

November 2015 Utilization Report

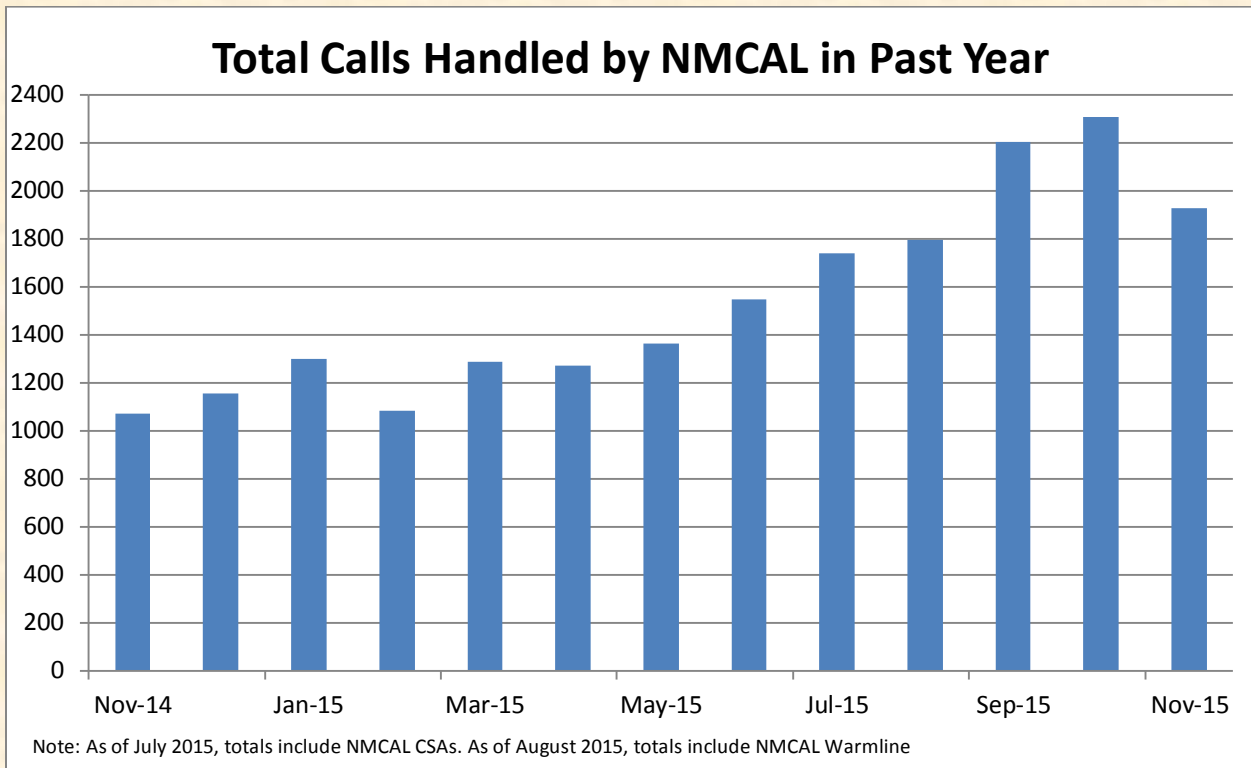
- New Mexico Crisis and Access Line (pgs 1-7)
- Peer-to-Peer Warmline (pgs 8-9)

In November 2015, NMCAL handled 1126 calls. This includes 134 calls connected to us by the National Suicide Prevention Lifeline. Under separate contracts, an additional 269 calls were answered for CSA crisis lines in New Mexico.

November 2015: Calls Answered by Type	
NMCAL Calls	1126
Inbound Clinical Calls	894
- Calling about Self	773
- Calling about a Child	16
- Calling about another Adult	105
Outbound Calls	99
Information/Referral Calls	58
Seeking information about NMCAL	22
Administrative	5
Other	48
Calls Answered For CSA Crisis Lines	269
Warmline Calls	534
TOTAL CALLS ANSWERED FOR NEW MEXICO	1929

November 2015: NMCAL Utilization	
Total Calls Handled	1126
Service Level (answered under 30 sec)	93.4%
Abandonment Rate	2.2%
Average Speed of Answer	12 sec
Average Call Length (all calls)	10.9 min
Average Call Length (Clinical calls)	16.7 min





Callers are asked for their county of residence; these responses cannot be independently verified. This data is not necessarily predictive of an overall need for services in each county, as small numbers of callers contact NMCAL quite frequently.

