



# March 2019

## New Mexico Utilization Report

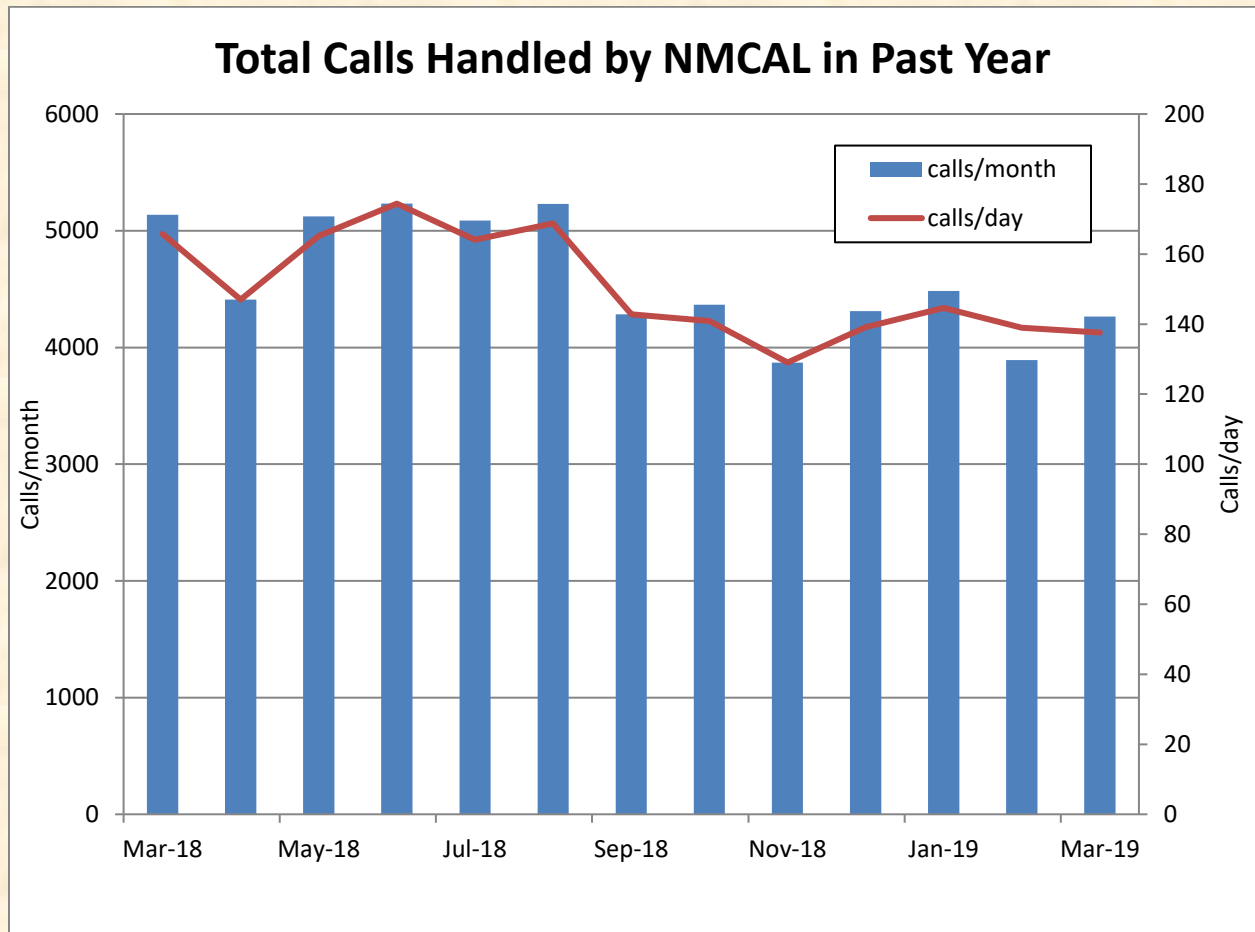
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### PROGRAM OVERVIEW

Year to date the New Mexico Crisis and Access Line (NMCAL) programs have handled a total of 12,639 calls. This includes 5,071 calls on the Statewide Crisis and Access Line, 1,706 New Mexico calls from the National Suicide Prevention Lifeline (NSPL), 3,521 calls and 315 text conversations on the Peer-to-Peer Warmline, and 2,341 after-hours calls forwarded from New Mexico's Behavioral Health Core Service Agencies (CSA's).

