

Scaling Up Crisis Call Center Services and State-Center Partnerships in the Context of National Crisis Service Growth



Matt Taylor, Director of Network Development

National Suicide Prevention Lifeline

September 14, 2019

NASMHPD Annual Meeting, Washington, D.C.

Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services, the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services.

The Lifeline Mission

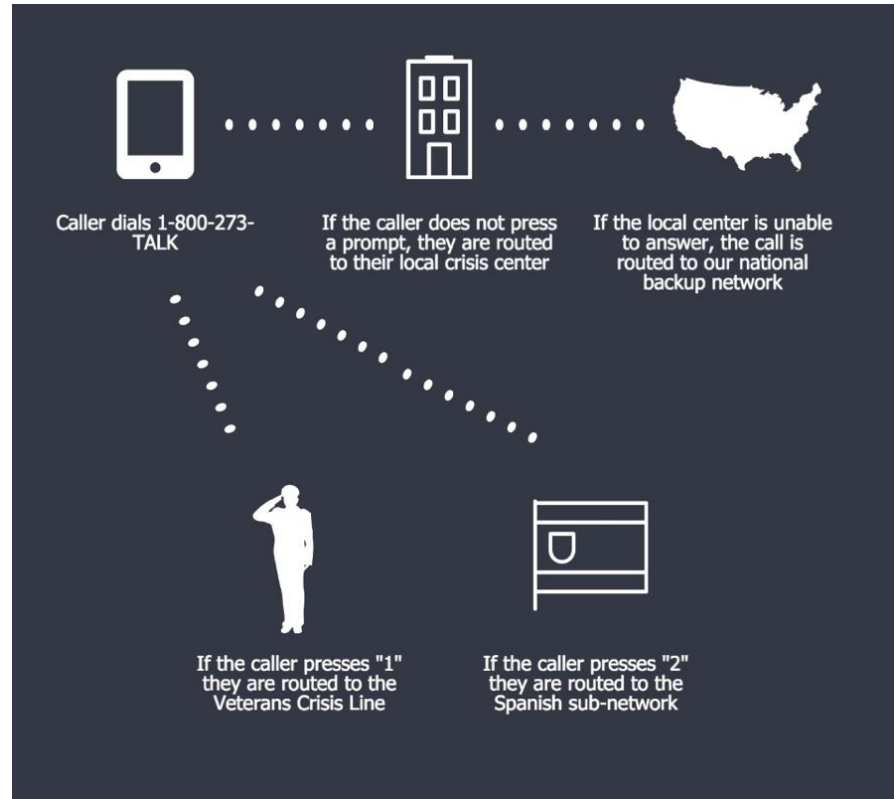
To effectively reach and serve all persons who could be at risk of suicide in the United States through a national network of crisis call centers.



The Lifeline is a **local** safety net

The National Suicide Prevention Lifeline is a network of independently operated, independently funded local and state call centers. **The Lifeline is *not* one large national call center.**

- SAMHSA's Lifeline grant is administered by Vibrant Emotional Health in New York City.
- Major Partners: NASMHPD, National Council for Behavioral Health, Columbia University and the Department of Veterans Affairs.



What callers in mental health crisis deserve

Now, and if a national three digit number for suicide crisis is established in the near future, callers deserve to:

- a) have their calls answered,
- b) have their calls answered quickly,
- c) have their calls answered with linkages to relevant local services,
- d) have their calls answered in accordance with the best possible standards in suicide crisis care.
- e) have their calls answered within a system of care that ensures backup centers can answer if an initial call center is unable to answer.

This is the National Suicide Prevention Lifeline NOW. Call volume is increasing and capacity must continue to expand.



Lifeline-member call centers in your states do much more...

80%

of Lifeline call centers report initiate follow up calls as part of their crisis services.

79%

of Lifeline call centers report promoting awareness on social media

71%

offer support services for suicide loss survivors

99%

of Lifeline call centers report being active in local community events.

Lifeline-member centers' incorporation of best practices

86%

Of Lifeline centers applied **Lifeline best practices** to most or all of their crisis services.

64%

of these crisis centers incorporate Lifeline best practices in **all of their center crisis services.**

38%

Of Lifeline centers make use of the **Lifeline Simulation Training System** on a regular basis

Lifeline-member centers are also *disseminators* of best practices

How many times during the period July 1, 2017 through June 30, 2018 did Lifeline crisis call centers inform / educate local mental health and suicide prevention stakeholders in their community about Lifeline’s “best practices?”

