988
SUICIDE
& CRISIS
LIFELINE

NASMHPD Annual Meeting
July 2022

988 Partner Engagement

ONE-STOP-SHOP FOR 988 RESOURCES

- URL: www.samhsa.gov/988

- ABOUT 988

- PARTNER TOOLKIT

- DATA

- LIFELINE HISTORY

- MORE TO COME OVER TIME

SAMHSA 988 Partner Toolkit   988

PARTNER TOOLKIT ASSETS AS OF APRIL

- FACT SHEET (English and Spanish)

- KEY MESSAGES

- FAQS (Adding others as needed over time)

- E-NEWSLETTER TEMPLATE

- LOGOS & BRAND GUIDANCE

- SAMPLE RADIO PSA SCRIPTS

- 988 SLIDE DECK

988 Messaging Guidance   988

- Engage local leaders

- Align 988 promotional efforts to availability of your local resources. The National Action Alliance for Suicide Prevention co-led a 988 Messaging Task Force to create a 988 Messaging Framework. The Framework focuses heavily on the importance of connecting marketing to local 988 crisis contact center capacity to meet the anticipated demand.

- Use and build upon the print/digital materials in SAMHSA's 988 partner toolkit

- Consult guidance materials addressing when people should contact 988 and incorporate into any awareness promotion

- Seek to update existing processes and materials (e.g., web content, brochures, voice mail, discharge summaries) before developing new promotional channels

- Change references from the "National Suicide Prevention Lifeline" to the "988 Suicide & Crisis Lifeline" on websites, social media, and other materials

- Change links on websites and other materials that point to https://suicidepreventionlifeline.org/ to https://www.988Lifeline.org

- Evaluate impact of promotional efforts on overall service demand and efforts to address inequities in access and outcomes

Goal: Research-based campaign to encourage life-saving actions

Formative Research Project Overview

- Partnering with Action Alliance and Ad Council

- Kick off meeting June 6, 2022

- Timeline (6-9 months)
- Initial focus on populations at high risk of suicide

Formative Research Purpose

Identify knowledge, attitudes & beliefs of populations at higher risk of suicide, exploring:

- Risk perceptions
- Motivating factors and barriers to help-seeking, including using a service like 988
- Influencers
- Channel preferences for health information seeking

SAMHSA
Substance Abuse and Mental Health
Services Administration

Formative Research: Initial Focus

Audience segmentation set against populations at higher risk of suicide:

1. **Black & Hispanic youth & young adults (ages 13-34)** – seeking a mix of genders, racial diversity, geographic diversity and range of SES

2. **AI/AN youth & young adults (ages 13-34)** – seeking mix of genders, Tribal representation, geographic diversity (urban & rural) and range of SES

3. **LGBTQI+ youth and adults (ages 13-49)** – seeking mix of gender identity/sexual orientation, geographical, SES and racial/ethnic diversity

4. **Rural older men (ages 49 +)** – seeking mix of geographical and racial/ethnic diversity (with over sampling for white males), as well as range of SES

5. **Survivors of suicidal attempt/crisis (ages 18 – 55)** – seeking mix of genders, geographic & racial/ethnic diversity, with range of SES

SAMHSA
Substance Abuse and Mental Health
Services Administration

Central directory provides the **first aggregated resource** for job applicants and volunteers to find crisis centers across the network

In communications, this can serve as a **call to action to direct applicants** to a central resource to find openings across the network)

Is anticipated to be **improved on over time,** and represents an agile & iterative approach to building the 988 workforce

SAMHSA
Substance Abuse and Mental Health
Services Administration

988 PLAYBOOKS

- Holistic view of readiness for implementation of 988 for:
  - States, territories, tribes
  - Crisis contact centers
  - Public safety answering points (PSAPs)
  - Behavioral health providers
- Created with external partners across critical sectors
- Publishing on NASMHPD Website
  - www.nasmhpd.org

SNAPSHOT OF EXTERNAL PARTNERS

Defining what is required for 988 readiness for each audience

(categories and criteria)

Categories / criteria developed with partners ahead of this convening

→

Understanding current readiness and key challenges in preparing for 988

Discussed during previous convenings and engagement

→

Developing playbooks to support audiences in preparing for 988

Playbooks released April 2022

Playbooks are intended to support stakeholders in making progress on 988 readiness

Playbooks are...

- Intended to help crisis system stakeholders make progress across areas that are central to 988 readiness

- Identify best practices and examples seen in the field today

- Tailored to specific audiences

Playbooks are NOT...