Calls Answered by Type	Mar 2019	Feb 2019	Mar 2018
<b>Total Statewide Crisis Line + NSPL Calls</b>	<b>2,301</b>	<b>2,096</b>	<b>2,223</b>
Total Inbound Calls	1,794	1,654	1,882
Calling about Self	1,602	1,464	1,713
Calling about a Child	36	40	45
Calling about another Adult	156	150	124
Outbound Crisis Line Calls	199	143	153
Information/Referral Calls	41	27	44
Seeking information about NMCAL	5	15	11
Public Safety Calls	5	6	2
Administrative	11	9	12
Other	246	242	604
<b>Warmline Calls</b>	<b>1,196</b>	<b>1,089</b>	<b>1,281</b>
Warmline Text Message	99	81	15
<b>Calls Answered For Core Service Agencies</b>	<b>767</b>	<b>706</b>	<b>1,148</b>
<b>TOTAL CALLS ANSWERED</b>	<b>4,264</b>	<b>3,891</b>	<b>5,137</b>

**There is always someone here to hear you at the  
New Mexico Crisis and Access Line (NMCAL) & Peer-to-Peer Warmline**



**Integrated Program**

Everyone deals with pain and emotions differently. As such, NMCAL offers an integrated program where crisis line counselors, care associates, and crisis responders work in conjunction with Warmline peer support specialists to ensure that callers receive the most appropriate level of care. There are times when calls will be transferred to, or from, the crisis line.

<b>Calls Transferred between Programs</b>	<b>Mar '19</b>	<b>Feb '19</b>	<b>Mar '18</b>
from NMCAL to Warmline	10	3	5
from Warmline to NMCAL	1	0	1



# CRISIS LINE UTILIZATION DATA

## *New Mexico Crisis and Access Line*

The following tables and charts provide information about the clinical 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 March 2019.

Crisis Line Utilization	Mar '19	Feb '19	Mar '18
Total Calls Handled on the Crisis Line	2,301	2,096	2,708
Service Level (answered under 30 sec)	78.8%	81.4%	92.0%
Abandonment Rate	4.3%	3.6%	1.4%
Average Speed of Answer	46 sec	21 sec	12 sec
Average Call Length (Crisis Line calls)	21.7 min	20.5 min	17 min

We understand that every struggle is different. NMCAL offers immediate counseling to anyone that may need it, and provides invaluable support at critical times by connecting individuals to local services, when needed. We know that being here to hear people, and offering a simple act of kindness, can help a person feel less alone, supported, and able to keep going.

Level of Care Crisis Line Calls	Mar '19	Feb '19	Mar '18
Routine	61.0%	59.6%	70.3%
Urgent	33.8%	35.2%	27.5%
Emergent	5.3%	5.2%	2.2%



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		
	Mar '19	Feb '19	Mar '18		Mar '19	Feb '19	Mar '18
Bernalillo	780	677	904	Grant	10	16	43
Santa Fe	107	103	75	Los Alamos	7	7	4
Otero	77	71	38	Roosevelt	6	6	2
Dona Ana	76	50	90	Torrance	6	5	16
Sandoval	63	80	57	San Miguel	5	4	8
Curry	41	58	83	Lea	3	5	7
Rio Arriba	27	11	11	Luna	3	5	5
Valencia	21	34	43	Guadalupe	2	1	0
Colfax	20	4	1	Mora	2	1	1
Socorro	17	20	24	Sierra	2	7	16
Chaves	15	12	39	Quay	2	2	2
Taos	14	14	18	De Baca	1	1	0
Cibola	14	13	8	Harding	1	0	0
McKinley	13	12	9	Hidalgo	1	2	1
Eddy	12	16	15	Union	1	0	0
Lincoln	12	4	3	Catron	0	5	0
San Juan	11	18	90	(outside NM)	65	29	41



The primary presenting problem on a clinical call 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.