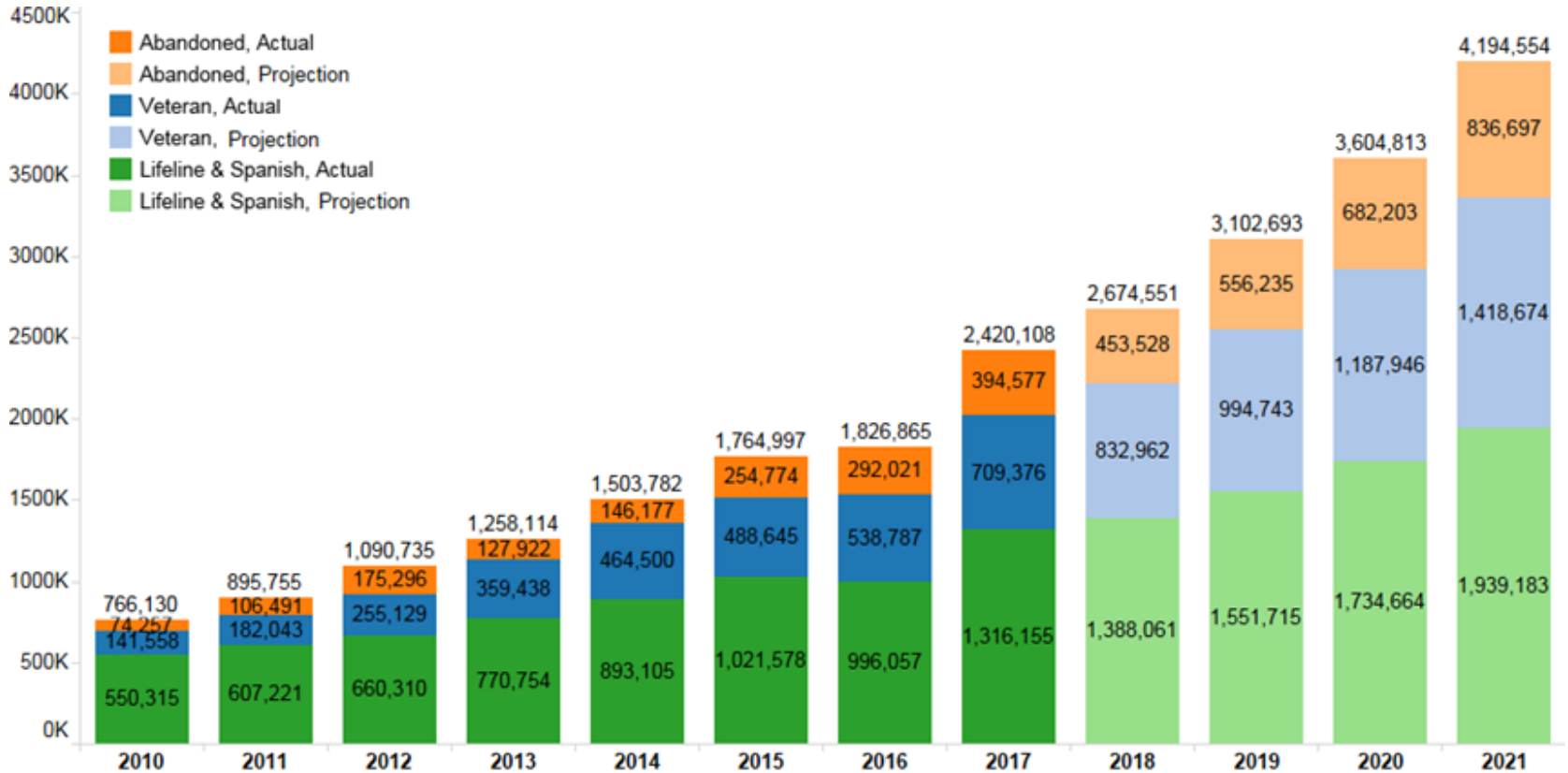
Center Funding Level	N	Total Times	Per Center Avg.
\$1.7M to \$25M	25	359	14
\$650K to \$1.7M	25	454	18
\$245K to \$650K	22	319	15
\$0 to \$245K	24	235	10
Overall	96	1,367	14

Lifeline call volume in the U.S.

