



December 2017 New Mexico Utilization Report

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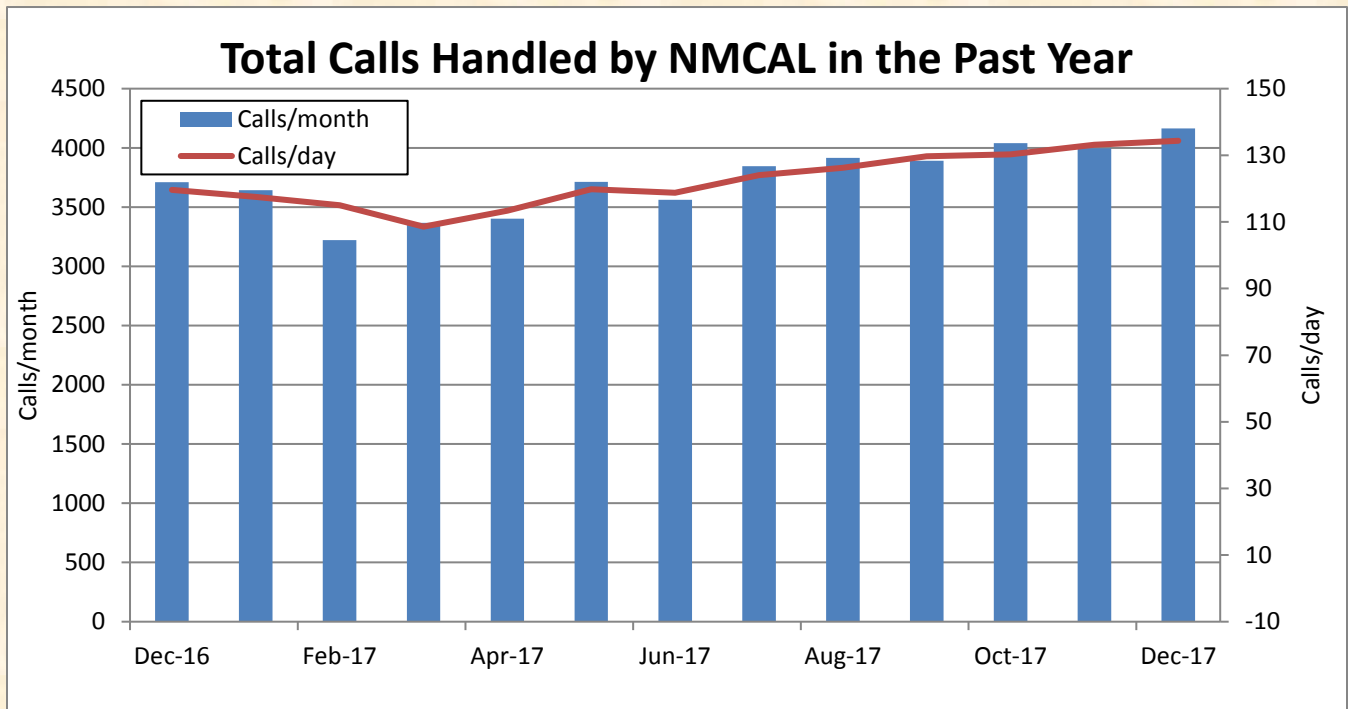
PROGRAM OVERVIEW SUMMARY

Year to date the New Mexico Crisis and Access Line (NMCAL) programs have handled a total of 44,753 calls. This includes 19,968 calls on the Statewide Crisis and Access Line, 4,303 New Mexico calls for the National Suicide Prevention Lifeline (NSPL), 12,629 calls for the Peer-to-Peer Warmline, and 7,853 after-hours calls forwarded from New Mexico's Behavioral Health Core Service Agencies (CSA's).

