



November 2017 New Mexico Utilization Report

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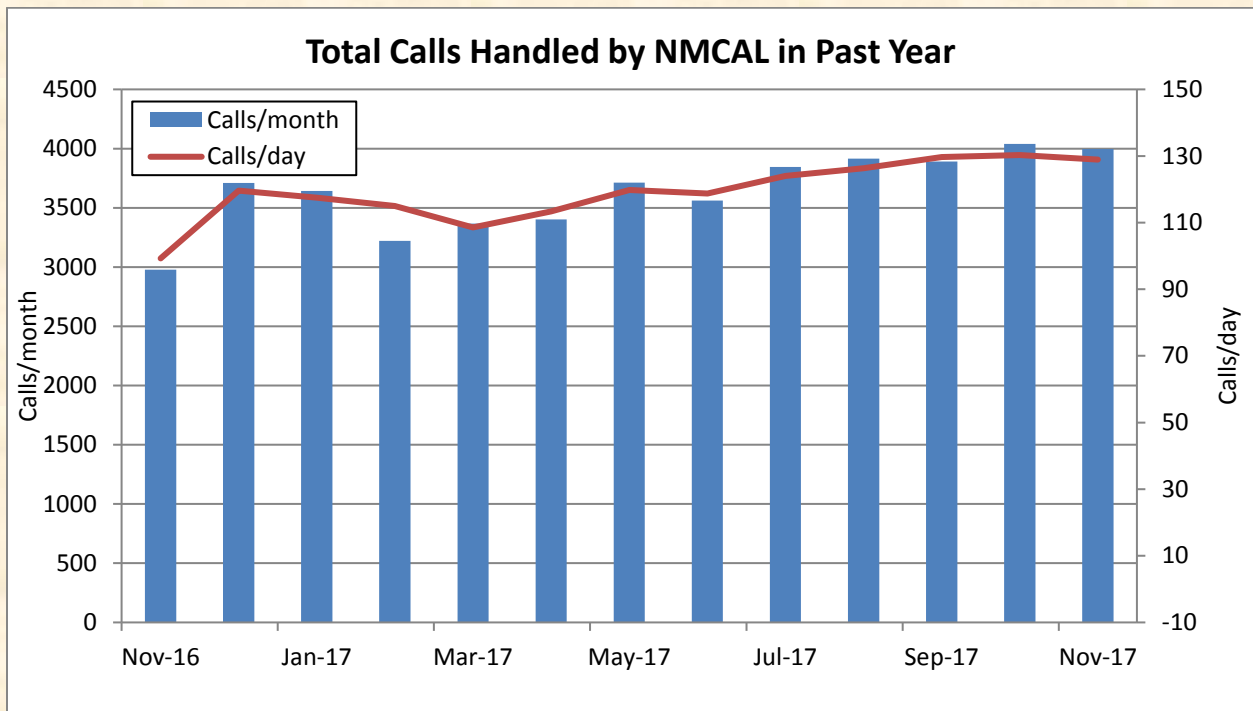
PROGRAM OVERVIEW SUMMARY

In November of 2017, the New Mexico Crisis and Access Line (NMCAL) programs handled 3,996 calls. This includes 1,855 calls on the Statewide Crisis and Access Line, 366 New Mexico calls for the National Suicide Prevention Lifeline (NSPL), 1,115 calls for the Peer-to-Peer Warmline, and 660 after-hours calls forwarded from New Mexico's Behavioral Health Core Service Agencies (CSA's).

November 2017: Calls Answered by Type	
Total Statewide Crisis and Access Line + NSPL Calls	2,221
Inbound Clinical Calls	1,748
Calling about Self	1,583
Calling about a Child	41
Calling about another Adult	124
Outbound Clinical Calls	79
Information/Referral Calls	21
Seeking information about NMCAL	18
Public Safety Calls	4
Administrative	9
Other	342
Warmline Calls	1,115
Calls Answered For CSA Crisis Lines	660
TOTAL CALLS ANSWERED FOR NEW MEXICO	3,996



There is always someone here to hear you at NMCAL and the Warmline.



Community Outreach and Engagement		
	# of participants	# of encounters
Participation in Community Events		13
Job Fair		0
NMCAL Presentations to the Community	1,369	9
Prevention Trainings Sponsored by NMCAL	1,278	8
Participation in Community Meetings		31
Media Encounters		5
Media Mentions		<i>an estimated</i> 226+
TOTALS	2,647	292



CLINICAL CALL INFORMATION

New Mexico Crisis and Access Line

The following tables and charts provide information about the calls handled by NMCAL during the month of November 2017.

