New Mexico Crisis and Access Line & Peer to Peer Warmline: 2017 Bi-Annual Report









Table of Contents

Content	Page #
Overview of calls January – June 2017	3
NMCAL Program Call Volume	4
Crisis and Access Line Clinical Call Information	5 - 7
Calls Concerning Suicidal Thoughts	8 - 9
Crisis Line Caller Demographic Information	10 - 14
Peer-to-Peer Warmline Caller Information	15 - 16
NMCAL Goal, Mission, and Vision	16
Community Outreach and Engagement	17 - 20



Overview



New Mexico Crisis and Access Line & Peer to Peer Warmline

From January through June of 2017, the New Mexico Crisis and Access Line (NMCAL) programs handled a total of 20,903 calls.

Of the 20,906 calls we handled: 9,288 calls were on the Statewide Crisis and Access Line, 1,679 New Mexico calls for the National Suicide Prevention Lifeline (NSPL), 5,962 calls on the Peer-to-Peer Warmline, and under separate contracts, an additional 3,977 after-hours calls were answered for New Mexico Behavioral Health Core Service Agencies (CSA's) and other BHSD approved agencies.

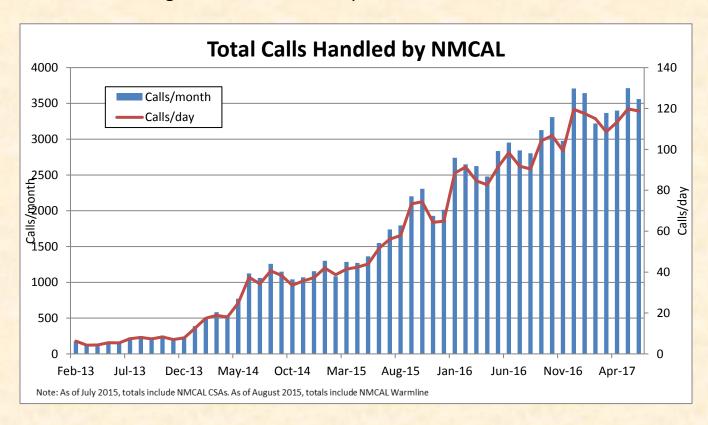
January - June 2017: Calls Answered by Type				
Total Statewide Crisis and Access Line + NSPL Calls	10,967			
Total Inbound Clinical Calls	8,728			
Calling about Self	7,938			
Calling about a Child	184			
Calling about another Adult	606			
Outbound Calls	625			
Information/Referral Calls	183			
Seeking information about NMCAL	88			
Public Safety/Law Enforcement Calls	52			
Administrative	90			
Other	5,178			
Warmline Calls	5,962			
Calls Answered For CSA Crisis Lines 3,97				
TOTAL CALLS ANSWERED for NEW MEXICO in 2017 20,906				



CALL VOLUME

Call volume continues to increase in the New Mexico Crisis and Access Line programs. We attribute this growth to consistent availability over the last 4 years, increasing trust and awareness within the community, and the expanding partnerships throughout the community, which include:

- Statements of Work with behavioral health agencies
- Concerted outreach and engagement efforts
- Sustained partnership with the National Suicide Prevention Lifeline, answering calls for the suicide prevention services in New Mexico





CLINICAL CALL INFORMATION

New Mexico Crisis and Access Line

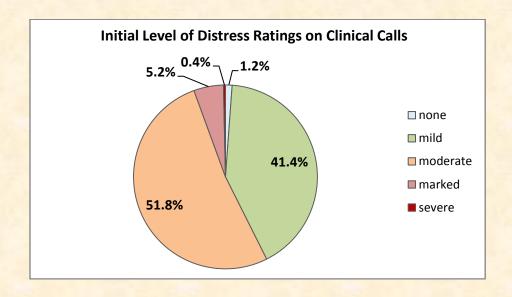
The following tables and charts provide information about the clinical calls handled by mental health clinicians on the New Mexico Crisis and Access Line and National Suicide Prevention Lifeline from January through June 2017.