Calls Answered by Type	December	June	January
Total Statewide Crisis Line + NSPL Calls	2,258	1,973	1,732
Total Inbound Calls	1,689	1,676	1,386
Calling about Self	1,531	1,559	1,228
Calling about a Child	35	29	33
Calling about another Adult	123	88	125
Outbound Crisis Line Calls	142	86	107
Information/Referral Calls	32	23	47
Seeking information about NMCAL	12	10	19
Public Safety Calls	1	12	13
Administrative	8	9	12
Other	374	335	148
Warmline Calls	1,188	958	1,033
Calls Answered For Core Service Agencies	719	605	708
TOTAL CALLS ANSWERED	4,165	3,714	3,643



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		10
Job Fair		0
NMCAL Presentations to the Community	285	7
Prevention Trainings Sponsored by NMCAL	296	6
Participation in Community Meetings		10
Media Encounters		1
Media Mentions		<i>an estimated</i> 120+
TOTALS	581	154

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 December 2017.

December 2017: Crisis Line Utilization	
Total Calls Handled on the Crisis Line	2,258
Service Level (answered under 30 sec)	92.0%
Abandonment Rate	1.3%
Average Speed of Answer	13 sec
Average Call Length (Crisis Line calls)	16.5 min

Level of Care - Crisis Line Calls	
Routine	71.3 %
Urgent	26.3 %
Emergent	2.4 %

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		
	Dec	Jun	Jan		Dec	Jun	Jan
Bernalillo	589	501	677	Torrance	7	3	9
San Juan	150	34	50	San Miguel	6	11	7
Taos	85	24	13	Luna	6	6	1
Dona Ana	78	246	183	Lincoln	5	9	2
Santa Fe	69	41	79	Cibola	5	3	5
Sandoval	61	47	41	Colfax	2	0	5
Otero	36	32	36	Los Alamos	1	5	2
Grant	30	17	6	Mora	1	0	1
Chaves	23	29	24	Quay	1	1	0
Valencia	18	29	43	Roosevelt	0	2	1
Eddy	13	3	6	Catron	0	1	2
Sierra	12	3	6	Union	0	0	1
McKinley	11	25	13	De Baca	0	0	0
Curry	9	12	4	Guadalupe	0	0	0
Rio Arriba	9	6	19	Harding	0	0	0
Socorro	9	9	3	Hidalgo	0	0	0
Lea	7	9	7	(outside NM)	36	14	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 might relate to the primary presenting problem.