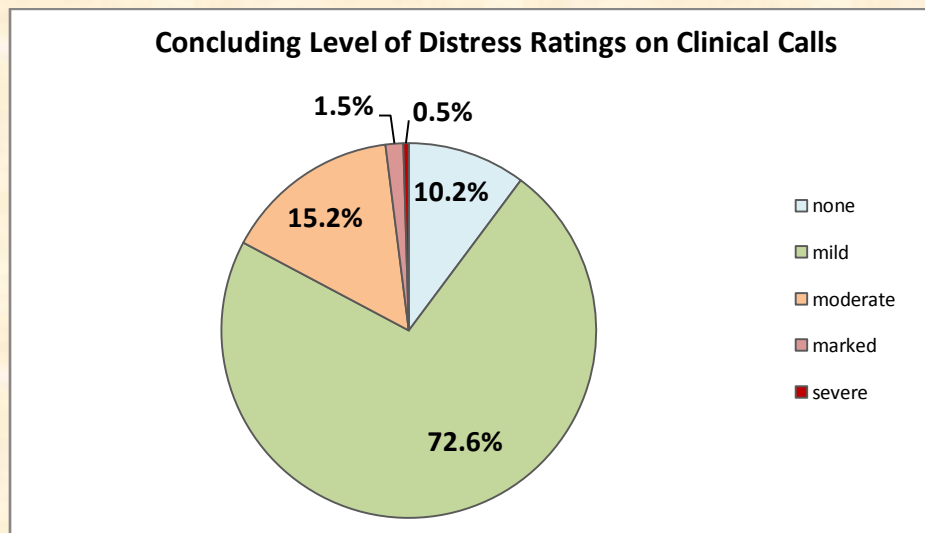
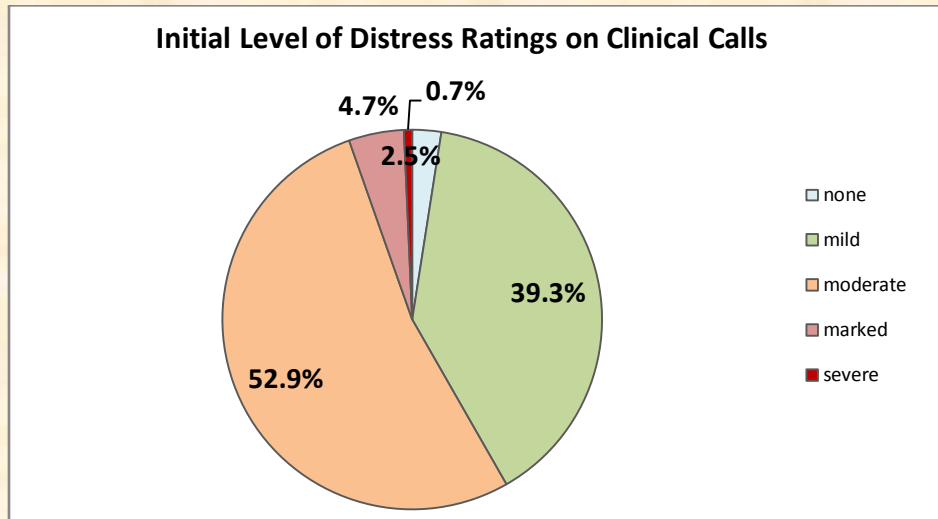
County of Residence	Total Calls
Bernalillo	354
Catron	0
Chaves	10
Cibola	5
Colfax	0
Curry	5
De Baca	0
Dona Ana	207



Eddy	14
Grant	58
Guadalupe	2
Harding	0
Hidalgo	0
Lea	6
Lincoln	2
Los Alamos	6
Luna	12
McKinley	13
Mora	0
Otero	17
Quay	0
Rio Arriba	11
Roosevelt	6
San Juan	13
San Miguel	7
Sandoval	24
Santa Fe	58
Sierra	2
Socorro	7
Taos	10
Torrance	5
Union	0
Valencia	24
(outside New Mexico)	27



NMCAL clinicians rate initial and concluding level of distress on every clinical call. Level of distress is based on both the caller's presentation or overt behavior, and on an assessment of their clinical situation. Even if a caller is not emotional or upset, their level of distress is rated higher if their clinical situation is acute.



Level of Care of Clinical Calls	
Routine	66.0%
Urgent	31.2%
Emergent	2.8%



Primary Presenting Problem in Calls	
Alcohol/Drugs	5.7%
Anger Management	1.6%
Anxiety	27.0%
Child	0.5%
Cognitive Concerns/Psychosis	3.2%
Danger to Others	0.2%
Depression	13.2%
Domestic Violence	1.1%
Family	6.3%
Grief/Loss	2.1%
Intentional Self Injury	0.2%
Medication	0.9%
Relationship/Marital	4.5%
Sexual Assault	0.1%
Situational Stress	6.3%
Suicide	13.7%
Workplace Issue	0.0%
Other	13.2%

For every clinical call, we track whether the situation could be stabilized by the clinician, or if a more restrictive level of care was necessary. These are the clinical outcomes of the NMCAL calls for November.