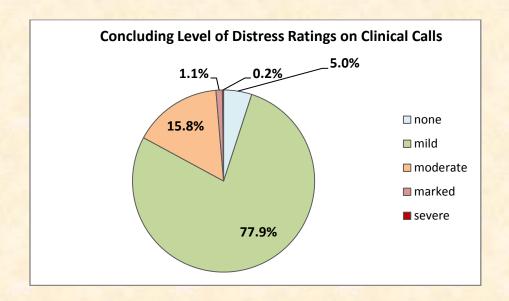
Crisis Line Utilization	
Total Crisis Line Calls Handled	8,728
Service Level (answered under 30 sec)	82.2%
Abandonment Rate	4.1%
Average Speed of Answer	19.9 sec
Average Call Length (all calls)	4.8 min
Average Call Length (Clinical calls)	17.3 min

Primary Presenting Problem during Clinical Calls						
Presenting Problem	# of Calls	% of Calls	Presenting Problem	# of Calls	% of Calls	
Alcohol/Drugs	379	4.9%	Grief/Loss	174	2.2%	
Anger Management	141	1.8%	Intentional Self Injury	126	1.6%	
Anxiety	2,015	25.8%	Medication	77	1.0%	
Child	82	1.1%	Relationship/Marital	252	3.2%	
Cognitive Concern/Psychosis	498	6.4%	Sexual Assault	31	0.4%	
Danger to Others	26	0.3%	Situational Stress	1,111	14.2%	
Depression	769	9.8%	Suicide	1,082	13.9%	
Domestic Violence	46	0.6%	Workplace Issue	11	0.1%	
Family	298	3.8%	Other	690	8.8%	



Crisis and Access Line 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 an assessment of the caller's clinical situation. Even if a caller is not emotional or upset, their level of distress is rated higher if their specific clinical situation is acute.







On every crisis line call, the NMCAL clinician assesses the current situation and evaluates how the caller can be supported through the call. The clinician determines if the matter can be resolved on that call, or if a higher level of response is necessary. For nearly 97% of crisis line calls, the immediate situation was resolved through supportive telephone counseling. The following charts identify the outcomes of the crisis line calls.

Level of Care for Clinical Calls				
Level of Care	# of calls	% of calls		
Routine	5,100	65.35%		
Urgent	2,541	32.56%		
Emergent	163	2.09%		

Clinical Disposition of NM Crisis Line Clinical Calls				
	# of calls	% of calls		
Caller stabilized by clinician, referred to community resources.	7,554	97.0%		
Clinician made a report of abuse to CPS or APS.	37	0.5%		
Caller agreed to go to the hospital.	14	0.2%		
Caller agreed to take person of concern to the hospital.	18	0.2%		
Caller identified that they would call 911 regarding immediate danger to person of concern.	24	0.3%		
Caller conferenced to 911 due to immediate danger.	58	0.7%		
Clinician contacted police with caller's consent.	21	0.3%		
Clinician contacted police without caller's consent.	64	0.8%		



CALLS CONCERNING THOUGHTS OF SUICIDE

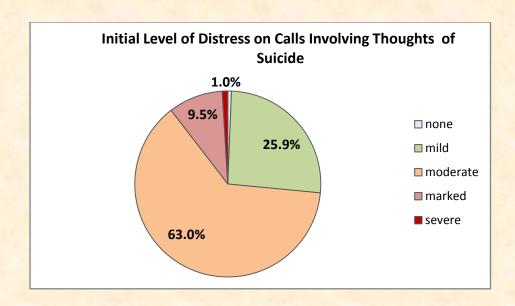
New Mexico Crisis and Access Line

While it was not always the presenting issue, concerns related to thoughts of suicide were reported on 28% of crisis line calls.

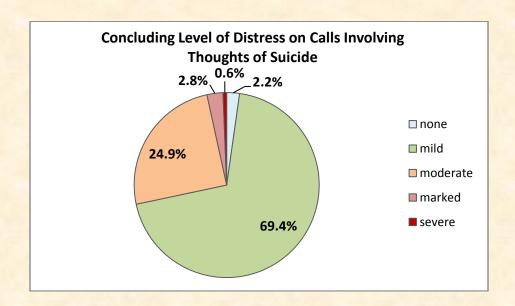
NMCAL looks closely at the outcome of calls where concerns about suicide are discussed. Of the calls answered between the end of March through the end of June in 2017, 2,203 crisis line callers reported concerns about suicide, either for themselves, or for another person of concern.