November 2017: Crisis Line Utilization	
Total Calls Handled on the Crisis Line	2,221
Service Level (answered under 30 sec)	91.2%
Abandonment Rate	1.4%
Average Speed of Answer	14 sec
Average Call Length (all calls)	3.3 min
Average Call Length (Clinical calls)	15.3 min

Level of Care - Clinical Calls	
Routine	69.1 %
Urgent	29.5 %
Emergent	1.4 %



Callers are asked for their county of residence; these responses cannot be independently verified. It is important to note that this data is not necessarily predictive of an overall need for services in each county. Some things to keep in mind when reviewing demographic information of crisis line callers include: (1) a small number of callers contact NMCAL quite frequently, (2) some callers chose not to share their demographic information during the call, and (3) there are community members that do not yet know about the NMCAL resource.

County of Residence	Total Calls	County of Residence	Total Calls
Bernalillo	553	McKinley	14
Catron	0	Mora	1
Chaves	32	Otero	16
Cibola	5	Quay	2
Colfax	3	Rio Arriba	11
Curry	8	Roosevelt	3
De Baca	0	San Juan	151
Dona Ana	157	San Miguel	5
Eddy	9	Sandoval	43
Grant	23	Santa Fe	53
Guadalupe	0	Sierra	1
Harding	0	Socorro	12
Hidalgo	0	Taos	56
Lea	6	Torrance	8
Lincoln	2	Union	0
Los Alamos	2	Valencia	28
Luna	7	(outside NM)	30



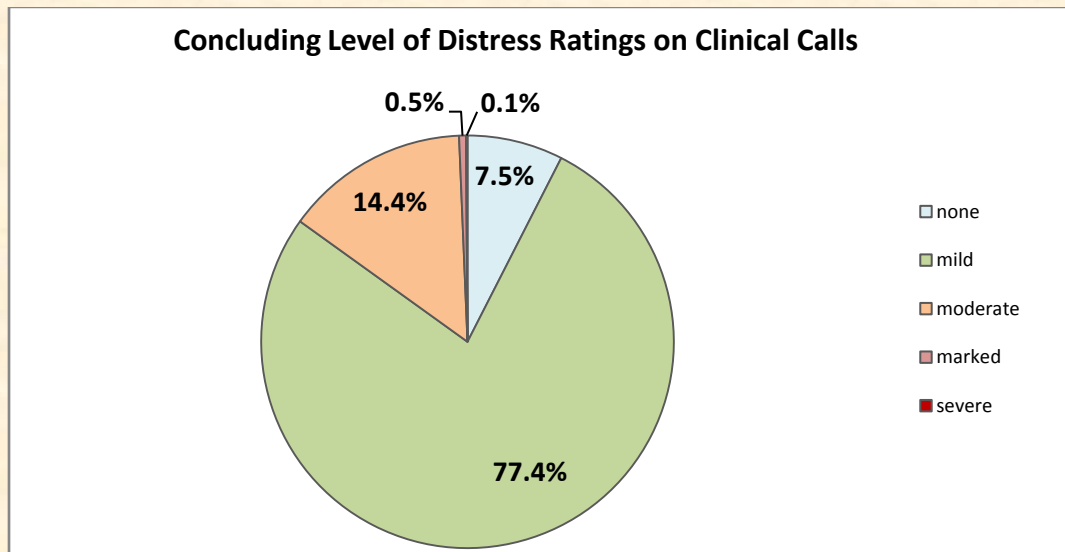
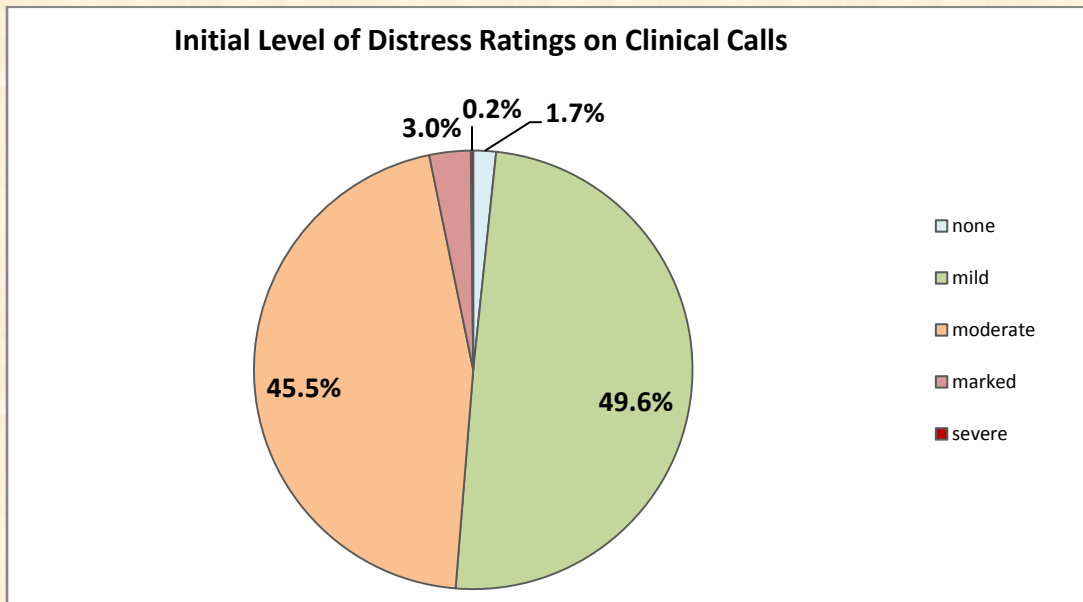
The primary presenting problem is determined based on the general theme of the caller's concerns. Within each primary category, additional details may be discussed that may relate to the primary presenting problem.