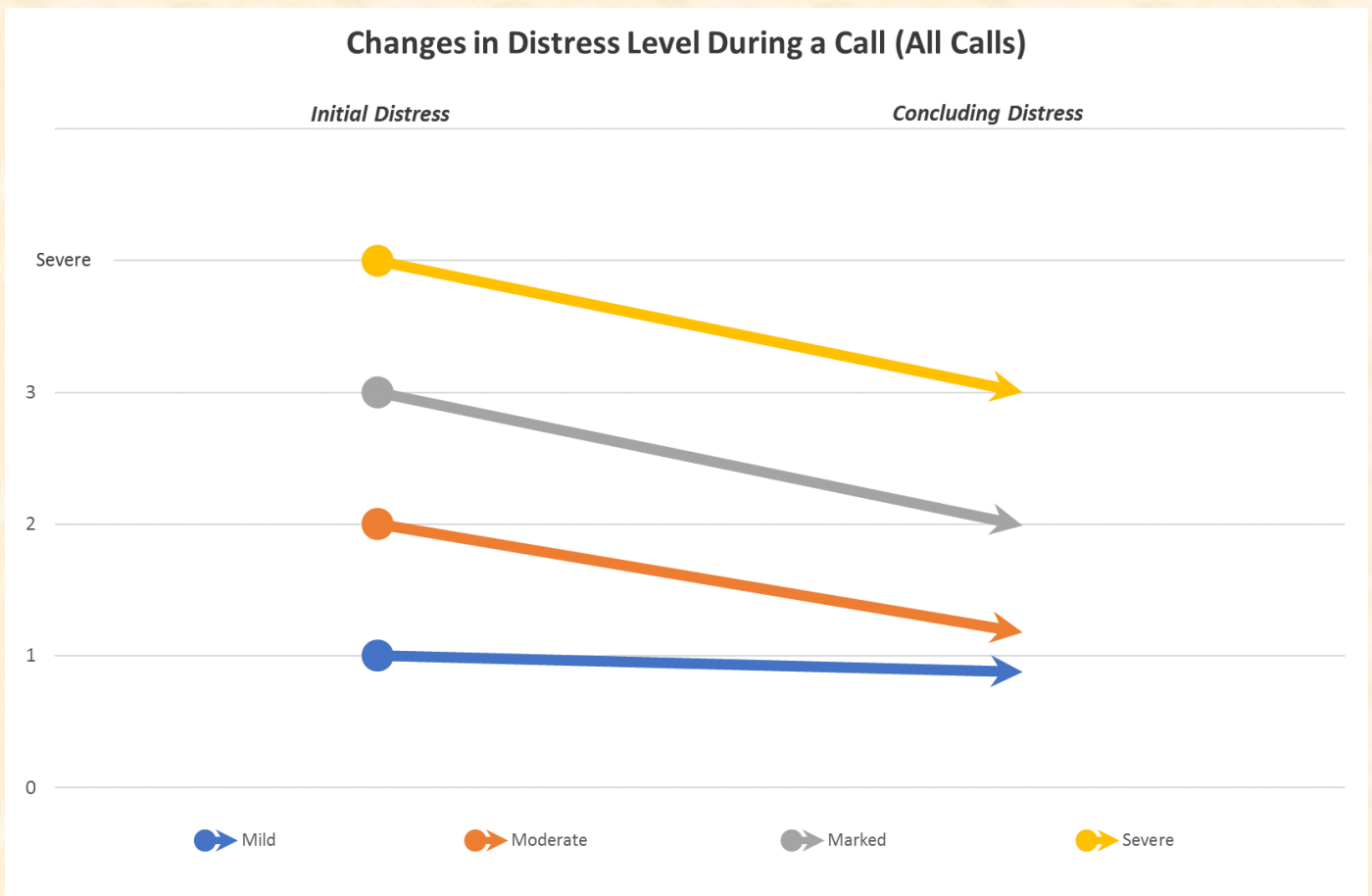
Primary Presenting Problem During Crisis Line Calls	Mar '19	Feb '19	Mar '18
Anxiety	27.9%	21.8%	34.2 %
Suicide	25.6%	19.2%	17.6 %
Situational Stress	24.7%	18.3%	18.7 %
Depression	9.5%	8.5%	10.0 %
Alcohol/Drugs	7.8%	9.4%	8.4 %
Relationship/Marital	7.0%	3.9%	4.0 %
Cognitive Concerns/Psychosis	4.4%	3.1%	18.1 %
Family	3.6%	3.5%	2.3 %
Grief/Loss	2.1%	1.1%	2.6%
Interpersonal Violence	2.1%	1.0%	0.8%
Medication	1.2%	0.4%	1.9%
Intentional Self Injury	1.0%	0.7%	1.9%
Child	0.8%	1.1%	1.2%
Danger to Others	0.8%	0.2%	0.5%
Sexual Assault	0.7%	0.1%	0.3%
Anger Management	0.6%	0.6%	0.8%
Workplace Issue/Career Assistance	0.6%	0.4%	0.5%
Other	8.3%	6.7%	10.6%



