

# **April 2018 New Mexico Utilization Report**

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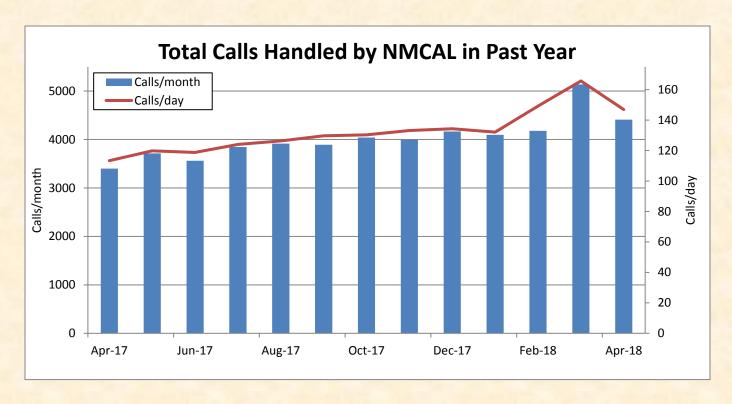
## PROGRAM OVERVIEW SUMMARY

Year to date the New Mexico Crisis and Access Line (NMCAL) programs have handled a total of 17,819 calls. This includes 7,718 calls on the Statewide Crisis and Access Line, 1,772 New Mexico calls from the National Suicide Prevention Lifeline (NSPL), 4,339 calls on the Peer-to-Peer Warmline, and 3,990 after-hours calls forwarded from New Mexico's Behavioral Health Core Service Agencies (CSA's).

Calls Answered by Type	April 2018	March 2018	April 2017
Total Statewide Crisis Line + NSPL Calls	2,291	2,708	1,638
Total Inbound Calls	1,723	1,882	1,536
Calling about Self	1,527	1,713	1,146
Calling about a Child	45	45	26
Calling about another Adult	151	124	90
Outbound Crisis Line Calls	150	153	72
Information/Referral Calls	27	44	27
Seeking information about NMCAL	10	11	9
Public Safety Calls	1	2	3
Administrative	17	12	15
Other	363	604	235
Warmline Calls	1,244	1,281	921
Calls Answered For Core Service Agencies	874	1,148	583
TOTAL CALLS ANSWERED	4,409	5,137	3,401



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



Community Outreach and Engagement						
	# o	f encounters	:	# of participants		
	April '18	Mar '18	April '17	April '18	Mar '18	April '17
Community Events	12	16	14			
NMCAL Presentations	2	15	7	50	921	202
Prevention Trainings	1	3	4	30	105	174
Community Meetings	6	19	24			
Media Encounters	2	2	0			
Media Mentions	90+	60+	56+			
TOTALS	113	115	105	80	1,026	376



# **CRISIS LINE UTILIZATION DATA**

### New Mexico Crisis and Access Line

The following tables and charts provide information about the crisis line calls handled by professional mental health counselors on the New Mexico Crisis and Access Line and National Suicide Prevention Lifeline during the month of April 2018.

Crisis Line Utilization	April '18	March '18	April '17
Total Calls Handled on the Crisis Line	2,291	2,708	1,638
Service Level (answered under 30 sec)	88.6%	92.0%	84.4%
Abandonment Rate	2.6%	1.4%	2.6%
Average Speed of Answer	14 sec	12 sec	18 sec
Average Call Length (Crisis Line calls)	17.3 min	17 min	18.1 min

Level of Care Crisis Line Calls	April '18	March '18	April '17
Routine	68.3%	70.3%	66.5%
Urgent	28.4%	27.5%	31.8%
Emergent	3.3%	2.2%	1.7%