- A mandate to implement any type of programming or expend funds

- A requirement tied to any current source of federal funding

Deep-dives follow for States, Territories, and Tribes playbook

A Operational readiness self-assessment

Non-evaluative self-assessment tool to assist an audience in gauging readiness for 988

For each criterion, audience can select the level that best captures their current state (either beginning, emerging, or solidified)

The self-assessment can help audiences identify where its strengths and gaps may be in preparing for 988

B Playbook content

Highlights potential approaches to support readiness for 988 across key criteria (to achieve "emerging" or "solidified" levels of readiness)

Identifies specific case studies of entities / organizations that have undertaken key initiatives to support 988 readiness

Provides references to additional information across topics

Overview of operational readiness categories

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Lifeline contact center capacity

Communications and external engagement

Financial sustainability

Legislation and oversight

Technology and data

Performance management

Crisis care continuum and capacity tracking

Behavioral healthcare capacity

Integrating lived experience into crisis systems

Integrating equity into crisis systems

Source: SAMHSA and NASMHPD, with input from planning partners

Criteria	Beginning	Emerging	Solidified
LIFELINE CONTACT CENTER CAPACITY			
What percent of projected calls are answered in-state/territory?[1]	State/territory will not have capacity to handle at least 90% of calls by April 2024	State/territory will have capacity to handle at least 90% of calls by April 2024	State/territory already has an in-state/in-territory answer rate of 90%
To what extent does the state/territory have a plan to achieve 24/7 primary coverage for calls state-/territory-wide?[2]	There is not a plan to achieve state-/territory-wide 24/7 coverage by July 2022	There is a plan in place to achieve state-/territory-wide 24/7 coverage by July 2022	State/territory already has 24/7 primary coverage for Lifeline calls
To what extent does state/territory have text/chat capabilities?	No Lifeline contact centers currently have chat/text capabilities, and there is no plan in place for at least one contact center to have capabilities by July 2022	No Lifeline contact centers currently have chat/text capabilities, but there is a plan in place for at least one contact center to have capabilities by July 2022	At least 1 Lifeline contact center currently has chat/text capabilities
What percent of chats/texts receive in-state/territory response?[2]	State/territory is not expected to have capacity to handle at least 50% of chats/texts by July 2023	State/territory will not have capacity to handle at least 50% of chats/texts by July 2022 but will have capacity to handle 50% of chats/texts by July 2023	State/territory will have capacity to handle at least 50% of chats/texts by July 2022 and 80% of chats/texts by July 2023
To what extent does the state/territory have a plan to achieve 24/7 primary coverage for chats/texts?[2]	There is not a plan to achieve state-/territory-wide 24/7 primary coverage for chats/texts by July 2023	There is a plan in place to achieve state-/territory- wide 24/7 primary coverage for chats/texts by July 2023	There is currently state-/territory-wide 24/7 primary coverage for chats/texts

Goal:

- Intended to assist audiences in in assessing their readiness for the July 2022 launch of 988 as a means to prioritize areas of focus moving forward

- The tool is <u>not</u> intended to be evaluative, and no responses will be collected or aggregated

Structure:

- Lays out a series of criteria within specific readiness categories that are aimed at holistically capturing components of readiness to realize the full potential of 988.

- For each criterion, three distinct levels can be selected. States, territories, and tribes are asked to select the level that best approximates their current state.

  - **Beginning:** Work in this area has not yet started

  - **Emerging:** Work in this area is underway but not yet complete

  - **Solidified:** Objectives in this area are fully or almost fully met

Overview of playbook structure

Potential approaches for each readiness category, outlining specific steps that can be considered in implementing initiatives

Case studies, providing detail on examples of how stakeholders have executed different aspects of 988 readiness

Additional resources, including a full set of references for each topic area to provide additional information/technical assistance

Source: SAMHSA and NASMHPD, with input from planning partners

Workforce

- Strategies states have implemented to **expand Lifeline contact center capacity**
- Tools to **calculate resources needed** to support integrated crisis care
- Examples of innovative steps states have taken to **expand behavioral healthcare workforce**, to include fiscal, policy, and provider certification strategies

Financial Sustainability

- Overview of **discretionary and sustainable funding** sources to finance state-/territory-wide mental health and substance use services
- Examples of strategies to **expand crisis services to support specific populations**

Lived Experience & Equity in Crisis Systems

- Overview of the roles peers have played in **designing and working in crisis systems**
- Strategies states have implemented to **expand the peer workforce**
- The importance of local partnerships to build crisis systems that **serve all members of the community**
- Examples of **building crisis services** for specific populations

988 Communications
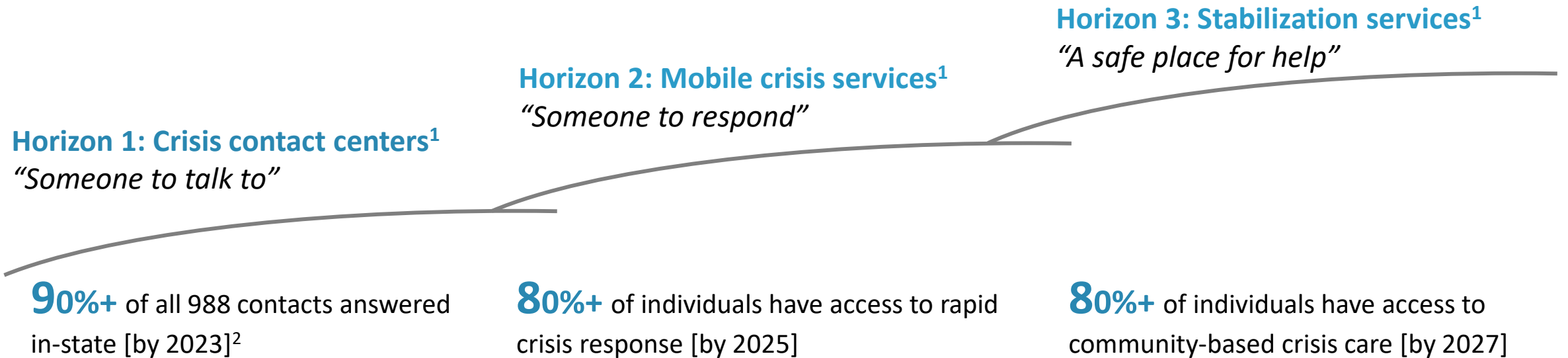
- **Communication framework** to consider when states/territories are ready to **launch their marketing campaigns**
- Reference materials to support **partner messaging prior to 988** launch in July

