

Receiving Centers

A Crucial Part of Utah's Behavioral Healthcare System

What is a Receiving Center?

A receiving center is a 24/7 community center staffed by therapists, nursing staff, and peer counselors to provide treatment for individuals in mental health or substance use crisis. Individuals are assessed, stabilized, and observed in a recliner for up to 23 hours. Most individuals are stabilized within these 23 hours and are then linked with a treatment program upon discharge. If an individual needs more than 23 hours to stabilize, there are residential beds nearby for them to continue to receive treatment. Caseworkers track all clients for four months and work to engage them in treatment and remove any barriers that prevent them from treatment.

Who can use Receiving Centers?

An individual may walk in, be brought by friends or family, or be dropped off by law enforcement. Each receiving center is non-refusal and will take in anyone, no matter their crisis. If an individual is suffering from a physical injury or is at risk for a medical injury (such as an overdose), receiving center staff will coordinate with local emergency rooms to stabilize the patient's health, and will provide them with behavioral health treatment afterward.

How does a Receiving Center help individuals avoid incarceration?

A receiving center functions as a pre-booking jail diversion where individuals can access treatment in lieu of being cited or sent to jail. If they elect this option, individuals must engage in treatment for 60 days or else charges may be filed by the city's prosecuting attorneys.

How does law enforcement feel about Receiving Centers?

Law enforcement is extremely supportive and in favor of receiving centers. It often takes as little as five minutes for the responding officer to complete paperwork and transfer the individual into the care of the receiving center workers, which is much quicker than booking someone in jail or waiting with them in an emergency room.

Where are Receiving Centers located and who are they run by?

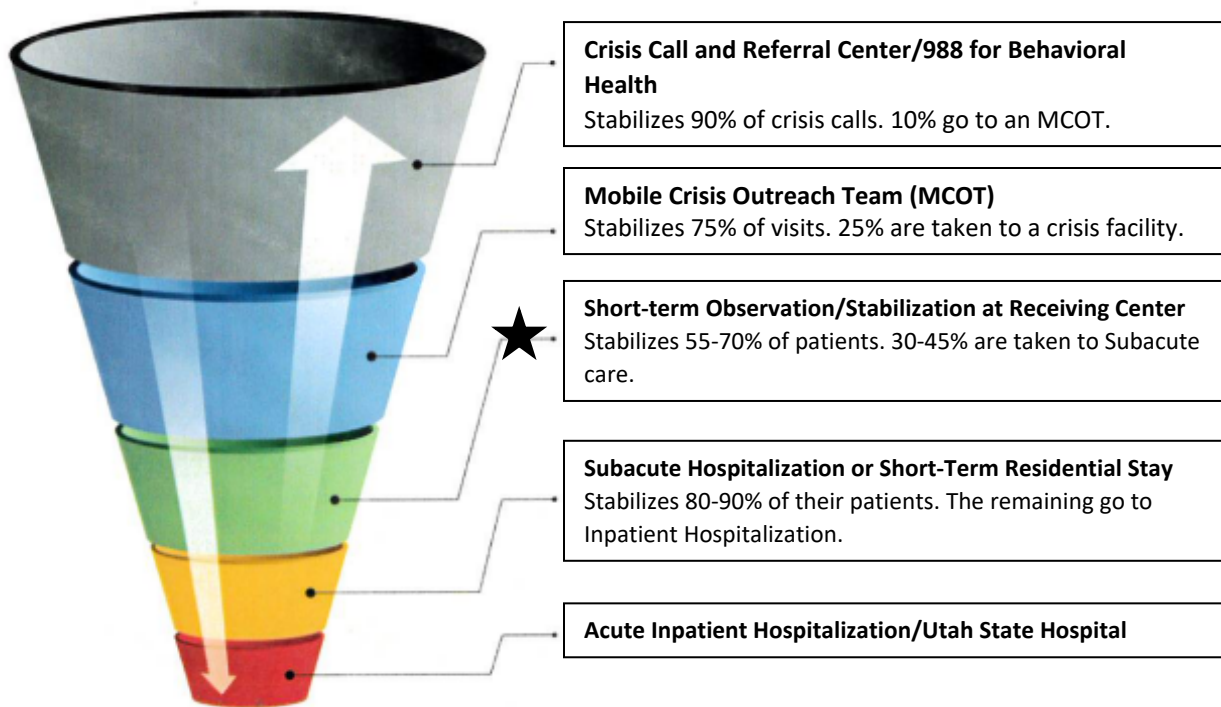
Local Mental Health/Substance Abuse Authorities (LMHAs) run the Receiving Centers. Currently the following LMHAs operate receiving centers and serve the following populations:

- Davis Behavioral Health – Serving Davis County.
- Wasatch Behavioral Health – Serving Utah and Wasatch Counties.
- Weber Human Services at the IHC Access Center at McKay Dee – Serving Weber and Morgan Counties.
- Southwest Behavioral Health (just broke ground) – Will serve Beaver, Garfield, Iron, Kane, and Washington Counties.
- Salt Lake County Behavioral Health (just cleared ground) – Will serve Salt Lake County.
- Four Corners Behavioral Health (just received funding) – Will serve Carbon, Emery, and Grand Counties.

The goal is to have receiving centers within driving distance of all Utah residents.

Where do Receiving Centers fit within Utah's Coordinated Crisis System?

Utah's Coordinated Crisis System



What do Receiving Centers cost?

The cost to operate a receiving center depends on the number of clients served, the FTEs necessary, and the specific challenges a county or region faces. In general, it costs about \$1.5m for a rural area to operate a receiving center for a year, \$3m for an urban receiving center, and \$5m for an ultra-urban receiving center. One-time building costs are about double the on-going costs, respectively.

Besides using state funding, receiving centers also utilize county funding, donations, and Medicaid and insurance reimbursements to offset costs.

What are the other benefits of Receiving Centers?

Receiving Centers are an essential part of the continuum of care. Not only do they save law enforcement and hospitals money, but they provide better outcomes for clients, who are able to receive help they need from true behavioral health professionals. Receiving centers also prevent clients from experiencing further trauma by helping them avoid arrest and incarceration. Additionally, it saves in-patient costs in the crisis system by diverting clients from a lengthy stay in in-patient care to a 23-hour maximum visit in which the majority of patients are stabilized.