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	Total Calls		County of	Т	otal Calls	;	
Residence	<b>Apr</b> '18	<b>Mar</b> '18	Apr '17	Residence	<b>Apr</b> '18	Mar '18	Apr '17
Bernalillo	673	904	351	Cibola	6	8	3
Santa Fe	106	75	26	Lea	6	7	4
Dona Ana	91	90	114	San Miguel	6	8	2
San Juan	90	90	33	Sierra	6	16	3
Curry	65	83	1	Lincoln	5	3	3
Otero	39	38	9	Guadalupe	3	0	0
Sandoval	38	57	27	Los Alamos	2	4	4
Valencia	29	43	19	Roosevelt	1	2	1
Grant	27	43	2	Colfax	1	1	1
Socorro	19	24	6	Catron	1	0	0
Taos	19	18	8	Mora	1	0	0
McKinley	18	9	6	Union	1	0	1
Eddy	14	15	2	Hidalgo	0	1	0
Torrance	13	16	1	Harding	0	0	0
Chaves	12	39	20	Quay	0	2	0
Luna	10	5	3	De Baca	0	0	0
Rio Arriba	7	11	4	(outside NM)	35	41	16



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 might relate to the primary presenting problem.

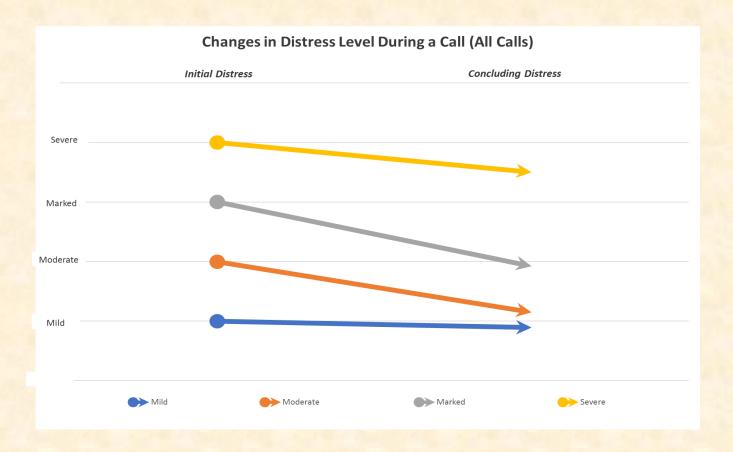
Primary Presenting Problem  During Crisis Line Calls	April '18	March '18	April '17
Anxiety	27.0 %	34.2 %	27.8%
Suicide	16.4 %	17.6 %	12.6%
Situational Stress	14.9 %	18.7 %	14.7%
Alcohol/Drugs	7.6 %	8.4 %	4.2%
Cognitive Concerns/Psychosis	7.4 %	18.1 %	4.1%
Depression	7.2 %	10.0 %	12.4%
Relationship/Marital	3.0 %	4.0 %	2.6%
Grief/Loss	1.8 %	2.6 %	2.2%
Family	1.1 %	2.3 %	4.6%
Child	1.1 %	1.2 %	0.9%
Medication	0.9 %	1.9 %	1.0%
Intentional Self Injury	0.8 %	1.9 %	1.9%
Domestic Violence	0.6 %	0.8 %	0.7%
Danger to Others	0.6 %	0.5 %	0.2%
Anger Management	0.4 %	0.8 %	1.3%
Sexual Assault	0.3 %	0.3 %	0.6%
Workplace Issue/Career Assistance	0.1 %	0.5 %	0.3%
Other	8.8 %	10.6 %	7.8%



#### Levels of Distress and Clinical Disposition on Crisis Line Calls

During a call the NMCAL counselor assesses the current situation and evaluates how the caller can be supported through the call. Counselors rate the initial and concluding level of distress and determines if the matter can be resolved on that call, or if a higher level of response is necessary.

Level of distress is based on both the caller's presentation or overt behavior, and an assessment of the caller's situation. Even if a caller is not emotional or upset, the callers level of distress is rated higher if their specific situation appears acute.