Primary Presenting Problem During Clinical Calls	
Alcohol/Drugs	4.8 %
Anger Management	0.8 %
Anxiety	21.8 %
Child	0.8 %
Cognitive Concerns/Psychosis	11.9 %
Danger to Others	0.5 %
Depression	11.2 %
Domestic Violence	0.5 %
Family	2.2 %
Grief/Loss	1.7 %
Intentional Self Injury	1.4 %
Medication	1.4 %
Relationship/Marital	2.6 %
Sexual Assault	0.4 %
Situational Stress	16.7 %
Suicide	14.4 %
Workplace Issue/Career Assistance	0.1 %
Other	6.8 %



Levels of Distress on Clinical Calls

NCMAL rates both the initial and the concluding level of distress a person appears to be experiencing during a clinical call. The level of distress is based on both the person's presentation or overt behavior, and an assessment of the person's clinical situation. Even if a person does not appear to be emotional or upset, their level of distress is rated higher if their specific clinical situation is acute.



NMCAL assesses the current situation being discussed, and evaluates how the person can be supported through the call. NMCAL determines if the matter can be resolved on that call, or if a higher level of response is necessary.

Clinical Disposition of All Crisis Line Clinical Calls	
Caller stabilized by clinician, and referred to community resources if appropriate	97.2 %
Clinician made an abuse report	0.8 %
Caller will take the person of concern to the hospital	0.1 %
Caller agreed to go to the hospital	0.2 %
Caller agreed to call 911 regarding immediate danger	0.2 %
Caller conferenced to 911 due to immediate danger	0.7 %
Clinician contacted police with caller's consent	0.4 %
Clinician contacted police without caller's consent	0.4 %

