

New Mexico Crisis and Access Line - November 2013 Utilization Report

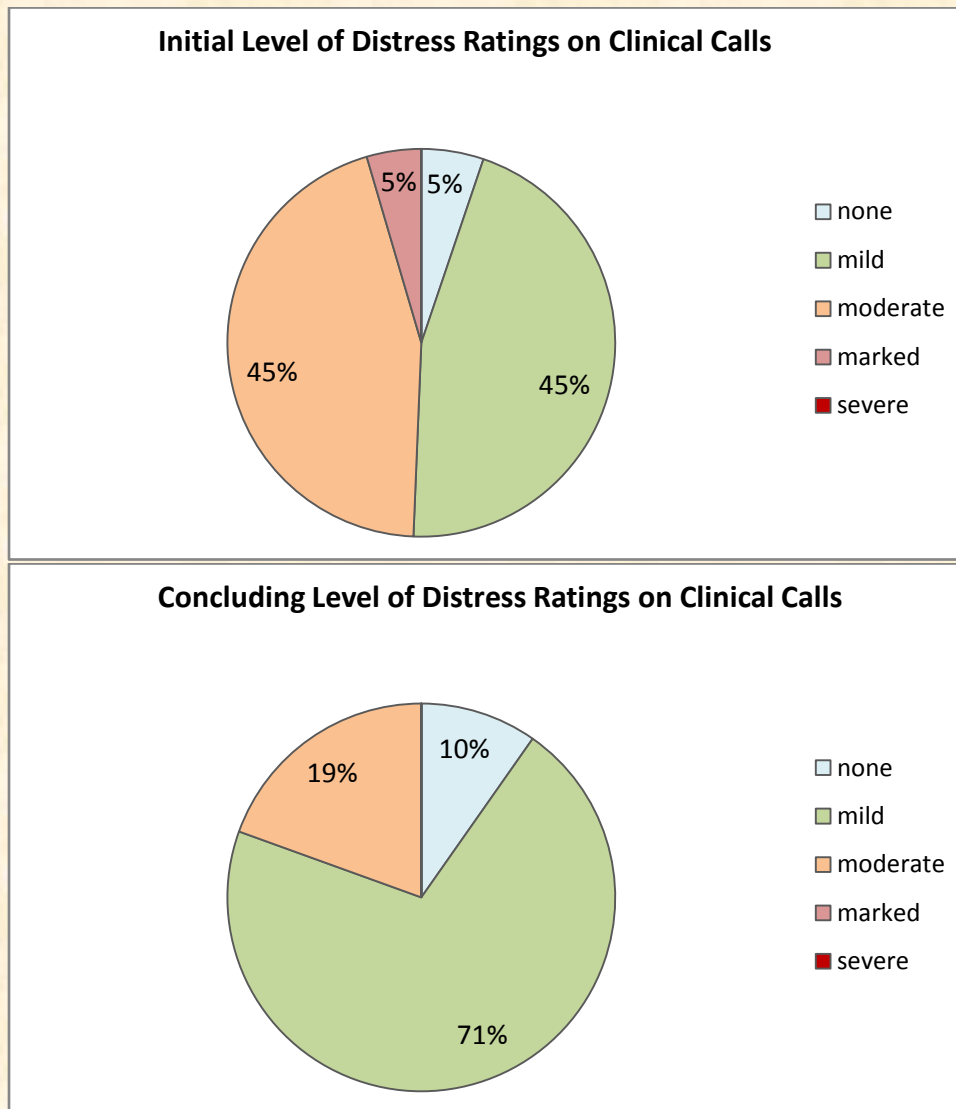
In November 2013, NMCAL handled 251 calls. Under separate contracts, an additional 250 calls were answered for CSA crisis lines in New Mexico.

November 2013: Calls Answered by Type	
NMCAL CALLS	251
Inbound Clinical Calls	167
- Calling about Self	143
- Calling about a Child	6
- Calling about another Adult	18
Outbound Calls	19
Information/Referral Calls	14
Seeking information about NMCAL	5
Administrative	5
Hang-ups/Wrong #s/Internal Test Calls	41
CALLS ANSWERED FOR CSA CRISIS LINES	250
TOTAL CALLS ANSWERED FOR NEW MEXICO	501

November 2013: NMCAL Utilization	
Total Calls Handled	251
Service Level (answered under 30 sec)	86.7%
Abandonment Rate	3.7%
Average Speed of Answer	17 sec
Average Call Length (all calls)	9.9 min
Average Call Length (Clinical calls)	14 min



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.



In 49% of clinical calls, level of distress was initially rated as moderate or higher. In 70% of those calls, the level of distress was reduced by the end of the call.



Level of Care of Clinical Calls	
Routine	76%
Urgent	22%
Emergent	2%

Primary Presenting Problem in Calls	
Alcohol/Drugs	7%
Anger Management	1%
Anxiety	27%
Child	2%
Depression	11%
Family	3%
Grief/Loss	2%
Medication	4%
Relationship/Marital	3%
Suicide	12%
Other	28%

While it was not always the presenting issue, concerns related to suicidal ideation were reported on 25% of clinical calls. Concerns related to drug or alcohol abuse were reported on 21% of clinical calls.