Disposition of All Crisis Line Calls Involving Suicide				
	# of calls	% of calls		
Caller stabilized by clinician, referred to community resources.	2,031	93.6%		
Caller agreed to go to the hospital.	8	0.4%		
Caller agreed to take person of concern to the hospital.	13	0.6%		
Caller identified that they would call 911 regarding immediate danger to person of concern.	15	0.7%		
Caller conferenced to 911 due to immediate danger.	41	1.9%		
Clinician contacted police with caller's consent.	14	0.6%		
Clinician contacted police without caller's consent.	49	2.3%		





In 91% of calls related to suicide, the NMCAL clinician was able to stabilize the caller and create a safety plan during the phone call; without needing to involve police, a hospital, or other more restrictive options.





CALLER DEMOGRAPHIC INFORMATION

New Mexico Crisis and Access Line

The following tables summarize the descriptive demographic information gathered from 87% of crisis line callers. All demographic information reported is based on a caller's choice to self-report. This data is not externally verified.

It is important to note that demographic information is not gathered on all calls because callers may decline providing information, or not know how to answer. In some cases, the clinician did not ask the question, due to the nature of the call.

Like most crisis lines, NMCAL has a small number of callers who contact us quite frequently, and generally talk to crisis line clinicians for only a minute or two. This brief contact with a crisis line clinician can support these callers in staying healthy, and living independently within their communities.

The average caller contacted NMCAL twice. 36% of the total calls are identifiably unique callers. To control for this small number of callers, data is presented for both total calls, and for individual callers (aka: identifiably unique callers).

*NOTE: Some data unavailable due to technology changes in March 2017.

Gender of Caller	Total	Individual
	Calls	Callers
Male	38%	51%
Female	62%	49%
Other	0.2%	0.5%



County of Residence	Total Calls	Individual Callers	County of Residence	Total Calls	Individual Callers
Bernalillo	1,594	805	McKinley	64	40
Catron	3	2	Mora	0	0
Chaves	123	85	Otero	108	78
Cibola	21	15	Quay	2	1
Colfax	0	0	Rio Arriba	25	14
Curry	41	24	Roosevelt	12	6
De Baca	2	1	San Juan	155	131
Dona Ana	816	729	San Miguel	38	23
Eddy	24	13	Sandoval	206	123
Grant	69	50	Santa Fe	216	125
Guadalupe	2	1	Sierra	17	11
Harding	0	0	Socorro	50	39
Hidalgo	0	0	Taos	63	53
Lea	30	18	Torrance	20	11
Lincoln	36	20	Union	0	0
Los Alamos	25	14	Valencia	105	67
Luna	15	9	(outside NM)	0	0

NMCAL is accessible to:

- Non-English speaking callers through a language interpretation service provider
- Speech and/or hearing impaired callers though TTY and Relay services

Primary Language	Total	Individual
Of Caller	Calls	Callers
English	96%	92%
English/Spanish Bilingual	2%	4%
Spanish	1%	2%
Other	1%	3%



Age of Caller	Total Calls	Individual Callers
Under 18	4%	13%
18-24	20%	19%
25-34	37%	21%
35-44	10%	17%
45-54	14%	13%
55-64	12%	12%
65+	3%	5%

Callers	Total	Individual
Race/Ethnicity	Calls	Callers
White/Caucasian	47%	42%
Hispanic	15%	37%
American Indian or Alaskan	4%	8%
Black or African American	1%	4%
Asian	12%	2%
Multiracial	2%	5%
Other	19.5%	2.6%

Callers	Total	Individual
Housing Status	Calls	Callers
Has permanent housing	89%	82%
Has temporary housing	5%	12%
Resides in a residential facility	0.9%	6%
Homeless	5%	1%



Callers Health Insurance	Total Calls	Individual Callers
Medicaid	68%	54%
Other insurance	20%	28%
Insured, but type unknown	4%	7%
None	8%	11%

15% of callers without health insurance reported that they were receiving behavioral health treatment, as opposed to 72% of callers with insurance.

Caller Receiving Behavioral	Total	Individual
Health Treatment?	Calls	Callers
Yes	56%	42%
No	44%	58%

22% of homeless callers reported that they were receiving behavioral health treatment, as opposed to 58% of callers with permanent housing.