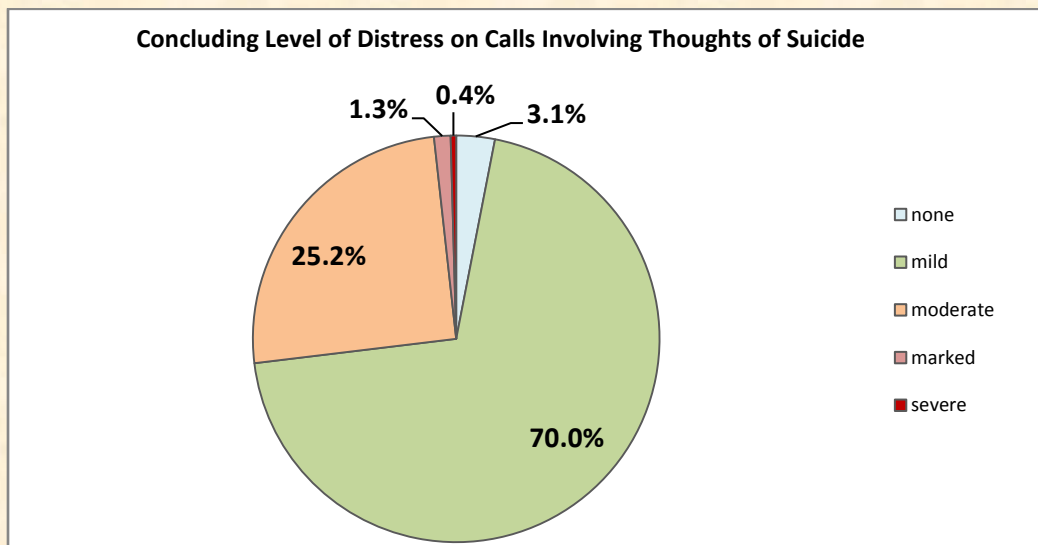
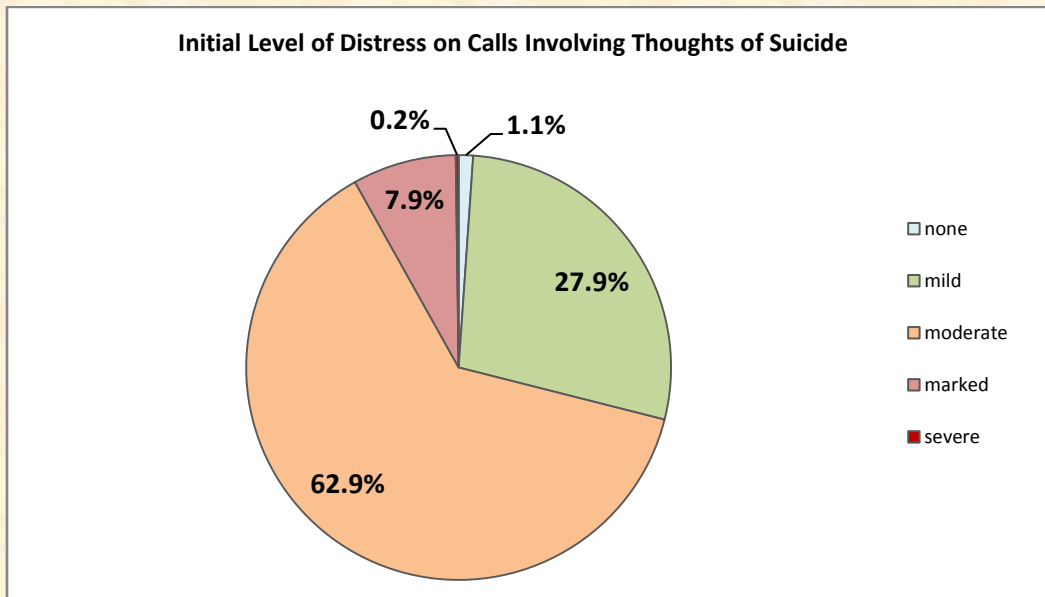
Calls Involving Thoughts of Suicide

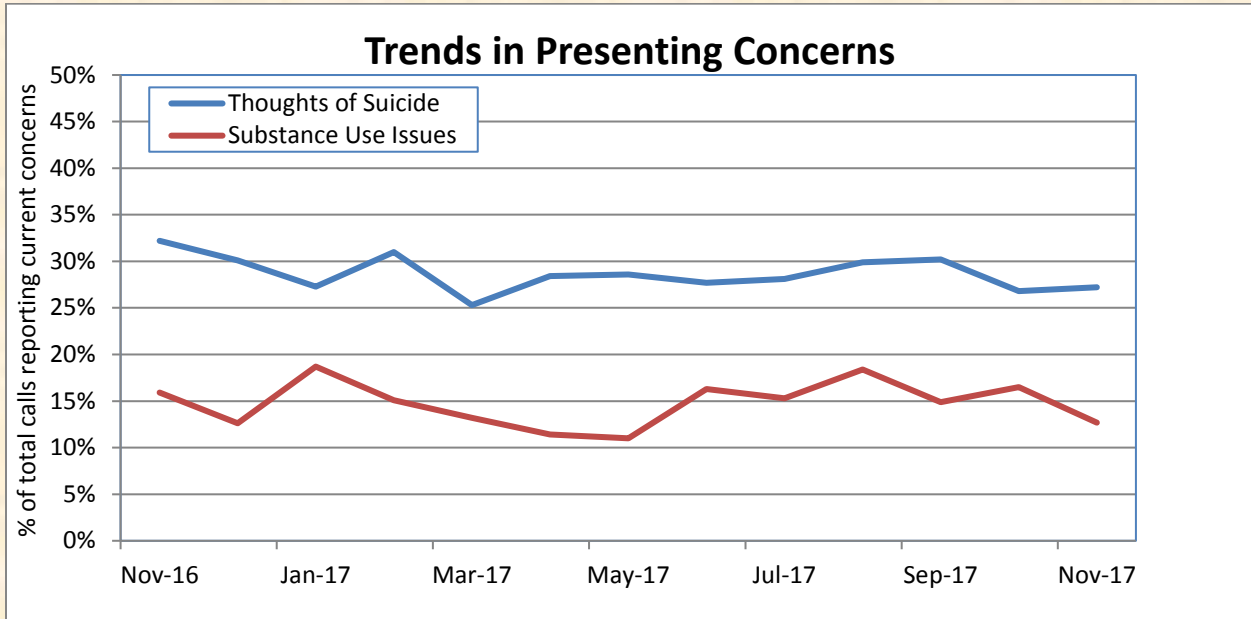
While suicide is not always the presenting issue on a clinical call, concerns related to suicide were reported on 27.2% of the clinical calls in November. The 458 callers reporting concerns about suicide on the crisis line - either for themselves, or for the person of concern they called about - were supported and when appropriate a safety plan is created with the caller. At times NMCAL involves hospital or emergency services, but only when there is not a less intrusive way to keep the caller safe.

