criminal justice, community policing, mental health in schools, mental health in the workplace, suicide prevention and other areas.



Mental Health 101 is one of the largest mental health education in schools' programs in the country. Established in Fall of 2000 at just two Knox County schools, the program grew before the pandemic to serve more than 32,000 students annually at 125 middle and high schools across Tennessee. Mental Health 101 effectively changes what youth know about mental health and serves as motivation for youth to enter treatment.



The Peer Recovery Call Center is a peer run call center. Persons with lived experience, who have a mental health diagnosis and are in long term recovery are employed by the Mental Health Association. Certified Peer Recovery Specialists assist each caller to find treatment and support services which best suit their specific needs. Moving forward the program provides ongoing peer support to insure engagement in treatment and progress in their treatment and recovery



Free and anonymous mental health screenings help persons identify their mental health treatment needs and motivate screeners to seek help. The Mental Health Association of East Tennessee screened 10,712 persons in 2020.