Clinical Outcome For All Counseling Calls

Caller stabilized by clinician, and referred to community resources if appropriate.	95.5%
Clinician made an abuse report.	0.8%
Caller will take the person of concern to the hospital.	0.6%
Caller agreed to go to the hospital.	0.6%
Caller agreed to call 911 regarding immediate danger to a third party.	0.7%
Caller conferenced to 911 due to immediate danger.	0.6%
Clinician contacted police with caller's consent.	0.2%
Clinician contacted police without caller's consent.	0.9%

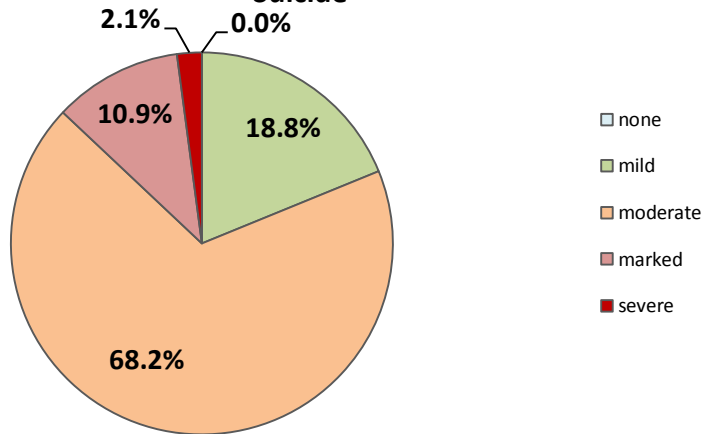
While it was not always the presenting issue, concerns related to suicide were reported on 27.9% of clinical calls. Concerns related to drug or alcohol abuse were reported on 17.9% of clinical calls. In November, 239 NMCAL callers reported concerns about suicide – either for themselves, or for the person of concern. NMCAL clinicians work with our callers to try to deescalate the emergency and create safety plans. We only involve hospital or emergency services when there is no less intrusive way to keep our callers safe.

Clinical Outcome on Calls Involving Suicide

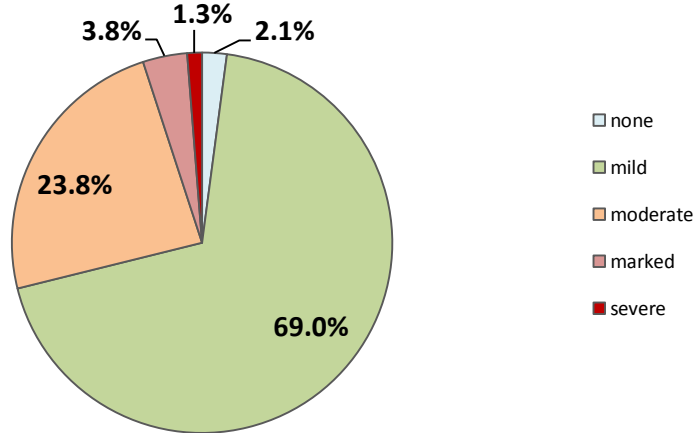
Caller stabilized by clinician, and referred to community resources if appropriate.	91.6%
Caller will take the person of concern to the hospital.	0.8%
Caller agreed to go to the hospital.	1.3%
Caller agreed to call 911 regarding immediate danger to a third party.	1.3%
Caller conferenced to 911 due to immediate danger.	1.3%
Clinician contacted police with caller's consent.	0.8%
Clinician contacted police without caller's consent.	2.9%



Initial Level of Distress on Calls Involving Thoughts of Suicide



Concluding Level of Distress on Calls Involving Thoughts of Suicide



Peer-to-Peer Warmline

In November 2015, the Peer-to-Peer Warmline handled 534 calls during its operating hours of 3:30pm to 11:30pm MT.

November 2015: Warmline Utilization	
Total Calls Handled	534
Service Level (answered under 30 sec)	60.6%
Abandonment Rate	30.0%
Average Speed of Answer	58 sec
Average Call Length	20.8 min

Outcome For Warmline Calls	
Caller was supported by the call.	92.0%
Caller received referrals.	2.5%
Caller was transferred to NMCAL.	1.0%
Emergency call	0.0%
Other	4.5%

Our Warmline Peers work in conjunction with NMCAL Clinicians to ensure that our callers are receiving the most appropriate services. Therefore calls will sometimes be transferred to/from NMCAL.

Calls Transferred between Warmline and NMCAL	
Calls transferred from NMCAL to Warmline	11
Calls transferred from Warmline to NMCAL	5



Primary Presenting Problem in Warmline Calls	
Abuse/Neglect	0.2%
Administrative Call	0.0%
Custody	0.0%
Divorce	0.0%
Family	6.0%
Finances	0.8%
Food/Nutrition	0.6%
Friends	0.4%
Healthcare	1.8%
Housing	1.0%
Just Want To Talk	54.6%
Legal	0.0%
Mental Health	7.4%
Relationships	19.5%
Resources/Community Referrals	0.8%
Substance Use	0.8%
Work/Employment	1.4%
Other	4.6%