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

During a clinical 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	Mar '19	Feb '19	Mar '18
Caller stabilized by counselor, and referred to community resources if appropriate	93.3%	93.9%	96.5%
Counselor made an abuse report	1.5%	1.0%	0.8%
Caller will take the person of concern to hospital	0.1%	0.4%	0.2%
Caller agreed to go to the hospital	0.4%	0.3%	0.6%
Caller agreed to call 911 regarding immediate danger	0.3%	0.1%	0.2%
Caller conferenced to 911 due to immediate danger	2.5%	2.6%	0.6%
Counselor contacted police with caller's consent	0.1%	0.4%	0.1%
Counselor contacted police without caller's consent	1.9%	1.3%	0.9%

### 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 32.9% of the calls in March. The 513 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	Mar '19	Feb '19	Mar '18
Caller stabilized by counselor, and referred to community resources if appropriate	84.7%	85.3%	89.9%
Caller will take the person of concern to the hospital	0.2%	0.9%	1.0%
Caller agreed to go to the hospital	1.4%	0.7%	2.0%
Caller agreed to call 911 regarding immediate danger to a third party	0.8%	0.0%	0.8%
Caller conferenced to 911 due to immediate danger	7.6%	7.9%	2.5%
Counselor contacted police with caller's consent	0.2%	1.4%	0.0%
Counselor contacted police without caller's consent	5.0%	3.7%	3.8%



## Calls Involving Substance Use

NMCAL is here to support people that may be experiencing a substance use concern, either for themselves, or for the person of concern they are calling about. In March 20.6% of clinical crisis line callers (321 people) reported concerns related to drug and/or alcohol use impacting their lives.

In March, callers identified that Opioids were a primary concern on 2% of the calls on the clinical crisis line, and on 0.3% of the calls on the Peer-to-Peer Warmline.

Calls Related to Opioid Use	Mar '19	Feb '19	Mar '18
NMCAL Clinical calls related to Opioid Use	31	28	44
Warmline calls related to Opioid Use	4	4	6

## Veterans

Crisis feels different for everybody. For veterans, crises can be heightened by experiences they may have had associated with their military service. Veterans often have concerns related to mental health and substance use which arose from a wide range of situations that were experienced before, during, and/or after their military service.

Veterans, active service members, and their loved ones can find relief by talking to someone.

Caller Identified as a Veteran	Mar '19	Feb '19	Mar '18
NMCAL calls	144	114	99
Warmline calls	36	23	7

*A simple act of kindness to people can help someone feel less alone*





# 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 3,521 calls during phone operating hours of 3:30pm to 11:30pm MT, and 315 text conversations during text operating hours of 6:00pm to 11:00pm MT. The Warmline answers calls and text messages for people seeking support for themselves, or someone else.

Warmline Utilization Data	Mar 2019	Feb 2019	Mar 2018
Total Calls Handled	1,196	1,089	1,281
Average Call Length (all Warmline calls)	18.1 min	17.7 min	17.7 min

The Warmline answers calls and text messages for people seeking support for themselves, or someone else.

Outcome of Warmline Calls	Mar '19	Jan '19	Mar '18
Caller reports feeling supported by the call	98.6%	98.9%	96.4%
Caller received referrals	0.2%	0.1%	0.5%
Caller was transferred to an NMCAL counselor	0.1%	0.0%	0.1%
Emergency call to Public Safety was made	0.0%	0.0%	0.0%
Other/None of the Above	1.0%	1.0%	3.1%

Warmline Text Message Data	Mar 2019	Feb 2019	Mar 2018
Total *Conversations	99	81	15

*\*Text Message Conversation Data outlines the total conversations peer supports engaged in with people. These numbers do not outline the break down regarding the number of text messages that were exchanged during each of those conversations.*



Callers discuss matters regarding physical, mental, behavioral, emotional, and/or social well being for themselves, or someone they know. Callers may share thoughts which could be associated with a secondary concern.