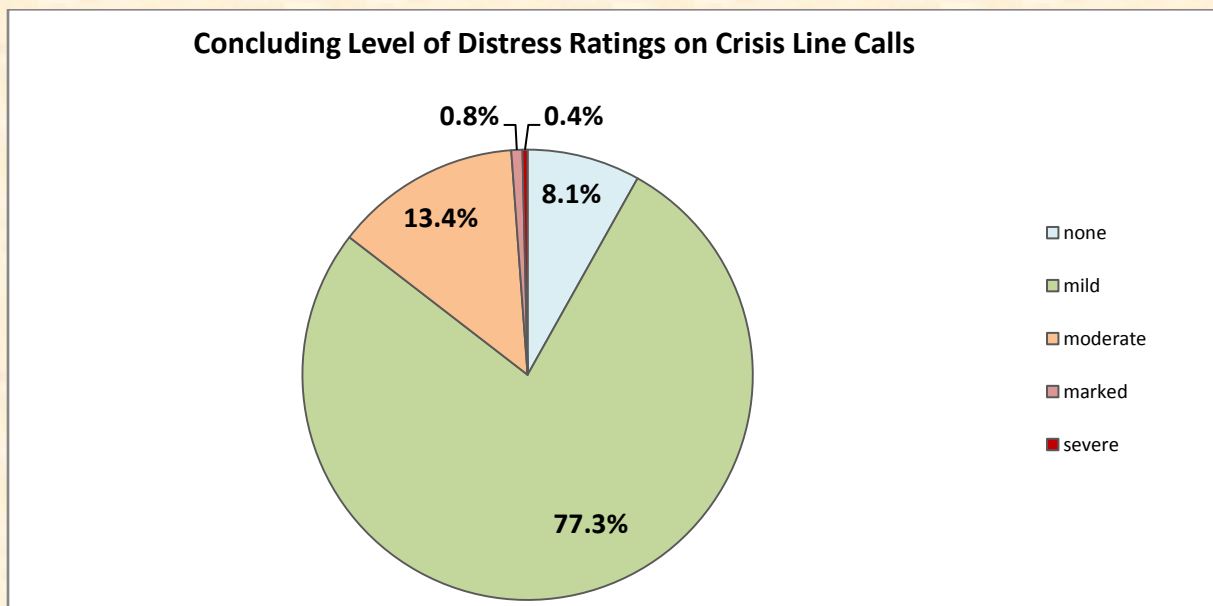
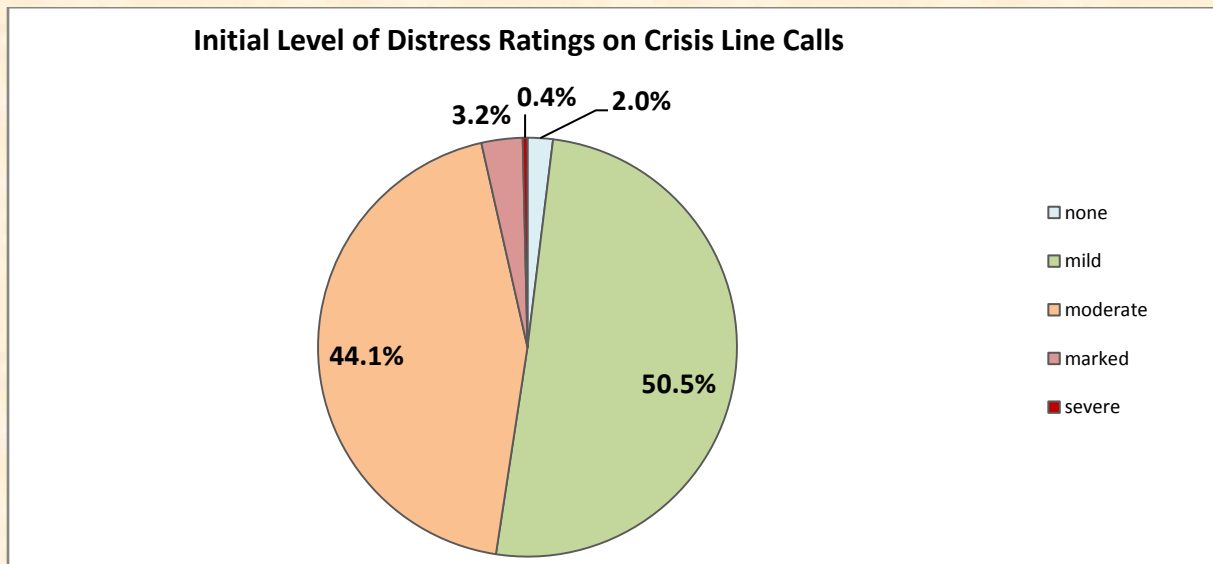
Primary Presenting Problem During Crisis Line Calls	December	June	January
Anxiety	21.9 %	21.2%	28.4%
Situational Stress	18.0 %	16.1%	12.9%
Suicide	12.9 %	14.2%	14.4%
Cognitive Concerns/Psychosis	12.2 %	9.0%	4.5%
Depression	11.4 %	9.5%	10.5%
Alcohol/Drugs	4.8 %	5.3%	6.3%
Relationship/Marital	3.5 %	3.9%	2.3%
Family	2.8 %	4.0%	4.0%
Grief/Loss	1.5 %	2.7%	1.8%
Intentional Self Injury	1.3 %	0.7%	0.6%
Medication	1.1 %	0.8%	0.5%
Child	0.7 %	1.0%	0.8%
Anger Management	0.5 %	1.1%	2.9%
Domestic Violence	0.5 %	0.7%	0.8%
Danger to Others	0.2 %	0.3%	0.8%
Sexual Assault	0.2 %	0.3%	0.2%
Workplace Issue/Career Assistance	0.0 %	0.1%	0.2%
Other	6.5 %	9.0%	8.2%

Levels of Distress on Crisis Line Calls

Crisis and Access Line counselors rate the initial and concluding level of distress on every crisis line call. 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.



On every crisis line call, the NMCAL counselor assesses the current situation and evaluates how the caller can be supported through the call. The counselor 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 Calls

Caller stabilized by counselor, and referred to community resources if appropriate	96.2 %
Counselor made an abuse report	0.7 %
Caller will take the person of concern to the hospital	0.1 %
Caller agreed to go to the hospital	0.3 %
Caller agreed to call 911 regarding immediate danger	0.2 %
Caller conferenced to 911 due to immediate danger	1.5 %
Counselor contacted police with caller's consent	0.3 %
Counselor contacted police without caller's consent	0.7 %

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 24.7% of the calls in December. The 405 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.