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. Restrictive outcomes include caller voluntarily going to a hospital or calling 911, our transferring a caller to emergency services, making an abuse report, or dispatching police (with or



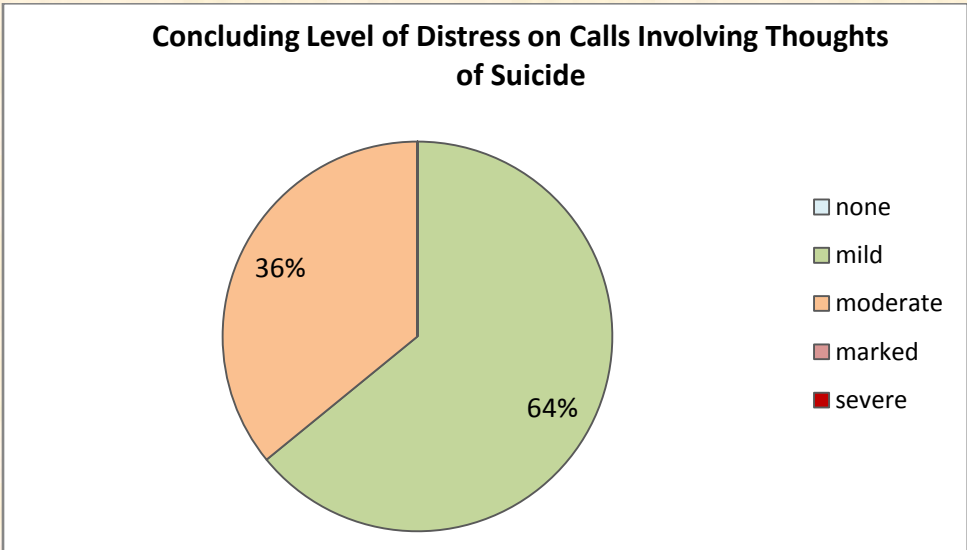
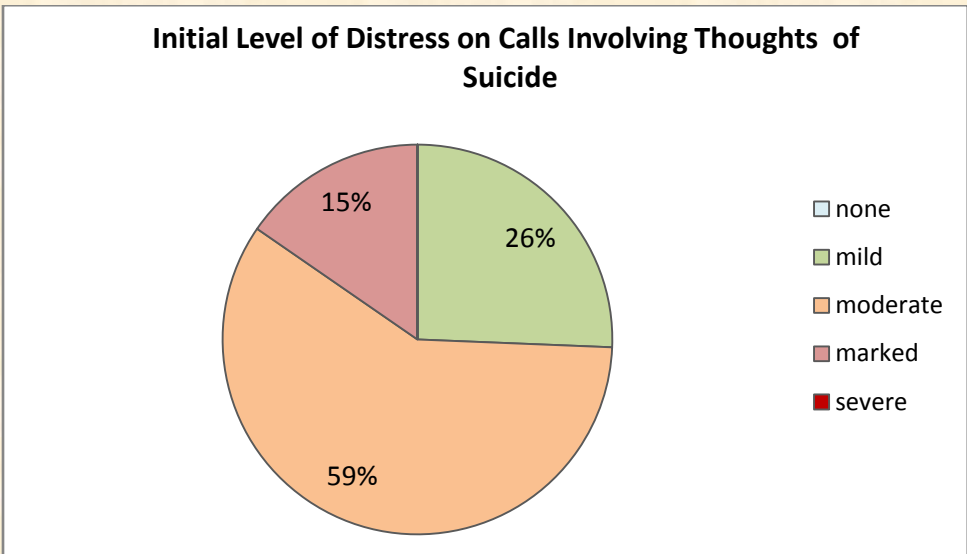
without caller’s consent). These are the clinical outcomes of the NMCAL calls for November.

Clinical Disposition For All Counseling Calls	
Caller stabilized by clinician, and referred to community resources if appropriate.	96%
Clinician made a child abuse report.	1%
Caller agreed to go to the hospital.	1%
Caller agreed to take person of concern to the hospital.	1%
Caller conferenced to 911 due to immediate danger.	1%

In November, 39 NMCAL callers reported concerns about suicide – either for themselves, or for the person of concern. In 28 of these cases, the caller reported thoughts of suicide for him or herself. In 9 cases, the caller was relaying concerns about another adult. In 2 cases, the caller was relaying concerns about a child.

Clinical Disposition on Calls Involving Thoughts of Suicide	
Caller stabilized by clinician, and referred to community resources if appropriate.	94%
Caller agreed to take person of concern to the hospital.	3%
Caller conferenced to 911 due to immediate danger.	3%





In 74% of calls involving thoughts of suicide, the level of distress was initially rated as moderate or higher. In 69% of those calls, the level of distress was reduced by the end of the call.

