

# New Mexico Crisis and Access Line - August 2014 Utilization Report

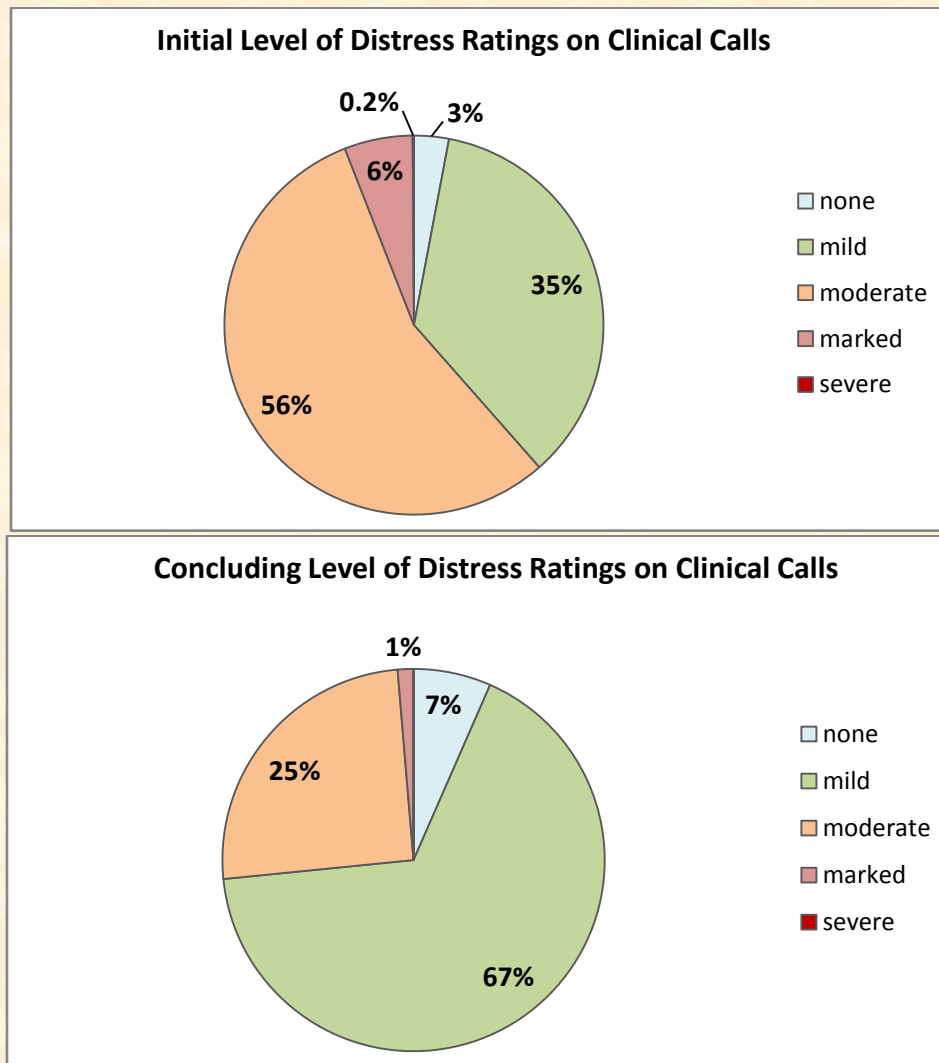
In August 2014, NMCAL handled 1483 calls. This includes 399 calls connected to us by the National Suicide Prevention Lifeline. Under separate contracts, an additional 234 calls were answered for CSA crisis lines in New Mexico.

<b>August 2014: Calls Answered by Type</b>	
<b>NMCAL CALLS</b>	<b>1483</b>
Inbound Clinical Calls	1032
- Calling about Self	868
- Calling about a Child	20
- Calling about another Adult	144
Outbound Calls	138
Information/Referral Calls	57
Seeking information about NMCAL	14
Administrative	18
Hang-ups/Wrong #s/Internal Test Calls	224
<b>CALLS ANSWERED FOR CSA CRISIS LINES</b>	<b>234</b>
<b>TOTAL CALLS ANSWERED FOR NEW MEXICO</b>	<b>1717</b>

<b>August 2014: NMCAL Utilization</b>	
Total Calls Handled	1483
Service Level (answered under 30 sec)	89.6%
Abandonment Rate	1.5%
Average Speed of Answer	13 sec
Average Call Length (all calls)	12 min
Average Call Length (Clinical calls)	17 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 61% of clinical calls, level of distress was initially rated as moderate or higher. In 68% of those calls, the level of distress was reduced by the end of the call.



Level of Care of Clinical Calls	
Routine	61%
Urgent	38%
Emergent	1%

Primary Presenting Problem in Calls	
Alcohol/Drugs	8%
Anger Management	1%
Anxiety	25%
Child	2%
Danger to Others	1%
Depression	11%
Family	7%
Grief/Loss	2%
Medication	2%
Relationship/Marital	5%
Suicide	16%
Workplace Issue	0.1%
Other	20%

While it was not always the presenting issue, concerns related to suicide were reported on 38% of clinical calls. Concerns related to drug or alcohol abuse were reported on 28% 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. The following tables show the clinical outcomes of the NMCAL calls for August.