- In 2005, the first year that the Lifeline operated, we answered just over 46,000 calls.
- Over 2.2 million calls were answered in 2018
 - 639,063 of those were veterans-related calls routed to the Veterans Crisis Line.
- Over 14 million calls have been answered since 2005. As the Lifeline is *currently* structured, we expect nearly 12 million more calls answered in next 4-5 years
 - *A three-digit national number will likely increase call volume significantly, with over 13 million potential calls –annually- within 5 years of implementation (Lifeline estimate)*



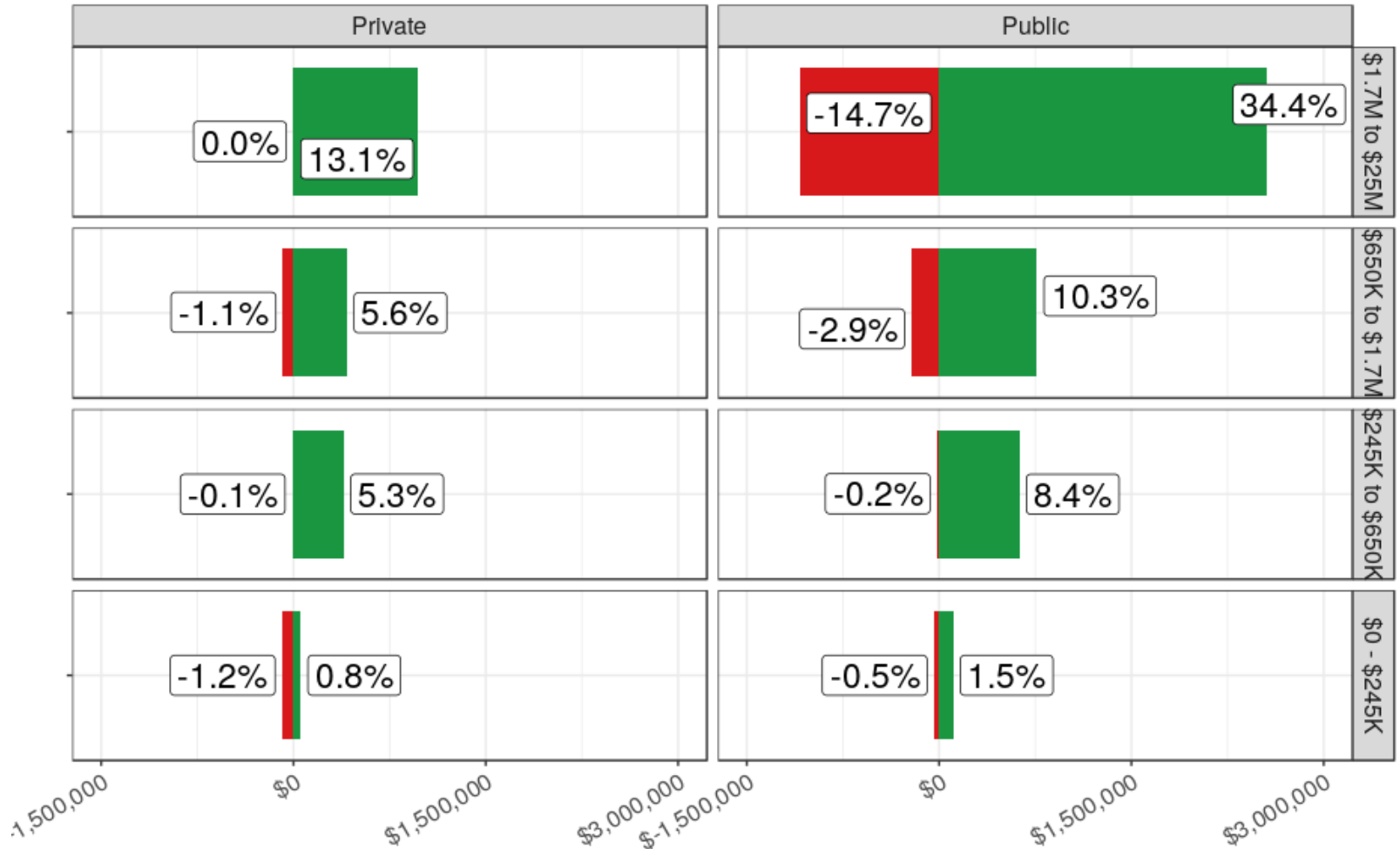
Lifeline Call Volume and Projections *even without a national 3 digit number*



Call volumes have increased consistently year over year.