Clinical Disposition of All Crisis Line Calls Involving Suicide	
Caller stabilized by clinician, and referred to community resources if appropriate	93.6 %
Caller will take the person of concern to the hospital	0.4 %
Caller agreed to go to the hospital	0.4 %
Caller agreed to call 911 regarding immediate danger to a third party	0.7 %
Caller conferenced to 911 due to immediate danger	2.2 %
Clinician contacted police with caller's consent	1.3 %
Clinician contacted police without caller's consent	1.3 %



Levels of Distress on Clinical Calls Involving Thoughts of Suicide





Calls Involving Substance Use

Concerns related to mental health often co-occur with substance use. In November 12.7% of crisis line callers (213 people) reported concerns related to drug and/or alcohol use.

In 2017 the New Mexico Department of Human Services, Behavioral Health Services Division (BHSD) was awarded a State Targeted Response (STR) Grant from Substance Abuse and Mental Health Services Administration (SAMHSA) to address the Opioid Use Disorder (OUD) epidemic in the state. NMCAL is here to support people that may be experiencing OUD concerns either for themselves, or for the person of concern they are calling about.

Calls Related to Opioid Use	
NMCAL Clinical calls related to Opioid Use	31
Warmline calls related to Opioid Use	6



PEER SUPPORT CALL INFORMATION

Peer to Peer Warmline

The Peer-to-Peer Warmline is answered by certified peer support specialists 7 days a week, 365 days a year. In November 2017, the Peer-to-Peer Warmline handled 1,115 calls during its operating hours of 3:30pm to 11:30pm MT.

November 2017: Warmline Utilization Call Data	
Total Calls Handled	1,115
* during Warmline operating hours of 3:30pm to 11:30pm MT	
Average Call Length (all Warmline calls)	11.9 min

Community members select to call the Peer-to-Peer Warmline because they want to talk to someone that has “been there”, has lived experience with some of the same things they, or a loved one, may be going through, and/or the peer support can offer callers information and support on how to take the next step in recovery and resiliency from a mental health and/or substance use concern.

Outcome of Warmline Calls	
Caller reports feeling supported by the call	98.3 %
Caller received referrals	0.4 %
Caller was transferred to an NMCAL clinician	0.0 %
Emergency call to Public Safety was made	0.1 %
Other/None of the Above	1.2 %



In November 2017 the Warmline answered calls for people seeking support for themselves, or someone else, struggling with health concerns which relate to their mental, behavioral, emotional, social, and/or well being.

Primary Presenting Problem in Warmline Calls	
Abuse/Neglect	0.0 %
Administrative Call	0.0 %
Employment/Education	0.2 %
Family	0.5 %
Finances	0.1 %
Food/Nutrition	0.1 %
Friends	0.3 %
Healthcare	0.6 %
Housing	0.1 %
Legal	0.1 %
Mental Health	96.7 %
Relationships	0.9 %
Spirituality	0.0 %
Substance Use	0.6 %

NMCAL works in conjunction with the Warmline to ensure that callers are receiving the most appropriate services. Therefore calls will sometimes be transferred to or from the crisis line.

Calls Transferred between Warmline and NMCAL	
Calls transferred from NMCAL to Warmline	2
Calls transferred from Warmline to NMCAL	0