<b>Clinical Outcome For All Counseling Calls</b>	
Caller stabilized by clinician, and referred to community resources if appropriate.	96%
Clinician made an abuse report.	0.2%
Caller will take the person of concern to the hospital.	0.4%
Caller agreed to go to the hospital.	1%
Caller agreed to call 911 regarding immediate danger to a third party.	1%
Caller conferenced to 911 due to immediate danger.	0.3%
Clinician contacted police with caller's consent.	0%
Clinician contacted police without caller's consent.	1%

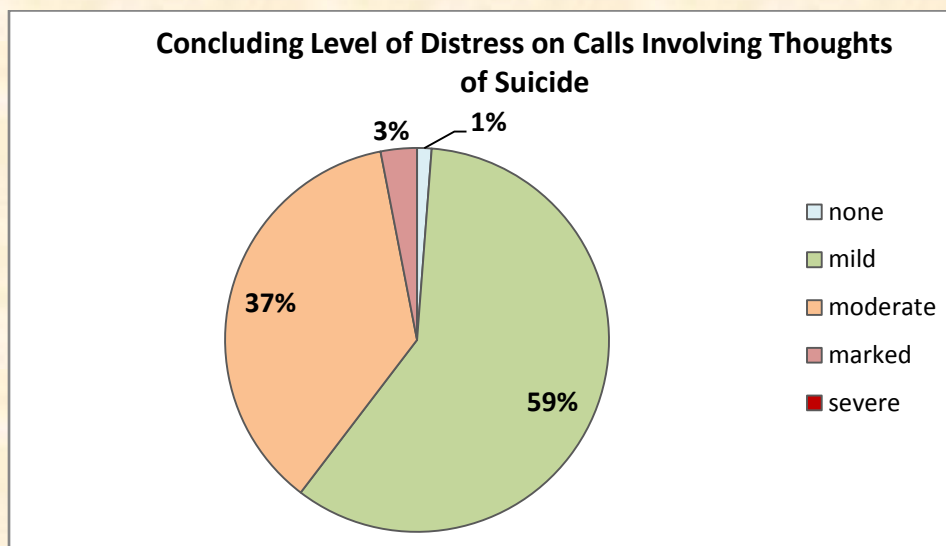
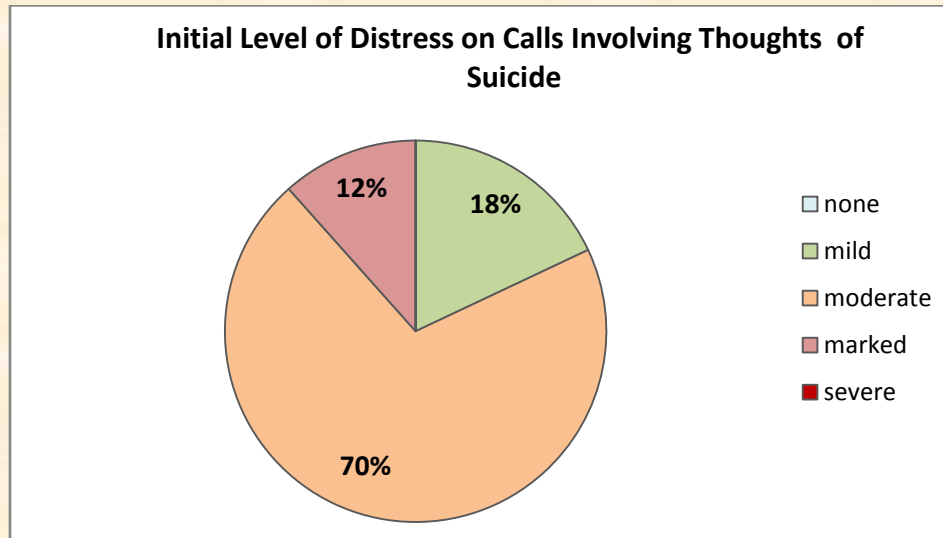
In August, 335 NMCAL callers reported concerns about suicide – either for themselves, or for the person of concern. NMCAL clinicians work with our callers to try to deescalate the emergency and create safety plans. We only involve hospital or emergency services when there is no less intrusive way to keep our callers safe.

<b>Clinical Outcome on Calls Involving Thoughts of Suicide</b>	
Caller stabilized by clinician, and referred to community resources if appropriate.	93%
Caller will take the person of concern to the hospital.	1%
Caller agreed to go to the hospital.	1%
Caller agreed to call 911 regarding immediate danger to a third party.	2%
Caller conferenced to 911 due to immediate danger.	1%
Clinician contacted police with caller's consent.	0%



Clinician contacted police without caller's consent.

2%



In 81% of calls involving thoughts of suicide, the level of distress was initially rated as moderate or higher. In 53% of those calls, the level of distress was reduced by the end of the call.