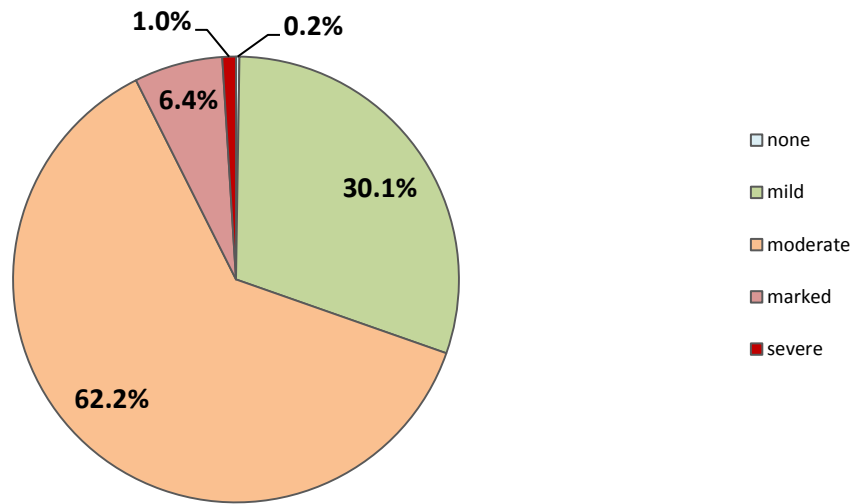
Clinical Disposition of All Crisis Line Calls Involving Suicide

Caller stabilized by counselor, and referred to community resources if appropriate	89.1 %
Caller will take the person of concern to the hospital	0.0 %
Caller agreed to go to the hospital	1.0 %
Caller agreed to call 911 regarding immediate danger to a third party	0.7 %
Caller conferenced to 911 due to immediate danger	5.4 %
Counselor contacted police with caller's consent	1.0 %
Counselor contacted police without caller's consent	2.7 %

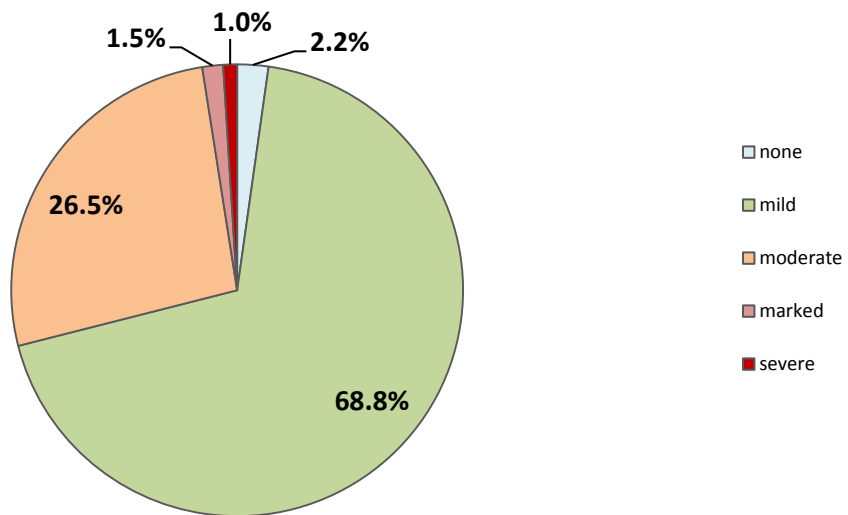
Levels of Distress on Crisis Line Calls Involving Thoughts of Suicide