Case studies are included to highlight examples of how stakeholders have implemented initiatives for each readiness category

Source: SAMHSA and NASMHPD, with input from planning partners

Vision for 988 & Crisis Services

Horizon 3: Stabilization services[1]
"A safe place for help"

Horizon 2: Mobile crisis services[1]
"Someone to respond"

Horizon 1: Crisis contact centers[1]
"Someone to talk to"

90%+ of all 988 contacts answered in-state [by 2023][2]

80%+ of individuals have access to rapid crisis response [by 2025]

80%+ of individuals have access to community-based crisis care [by 2027]

Underlying principles

*Provide individuals experiencing **suicidal, mental health, and substance use crises,** and their loved ones, with caring, accessible, and high-quality support*

*Ensure **integrated services are available** across the crisis care continuum, supported through strong partnerships (e.g., State, Territorial, Tribal, Federal)*

*Provide **"health first"** responses to behavioral health crises and ensure connection with appropriate levels of care*

*Integrate **lived experiences of peers** and support **for populations at high risk of suicide,** such as Veterans, LGBTQ, BIPOC, youth, & people in rural areas*

*Advance **equitable access to crisis services** for populations at higher risk of suicide, with a focus on Tribes and Territories*

1. Inclusive of intake, engagement, and follow-up
2. Proportion may differ with chat/text vs. calls; "contacts answered" is defined as connected with a trained responder

Systems Gaps and Challenges for Individuals with Co-Occurring Conditions
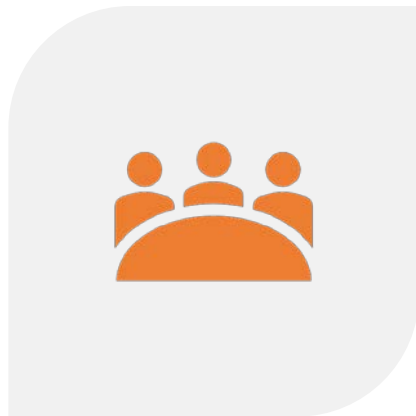
COALITION BUILDING, PLANNING AND DEVELOPMENT

NEED FOR SCOPE CLARITY

SILOED FUNDING AND SERVICE STREAMS

Future Directions to Enhance Crisis Capacity   *988*

Training –e.g., SBIRT, Motivational Interviewing

Mobile overdose response, outreach and prevention

Withdrawal management—incl low barrier MOUD

Integrated crisis stabilization services
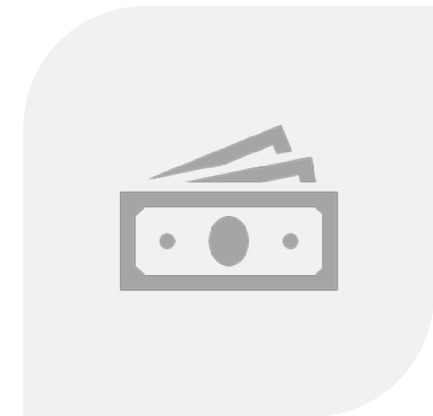
911-988 coordination: objectives & activities   988

Strategic objectives	Examples of key activities

GAP ASSESSMENT: Assess key gaps related to 911-988 coordination and recommend federal actions to mitigate gaps	+ 911-988 policy sprint
	   • Awareness
	   • Lookup procotols

POLICY DECISIONS: Advance related federal policy decisions (e.g., geolocation)	+ Geolocation Forum with FCC/VA
BEST PRACTICES: Inform & elevate 911-988 best practices (e.g., transfer protocol, data-sharing practices)	+ Supporting Vibrant 911-988 coordination efforts + Supporting NENA 911-988 Operations Working group + Publishing 988 PSAP operational readiness playbook
INTERNAL COORDINATION: Ensure whole-of-government approach to supporting improved 911-988 coordination	+ Leading bimonthly strategic planning meetings with NHTSA/OEMS + DoJ partnerships
EXTERNAL CONVENING: Educate & convene key partners in the 911/EMS communities about 911-988	+ 5-state policy academy

Additional 988 and Crisis Coordination Opportunities

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Justice Partnerships

Workforce

Technology

Financing

Technical Assistance and Performance Evaluation