*Primary Presenting Problem in Warmline Calls	Mar '19	Feb '19	Mar '18
Mental Health	N/A	N/A	91.7%
Isolation / Loneliness	30.0%	59.3%	N/A
Anxiety / Situational Stress	25.3%	43.2%	N/A
Interpersonal Relationships	9.4%	14.9%	2.7%
Depression	5.8%	10.6%	N/A
Substance Use	5.4%	0.5%	0.3%
Anger Management	1.6%	3.5%	N/A
Medication / Wellness Check In	1.3%	1.0%	N/A
Resources / Community Referrals	0.9%	0.2%	N/A
Cognitive Concerns / Psychosis	0.7%	1.0%	N/A
Abuse/Neglect	0.7%	1.9%	0.0%
Grief / Loss	0.6%	1.5%	N/A
Thoughts of Suicide	0.3%	0.5%	N/A
Thoughts of Self-Injury	0.2%	0.2%	N/A
Sexual Assault	0.1%	0.2%	N/A
Healthcare	N/A	N/A	1.0%
Family	N/A	N/A	1.7%
Friends	N/A	N/A	0.5%
Employment/Education	N/A	N/A	0.6%
Housing	N/A	N/A	0.6%
Spirituality	N/A	N/A	0.1%
Finances	N/A	N/A	0.7%
Food/Nutrition	N/A	N/A	0.0%
Legal	N/A	N/A	0.1%
Administrative Call	0.0%	0.2%	0.1%
Other Mental Health Concern	2.0%	1.9%	N/A
Other	15.8%	18.9%	N/A



*\*Primary Presenting Problem of Warmline Calls was updated in January 2019, in an effort to capture greater understanding of the mental health concern Warmline callers were seeking support for.*

Warmline callers are asked for their county of residence, as a way for peer supports to assist the callers in engaging with additional resources and support services beyond the call.

It is important to note that the responses are not independently verified, that this data is not necessarily predictive of an overall need for services in a county, and that there are community members that do not yet know about the Warmline resource.

Some things to keep in mind when reviewing demographic information include: (1) multiple callers chose not to share their demographic information during the call, (2) a large number of Warmline callers contact the program frequently, and (3) being an integrated program, callers have choice: some callers contact both the crisis line and the warmline, while other callers contact either the crisis line or the warmline.

*County of Residence	Total Calls			*County of Residence	Total Calls		
	Mar '19	Feb '19	Mar '18		Mar '19	Feb '19	Mar '18
Bernalillo	467	463	N/A	Curry	0	0	N/A
Valencia	133	159	N/A	De Baca	0	0	N/A
Sierra	75	59	N/A	Guadalupe	0	0	N/A
Santa Fe	48	39	N/A	Harding	0	0	N/A
Taos	47	50	N/A	Hidalgo	0	0	N/A
San Miguel	42	43	N/A	Lea	0	0	N/A
Dona Ana	33	21	N/A	Lincoln	0	0	N/A
Grant	32	40	N/A	McKinley	0	0	N/A
Sandoval	25	28	N/A	Mora	0	0	N/A
Rio Arriba	19	23	N/A	Otero	0	2	N/A
Eddy	1	7	N/A	Quay	0	0	N/A
Los Alamos	1	0	N/A	Roosevelt	0	0	N/A
Luna	1	0	N/A	San Juan	0	0	N/A
Catron	0	0	N/A	Socorro	0	0	N/A
Chaves	0	1	N/A	Torrance	0	0	N/A
Cibola	0	0	N/A	Union	0	0	N/A
Colfax	0	0	N/A	(outside NM)	0	0	N/A



\*Reporting on County of Residence for Warmline Calls began in January 2019.

# PUBLIC AWARENESS

## Community Engagement

Outreach, collaborations, trainings, and partnership building continues between NMCAL and shareholders, organizations, hospitals, public safety, communities, schools, volunteers, and stakeholders throughout the state.

Public Awareness & Community Engagement						
	# of encounters			# of participants		
	Mar '19	Feb '19	Mar '18	Mar '19	Feb '19	Mar '18
Community Events	9	6	16			
NMCAL Presentations	5	17	15	259	291	921
Prevention Trainings	3	7	3	216	170	05
Community Meetings	23	27	19			
Media Encounters	2	4	2			
Media Mentions	250+	207+	60+			
<b>TOTALS</b>	<b>292</b>	<b>268</b>	<b>115</b>	<b>475</b>	<b>461</b>	<b>1,026</b>

## NMCAL is “Here to Hear You”

Call the Crisis Line 24 hours a day, 7 days a week, 365 days a year  
1-855-NMCRISIS (1-855-662-7474)

Call the Peer to Peer Warmline from 3:30p - 11:30p MT everyday  
1-855-4NM-7100 (1-855-466-7100)

Text the Peer to Peer Warmline from 6:00p - 11:00p MT everyday  
1-855-4NM-7100 (1-855-466-7100)

TTYL Access available by calling 1-855-227-5485

For more information on the New Mexico Crisis and Access Line, the Peer-to-Peer Warmline, or any of its programs, please visit the NMCAL website at  
[www.nmcrisisline.com](http://www.nmcrisisline.com)