Note: "short abandons" (callers who hang up in under 30 seconds, prior to completion of greeting) not included here.

Lifeline member call centers in your states - Gain/loss of private/public dollars (FY18 vs. FY 17)



77 centers provided information concerning the source of their FY17 to FY18 funding change.

Call center funding Levels and Lifeline Calls (FY18)

- Large volume, higher funding level call centers do a great deal for the Lifeline network....but medium size, medium budget call centers answer the largest percent of Lifeline calls.
- These centers are critical to the future of the network and, most likely, to the implementation of of national three digit number for suicide crisis response.

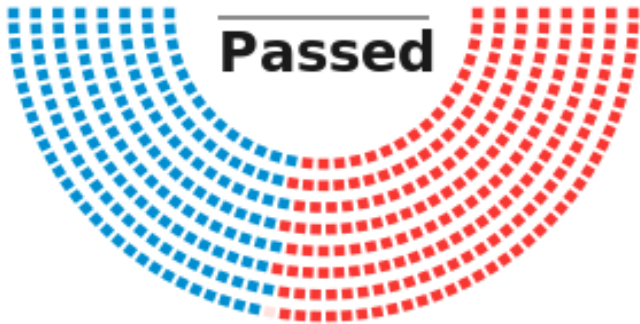
Funding Level	N	Total Funding	% All Funding	Lifeline Calls	% Lifeline Calls
\$1.7M to \$25M	27	\$177,967,588	80%	376,597	32%
\$650K to \$1.7M	28	\$29,347,855	13%	352,776	30%
\$245K to \$650K	26	\$11,182,991	5%	253,664	22%
\$0 to \$245K	29	\$3,717,837	2%	177,487	15%
Total	110	\$222,216,271	100%	1,160,524	100%

The movement towards a possible national 3-digit number for suicide crisis response...

NATIONAL SUICIDE HOTLINE
IMPROVEMENT ACT OF 2018

379-1

Passed



Signed into law August 14, 2018
Purpose:

- Study feasibility and impact of national 3-digit dialing code (N-1-1) for mental health and suicidal crisis
- Study the effectiveness of the Lifeline and 3 digit numbers
- Recommend a possible number
- Explore costs and benefits of such a national 3-digit system

Status of the Hotline Improvement Act now...

- By Feb 2019, SAMHSA and the VA submitted their reports to the FCC.
- Subsequently, feedback from the North American Numbering Council and extensive public comment was reviewed.
- SAMHSA recommended 3-digit, with vital funding supports noted. VA was silent on recommendations, noting their efficacy.
- SAMHSA recommended 3-digit because:
 - **“Cognitive access”**: easier to recall and dial in crisis state
 - **Lifeline is effective** in reducing distress/suicidality. ***Serve more, save more.***
 - **Divert unnecessary calls from 911**, law enforcement and emergency services
 - **Could transform crisis care systems** nationally.
- Public comment overwhelming also recommended 3 digit.

Status of the Hotline Improvement Act now...

In August 2019, the FCC released its report:

A 3-digit code is needed

“...we find that the Lifeline has been effective, including in addressing the needs of Veterans. However, based on the SAMHSA Report as well as comments filed in the record, we also find that the Lifeline could be more effective in preventing suicides and providing crisis intervention if it were accessible via a simple, easy-to-remember, 3-digit dialing code.”

FCC Report, 8/14/2019

A recommendation to move forward with a 3-digit “988” number

Suicide prevention hotline to get three-digit phone number

FCC chairman says he will move ahead following legislation, staff report



“Crisis Centers save lives.... Increasing the convenience and immediacy of access to a national suicide prevention and mental health crisis hotline via a 3-digit dialing code will therefore help spread a proven, effective intervention. In short, we believe that designating the 988 code for a national suicide prevention and mental health crisis hotline system is highly likely to lower suicide mortality risk in the United States...and thus that the benefits of this action are quite likely to outweigh the costs.”