Callers housing status and if they areReceiving treatmentWhat their insured status is	: Yes	No
Homeless, and in treatment	22%	78%
Homeless, and insured	64%	36%
Housed, and in treatment	58%	42%
Housed, and insured	5%	95%



How did the Caller Hear About NMCAL?	Total Calls	Individual Callers
Counselor/Therapist	19%	14%
Support Group	2%	2%
Medical or Behavioral Health Facility	4%	7%
Family or Friend	6%	9%
Governmental or Public Service Agency	2%	4%
Insurance Provider	0%	0%
Other Crisis Line or Warmline	6%	6%
Nurseline	0%	0%
Public Awareness Materials	2%	3%
Media	1%	1%
Internet	15%	21%
Phone Book	0%	0%
Other	43%	33%



PEER SUPPORT CALL INFORMATION

Peer to Peer Warmline

The following tables provide information about the calls handled by Certified Peer Support Specialists on the New Mexico Peer-to-Peer Warmline during Warmline operating hours of 3:30pm to 11:30pm MT.

Warmline Utilization	
Total Calls Handled	5,962
Average Call Length of Warmline Calls	15.7 min

Primary Presenting Problem in Warmline Calls	# of calls	% of calls
Abuse/Neglect	1	0.0%
Administrative Call	11	0.2%
Employment/Education	24	0.4%
Family	107	1.9%
Finances	17	0.3%
Food/Nutrition	15	0.3%
Friendships	28	0.5%
Healthcare	184	3.3%
Housing	64	1.2%
Legal	35	0.6%
Mental Health	4,693	85.3%
Relationships	203	3.7%
Spirituality	44	0.8%
Substance Use	73	1.3%



Outcome of Warmline Calls	# of calls	% of calls
Caller was supported by the call	5,548	96.5%
Caller received referrals	35	0.6%
Caller was transferred to NMCAL	31	0.5%
Emergency call	8	0.1%
Other	126	2.2%

Warmline Peers work side by side with NMCAL's professional crisis line clinicians to ensure that callers have access to the most appropriate services. To facilitate this, calls will sometimes be transferred to/from the NMCAL crisis line.

Calls Transferred between Warmline and NMCAL	# of calls	% of calls
Calls transferred from NMCAL to Warmline	64	1.07%
Calls transferred from Warmline to NMCAL	31	0.52%

GOAL, MISSION, and VISION

The New Mexico Crisis and Access Line Clinical Programs and Peer-to-Peer Warmline are contracted by the New Mexico Department of Human Services, Behavioral Health Services Division (BHSD). We work in conjunction with BHSD to increase awareness of the NMCAL Clinical and Peer Programs throughout the state.

- Goal: To close gaps in access to crisis help when New Mexicans need it most.
- Mission: To provide timely, effective assessment and intervention in times of crisis; while ensuring there is continuous, quality access to professional behavioral health and wellness services.
- Vision: To lead the behavioral health community in providing continuous access to care; bringing light and hope to those in need during their darkest hour.



COMMUNITY OUTREACH AND ENGAGEMENT

The following is a summary of the outreach and engagement activities NMCAL participated in from January through June of 2017.

STATEMENTS of WORK (SOW) with BHSD

- STR OUD SAMHSA GRANT: NMCAL has been awarded a SOW to work to address the tremendous opioid crisis in New Mexico.
- PUBLIC AWARENESS: NMCAL has been awarded a SOW to update the NMCAL website, develop new public awareness materials, and increase the distribution of materials throughout the state.
- WARMLINE TEXT PROGRAM: NMCAL has been awarded a SOW to build a texting program to offer this much requested service to New Mexicans.
- CORE SERVICE AGENCY AFTERHOURS PROGRAM: NMCAL continues to manage a SOW to work with New Mexico Behavioral Health Core Service Agencies, and other BHSD approved New Mexico Behavioral Health Medicaid Agencies, to provide afterhours and weekend coverage services.

MEMORANDUMS of UNDERSTANDING (MOU)

- RIO GRANDE TAOS GORGE BRIDGE INTERCOMS: NMCAL continues to answer the
 intercoms that are placed on the Rio Grande Taos Gorge Bridge, to engage people
 in distress with an intervention, and a response from local public safety.
- NATIONAL SUICIDE PREVENTION LIFELINE (NSPL): NMCAL is one of 3 qualified providers answering NSPL calls with the highest of standards established. NMCAL is 'here to hear' people that call the nationally recognized suicide prevention resource, 1-800-273-TALK or 1-800-SUICIDE.
- BERNALILLO COUNTY COMMUNICATION CENTER: NMCAL continues to work
 with the Bernalillo County communication center emergency and non-emergency
 response dispatch center to create an avenue of support that engages people
 experiencing a behavioral crisis, to the right care at the right time.