Clinical Disposition All Crisis Line Calls	April'18	March '18	April '17
Caller stabilized by counselor, and referred to community resources if appropriate	95.3%	96.5%	96.8%
Counselor made an abuse report	0.6%	0.8%	0.8%
Caller will take the person of concern to the hospital	0.6%	0.2%	0.2%
Caller agreed to go to the hospital	0.6%	0.6%	0.3%
Caller agreed to call 911 regarding immediate danger	0.1%	0.2%	0.5%
Caller conferenced to 911 due to immediate danger	1.1%	0.6%	0.3%
Counselor contacted police with caller's consent	0.5%	0.1%	0.6%
Counselor contacted police without caller's consent	1.3%	0.9%	0.5%

#### **Calls Involving Thoughts of Suicide**

While suicide is not always the presenting issue on a crisis line call, concerns related to suicide were reported on 26.2% of the calls in April. The 371 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 Crisis Line Calls Involving Suicide	April '18	March '18	April '17
Caller stabilized by counselor, and referred to community resources if appropriate	87.0%	89.9%	93.6%
Caller will take the person of concern to the hospital	1.4%	1.0%	0.4%
Caller agreed to go to the hospital	2.0%	2.0%	1.2%
Caller agreed to call 911 regarding immediate danger to a third party	0.3%	0.8%	0.8%
Caller conferenced to 911 due to immediate danger	3.4%	2.5%	1.2%
Counselor contacted police with caller's consent	2.0%	0.0%	1.6%
Counselor contacted police without caller's consent	4.0%	3.8%	1.2%



#### **Calls Involving Substance Use**

Concerns related to mental health often co-occur with substance use. NMCAL is here to support people that may be experiencing any substance use concern, either for themselves, or for the person of concern they are calling about. In April 24.9% of crisis line callers (352 people) reported concerns related to drug and/or alcohol use impacting their lives.

Calls related specifically to Opioid Use Disorders (OUD) include:

Calls Related to Opioid Use	April '18	March '18	April '17
NMCAL Clinical calls related to Opioid Use	70	44	N/A
Warmline calls related to Opioid Use	5	6	N/A



# WARMLINE UTILIZATION DATA

#### Peer to Peer Warmline

The Peer-to-Peer Warmline is answered by certified peer support specialists 7 days a week, 365 days a year. Year to date the Peer-to-Peer Warmline has handled 4,339 calls during its operating hours of 3:30pm to 11:30pm MT.

Warmline Utilization Data	April 2018	March 2018	April 2017
Total Calls Handled	1,244	1,281	921
Average Call Length (all Warmline calls)	16.3 min	17.7 min	14.0 min

Community members select to call or text 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 to talk to a peer support that can offer information and support on how to take the next step in recovery and build resiliency from a mental health, behavioral health, and/or substance use concern.

Outcome of Warmline Calls	April '18	March '18	April '17
Caller reports feeling supported by the call	98.1%	96.4%	97.6%
Caller received referrals	0.3%	0.5%	0.5%
Caller was transferred to an NMCAL counselor	0.4%	0.1%	0.2%
Emergency call to Public Safety was made	0.0%	0.0%	0.2%
Other/None of the Above	1.2%	3.1%	1.5%

The Warmline answers calls and text messages for people seeking support for themselves, or someone else. Callers discuss struggles that are being experienced related to health concerns regarding mental, behavioral, emotional, social, and/or one's well being. Additional details may be discussed that could be associated to other secondary presenting problem(s).

Primary Presenting Problem in Warmline Calls	April '18	March '18	April '17
Mental Health	88.6%	91.7%	81.2%
Relationships	4.8%	2.7%	5.7%
Family	1.8%	1.7%	3.1%
Healthcare	1.8%	1.0%	3.7%
Housing	1.0%	0.6%	1.0%
Friends	0.5%	0.5%	1.0%
Substance Use	0.4%	0.3%	0.5%
Employment/Education	0.3%	0.6%	0.8%
Finances	0.3%	0.7%	0.5%
Legal	0.3%	0.1%	0.7%
Spirituality	0.3%	0.1%	1.5%
Abuse/Neglect	0.0%	0.0%	0.0%
Food/Nutrition	0.0%	0.0%	0.3%
Administrative Call	0.0%	0.1%	0.0%

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

Calls Transferred between Warmline and NMCAL	April '18	March '18	April '17
from NMCAL to Warmline	11	5	22
from Warmline to NMCAL	4	1	2