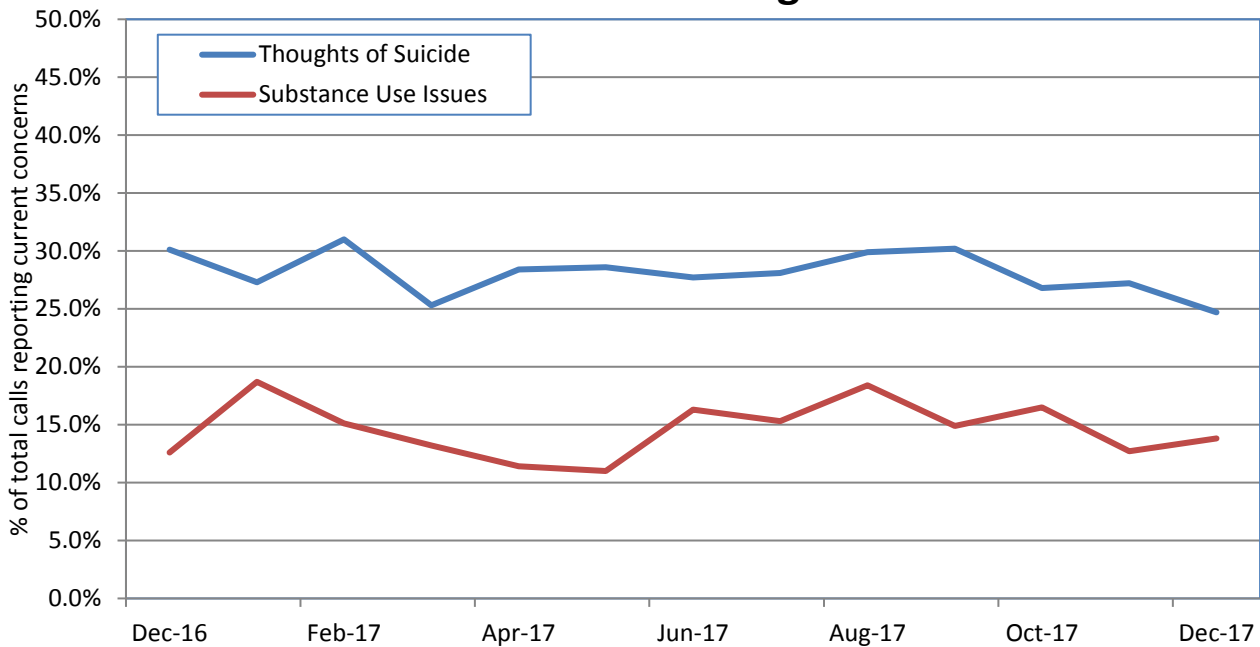
Initial Level of Distress on Calls Involving Thoughts of Suicide



Concluding Level of Distress on Calls Involving Thoughts of Suicide



Trends in Presenting Concerns



Calls Involving Substance Use

Concerns related to mental health often co-occur with substance use. In December 13.8% of crisis line callers (226 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	November	December	2017
NMCAL Clinical calls related to Opioid Use	21	12	33
Warmline calls related to Opioid Use	6	7	13



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 12,629 calls during its operating hours of 3:30pm to 11:30pm MT.

Warmline Utilization Call Data	December	June	January
Total Calls Handled * during Warmline operating hours of 3:30pm to 11:30pm MT	1,188	966	1033
Average Call Length (all Warmline calls)	14.3 min	14.6 min	15.7 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 to talk to a peer support can 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	
Caller reports feeling supported by the call	96.9 %
Caller received referrals	0.6 %
Caller was transferred to an NMCAL counselor	0.3 %
Emergency call to Public Safety was made	0.2 %
Other/None of the Above	2.0 %



The Warmline answers calls for people seeking support for themselves, or someone else. All callers are discussing struggles that are being experienced related to health concerns which relate to 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	December	June	January
Mental Health	95.9 %	92.4%	82.6%
Healthcare	1.4 %	1.1%	4.9%
Relationships	0.7 %	2.7%	2.5%
Family	0.6 %	0.9%	1.5%
Substance Use	0.4 %	0.3%	3.9%
Spirituality	0.3 %	0.5%	0.5%
Abuse/Neglect	0.3 %	0.0%	0.0%
Friends	0.2 %	0.1%	0.4%
Housing	0.2 %	0.6%	1.8%
Legal	0.1 %	0.5%	0.6%
Finances	0.1 %	0.0%	0.4%
Administrative Call	0.0 %	0.6%	0.1%
Employment/Education	0.0 %	0.2%	0.3%
Food/Nutrition	0.0 %	0.1%	0.4%

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	December	June	January
from NMCAL to Warmline	14	12	6
from Warmline to NMCAL	4	5	8