Ajit Pai, Chair, FCC, Report to Congress, 8/14/2019

National Suicide Hotline *Designation* Act (2019)

Reps. Chris Stewart (R-UT) & Seth Moulton (D-MA)
introduced Bill 8/20/19

- 988 designation for mental health & suicide prevention nationally, wireless and landline, within a year of Bill passage
- Operating through the Lifeline and VCL, maintained by SAMHSA & VA
- State authority to charge cell phone/IP carrier customers to fund 988 services
- 988 Geolocation capabilities (for cell phone location routing and call trace) feasibility study completed within 180 days of Bill passage

Another Bill, current being drafted

John Katko (R-NY) & Don Beyer (D-VA)

(Not released, not titled as of yet)

- Will set performance indicators for service at local centers and national back-ups for:
 - Call response
 - Follow-up services
- Will include periodic QI-testing, monitoring
- QI Plan received by and implemented through SAMHSA within a year of Bill passage
- \$50m to centers annually to implement and perform to standards (efforts are underway to increase funding level)

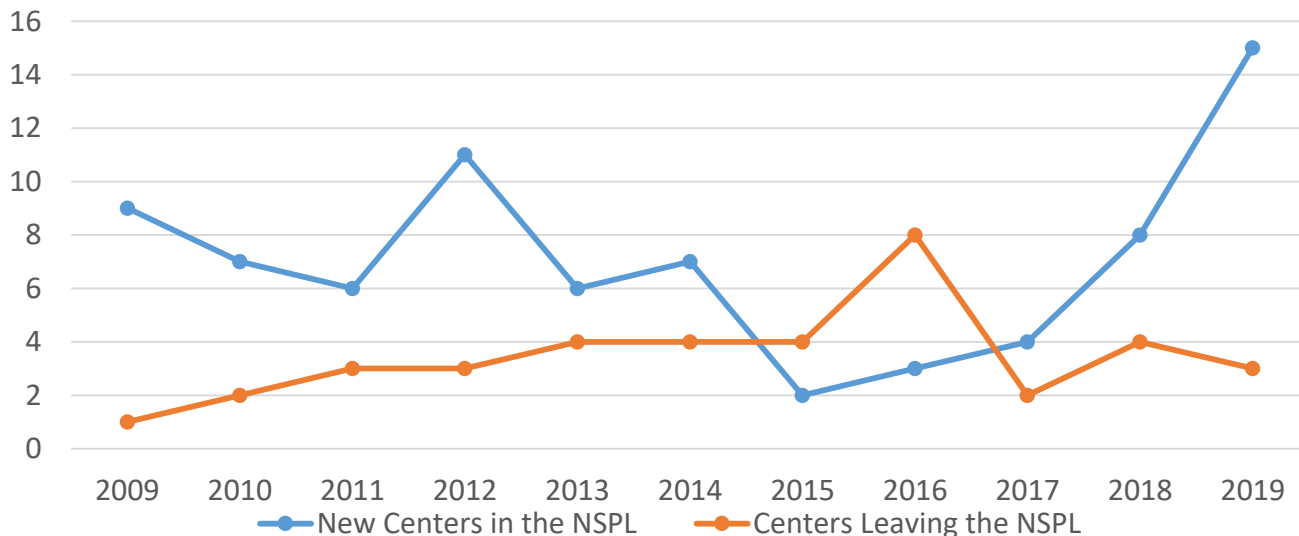
Next Steps and Issues to Be Addressed

- Confirmed 3-digit designation
- Support network infrastructure
 - funding for states and local centers
 - performance indicators/QA
 - technology platform for system
- Technical needs to implement 3-digit code across phone carriers and systems nationally (FCC estimates less than \$300 million in one time costs)
- Marketing of new number (FCC estimates \$125 million each year for the first 2 years)

New Center Recruitment Trends

Over the last 5 years, 28 centers have joined the NSPL (January 2015 – September 2019).

- 19 of the 28 centers joined in the last 1.5 years
- 4 new centers are estimated to join by end of 2019.
- New centers will be poised to benefit from expanded capacity-building funding opportunities likely to come with a national 3-digit number



Our state level reports overview call volume and center trends

- Latest semi-annual reports for commissioners will be released in the near future.
- The Lifeline and the American Foundation for Suicide Prevention are releasing additional reports aimed at educating suicide prevention stakeholders and advocates.

Michigan Callers in 2018

to the National Suicide Prevention Lifeline

In 2018, the Lifeline received **2.5 million** crisis calls from across the United States.