 NM AWARE: NMCAL provides data to support the Children Youth and Families Department (CYFD) and University of New Mexico (UNM) SAMHSA Grant that provides Mental Health First Aid training for public safety officials in Bernalillo County, Santa Fe County, CYFD, and New Mexico State Police that serve transition age youth 14 – 24.

PUBLIC AWARENESS

 MEDIA MENTIONS and ENCOUNTERS: The following chart represents the number of times where NMCAL can verify it has been mentioned in the media as a result of an interview, a published or broadcasted media story, and/or through the public awareness campaign. While NMCAL monitors news feeds closely, it is assumed that this number is underrepresented.

Media Mentions and Enco	unters	
Newspapers Interviews	3	
Newspaper Mentions (print and online)	an estimated 64+	
Radio Interviews	1	
Radio Mentions	an estimated 26+	
Television Appearances	1	
Television Interviews	1	
Television Mentions	an estimated 156+	
Online Media Encounters	an estimated 61+	
Other Media Encounters	an estimated 38+	
Total Mentions and Encounters	Approximately 351+	

• **CAMPAIGN:** NMCALs public awareness campaign "Here to Hear You," continues to air on public television and radio, encouraging New Mexicans to call during a mental health concern. https://www.youtube.com/watch?v=7gRYg5AS1Lg&autoplay=1



PROGRAM AWARENESS and COMMUNITY PREVENTION TRAININGS: NMCAL
partners with the community to present trainings which help people recognize
the signs and symptoms of mental health, substance use, and suicide.

Awareness and Training Events Delivered by NMCAL Staff		
# of participants # of trainings		
NMCAL Presentations	773	26
Mental Health First Aid Trainings	317	12
QPR Suicide Prevention Trainings	232	13
Managing your Chronic Disease Trainings	49	1
TOTALS	1,371	52

 COMMUNITY INVOLVEMENT: NMCAL staff are regular participants in multiple city, county, state, and community meetings. NMCAL staff attend and participate in, numerous community-based conferences, summits, exhibits, workshops, trainings, health fairs, and various other awareness events throughout the state:

January - June 2017: Community E	vents
Conferences	24
Summits	7
Health Fairs	17
Resource Fairs	5
Advocacy and Awareness Events	28
Advocacy and Awareness Walks	3
Advocacy and Awareness Motorcycle Runs	1
Town Hall Meetings	1
Governance Meetings	3
Community Based Public Trainings	51
Legislative Events	5
Special Events	1
Other Community Events	13
Total Community Events Attended	160

PUBLIC AWARENESS MATERIALS: NMCAL distributes public awareness materials
to the community, to increase awareness that NMCAL is here 24 hours a day, 7
days a week, 365 days a year to call and access support for a personal reason, or
to learn how to help someone else.

Public Awareness Materials Distributed				
Posters				352
English	213	Spanish	139	
8.5 x 11 Fliers (Reversible English/Spanish)				1,566
Informational Brochure Cards				23,562
English	16,313	Spanish	7,249	
Magnets				14,411
English	9,138	Spanish	5,273	
Wallet Cards				42,418
English	29,631	Spanish	12,787	
TOTAL PUBLIC AWARENESS MATERIALS				82,309

COMMUNITY RESOURCE

NMCAL continues to collaborate with agencies to be included within the state resource directories to ensure people know that there is someone to call in the moment they need someone here to hear them, 24/7/365. Listings include, but are not limited to:

- NETWORK OF CARE (NoC): Behavioral Health Services Division (BHSD) Statewide Resource Directory designed to bring all New Mexico behavioral health resources together in an easily accessible forum for all New Mexicans. http://newmexico.networkofcare.org/mh/index.aspx
- PULL TOGETHER: Children Youth and Families Department (CYFD) Pull Together Campaign designed to bring resources together in an easily accessible forum for New Mexicans to find support services for families and children in the communities that they live. https://pulltogether.org/