Of the 71,157 callers, **19,119 individuals** pressed "1" to be transferred to the Veterans Crisis Line and **427** pressed "2" for Lifeline's Spanish Language Line.

Ideally, the remaining 51,611 calls in 2018 would have been answered by Lifeline call centers in Michigan.

However, of those, only **18,106 calls (35%)** were able to be answered by a call center in-state.

Which meant **33,505 callers in crisis were unable to be answered** by a Michigan call center.

Established in 2005, the National Suicide Prevention Lifeline is the nation's most recognized suicide and mental health crisis line.

The Lifeline is not one large national call center. Instead, it is a network of 170 independently operated, independently funded local, regional, and state-level call centers. In 2018, there were 7 Lifeline-affiliated centers in Michigan.

In the event local centers are unable to answer, the Lifeline re-routes calls to backup centers in our network (both in and out-of-state).

To participate in the Lifeline network, centers operate to the highest standards of suicide care. They do an incredible job of de-escalating crisis situations, decreasing emotional distress, and reducing suicidality.

+84% The number of Lifeline calls that needed answering by Michigan call centers increased 84% from 2016 to 2018.

The Lifeline is administered through Vibrant Emotional Health and funded by the U.S. Substance Abuse and Mental Health Services Administration.

Vibrant
 Emotional Health

Where are 6 Lifeline network centers in Michigan

Why were only 35% of 2018's Lifeline calls in Michigan answered in-state?

Lifeline call centers in Michigan set the hours and coverage areas for when and where they will take Lifeline calls. They do this based on funding and staffing levels.

Most Lifeline-affiliated call centers in the U.S. (including in Michigan) answer calls on other helpines in addition to the Lifeline. Despite their very best efforts, call volume can, at times, strain center capacity and callers may hang up while they wait for the next available counselor.

In addition, some parts of Michigan currently have no coverage for Lifeline calls. This means calls the Lifeline receives from these areas must be routed and answered out-of-state.

When calls are re-routed to centers out-of-state, Michigan callers in crisis wait longer, they receive fewer linkages to effective local care, and they are more likely to abandon their calls.

Why is this? How can I help?

en effective; needing support

have been shown by research to be effective. Life-saving safety nets for those in crisis are de-escalated such that costly, highly-restrictive responses from emergency medical services are not necessary.

to manage the call routing, best practice standards, public messaging, and technical assistance for its nationwide network. However, the funds lifeline centers come from state, county and local sources. Many of our network's centers are struggling to operate and grow.

ponents of Michigan's city, regional and state behavioral health systems point into other levels of coordinated care. They provide critical services at risk, especially those with nowhere else to turn.

Please join the cause!
 Reach out to your local centers and decision-makers in Michigan.

Learn more about the Lifeline as well as how to contact your centers in Michigan by visiting: <http://suicidepreventionlifeline.org/our-network/>

The National Suicide Prevention Lifeline and Pennsylvania

MEMBERS

crisis centers which are members of the Lifeline...

Perspectives
7/24/2019

HIGHLIGHTS

nal safety easily hotline.

r from lifeline.

help

s from Pennsylvania, served by a lifeline.

Semi-annual Call Volume and Center Status Report

(January-June 2019)

Where are the callers from Pennsylvania being answered?

Callers from Pennsylvania are better served by their local crisis centers. However, if the nearest center to the caller is busy, Lifeline network backup centers in other regions across the United States make their best efforts to answer these calls.

Some 'capacity keys' for a three digit numbers and your state

Even when (non-Lifeline) county/regional lines are widely promoted, thousands of individuals still call the Lifeline every day from across the U.S. and your state.

- Having more of these existing county/regional lines join the Lifeline is *one key* to the puzzle of meeting the nation's future capacity needs.
- Another key is expanding the capacity of current Lifeline-affiliated call centers. (n=172)
 - Example: Sept/Oct 2019 up to \$10 million in Lifeline 2-year state capacity building grant awards be announced.
- Another key is stronger collaboration between call centers and state mental health agencies.





Thank You

Matt Taylor, Director of Network Development, National Suicide Prevention Lifeline (mtaylor@vibrant.org)

To learn more about the Lifeline network, or to encourage your state's call center to join, visit:

<https://suicidepreventionlifeline.org/our-network/>

NATIONAL SUICIDE PREVENTION LIFELINE