

The New Mexico Crisis and Access Line and Peer to Peer Warmline:

Crisis Assessment, Intervention, Peer Support Services, and Facilitating Access to Mental Health Services

24 hours a day, 7 days a week, 365 days a year for New Mexicans

ProtoCall Services: NM Programs

- Crisis and Access Line
- Peer to Peer Warmline
- Warmline Texting
- Rio Grande Gorge Call Box Response
- National Suicide Prevention Lifeline Provider
- Contracts with behavioral health agencies, to provide crisis line services on behalf of NM BH agencies
- State Targeted Response for Opioid Use Disorders
- Core Service Agency After Hours Programs
- Deliver Community Awareness & Prevention Trainings
- Convey a Public Awareness Campaign
- Memorandums of Understandings with Public Safety Programs
- Resource for community (public & private) agencies
- Engage in Special Projects & provide data for the community



You Can Access Support Anytime

New Mexico Crisis and Access Line

Call 1-855-662-7474

24 HOURS A DAY **7**DAYS
A WEEK

365 DAYS A YEAR

Peer to Peer Warmline 1-855-466-7100





Call between 3:30p – 11:30p

Text between 6p – 11p

www.nmcrisisline.com

The New Mexico Crisis & Access Line

Goal:

To close gaps in access to crisis help when New Mexicans need it most.

Mission Statement:

- To provide timely, effective assessment and intervention in times of crisis
- Ensure continuous, quality access to professional behavioral health and wellness services.

Vision Statement

To lead the Behavioral Health world in providing continuous access to care bringing light and hope to those in need during their darkest hour.

Why we are doing this?

House Joint Memorial 17

(2011 Legislative Session : HJM17)

- Provides services in the least restrictive environment to people in the community, and maximizes choice.
- Provides a system that serves individuals with mental illness who have insight into their condition, and those who do not.
- Mental health services are available to all persons with serious mental illness, their families, and their natural supports. The services are:
 - Trauma informed
- Culturally sensitive Gender specific

- Age appropriate
- Language appropriate Peer driven/peer led
- Accessible to anyone regardless of :

literacy level, socio-economic status, or insured status.

New Mexico Crisis & Access Line (NMCAL)

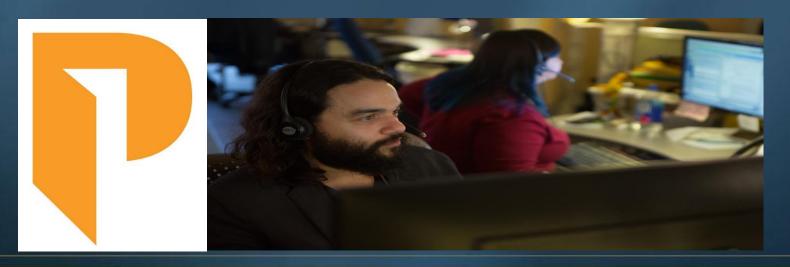
A program of the State of New Mexico Behavioral Health Services Division

- A professional mental health crisis line and peer support warmline
- Available statewide to all New Mexicans
- Free and Confidential
- Funded and Contracted by NM Behavioral Health Services Division
- Established February 2013

New Mexico Crisis & Access Line (NMCAL)

A Division of ProtoCall Services

- ProtoCall Services
 - a professional crisis intervention center
 - doing business in NM since 2004
 - answering for behavioral health organizations nationwide since 1992



Why should you <u>choose to call</u> the New Mexico Crisis and Access Line (NMCAL)?

- NMCAL is answered 7 days a week, 365 days a year:
 - Professional mental health staff answer crisis lines 24 hours a day
 - Bachelors Level Staff: Care Associates, Crisis Responders
 - Masters and PhD Level Staff: Clinical Specialists
 - Professional certified peer support specialists
 - answer Warmline calls from 3:30p 11:30p every day
 - answer Warmline texts from 6:00p 11:00p every day
- Call Center Staff have access to public safety emergency officials (dispatchers) if needed
 - Staff are trained in assessing a crisis and responding with the least restrictive alternative
- Callers are referred to resources local to them

Who Answers the Crisis Line?

Professional Mental Health Staff

Have <u>a degree</u> in a behavioral health-related field (e.g., Social Work, Counseling, Psychology), are <u>highly trained</u> in administering <u>crisis assessment and intervention</u> and in all relevant <u>HIPAA</u> and <u>HITECH</u> compliance practices, and undergo <u>rigorous background checks</u> and <u>drug screenings</u> that surpass industry standards

- Care Associates and Crisis Responders have their Bachelors degrees and are working towards their Masters degree in an accredited college or university
- Clinical Specialists have their Masters degrees and are <u>licensed</u>, or registered with their state board, as an approved supervised Counselor or Social Worker that is working towards licensure, and <u>answer to</u> their <u>state licensing board</u>, and follow their professional <u>code of ethics</u>

Who Answers the Warmline?

Professional Peer Support Specialists

- Peers are in recovery from their own mental health diagnosis, have their own extreme challenges, and share these experiences as a way to facilitate helping callers find hope and resources.
- Are trained through the Office of Peer Recovery and Engagement
- Are <u>certified</u> through the New Mexico State Credentialing Board for Behavioral Health Professionals, and <u>answer to</u> the state board and <u>adhere to</u> a professional <u>code of ethics</u>
- Undergo <u>rigorous background checks</u> and <u>drug screenings</u> that surpass industry standards
- Are <u>highly trained</u> in peer support practices, and all relevant <u>HIPAA</u> compliance healthcare practices

How Do We Assist Callers?

- Evaluate, and gain understanding, on the callers needs and intentions of the call
- Define the Purpose of the Call
 - What does the caller need?
 - Explain how we can help?
- Build Rapport/Validate and acknowledge distress
 - Active listening, asking open ended questions to solicit disclosure, utilizing the least aggressive approach necessary, gathering information
- Listen to the caller in a open minded and nonjudgmental manner
- Keep caller focused on "Here and Now"

What happens on the Crisis Line

- Completes an assessment
- Determines the Level of Care needed
 - Develops safety plan
 - Connects with community resources
- Hosts an Intervention, if needed
- Schedules a Follow Up, when needed
- Engages Additional Supports, when needed
- Reviews commitments with the caller
- Ends the call and Completes Documentation
- Obtain Demographics (Caller disclosure only)

What happens on the Warmline

- During most calls/texts, a peer is there to listen and support people experiencing mental health and/or substance use concerns, before or after a crisis.
- Peer Supports are in recovery from their own mental health concerns. They share their own story to help callers and texters take the next step in their recovery, and encourage people to build their resiliency.
- Connect people with community resources.
- Engage people to consider additional supports beyond the call.

Understand Why People are Calling

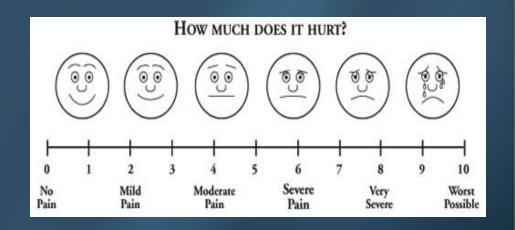
- Suicidal or Homicidal Ideation
- Self Harm or Harming Others
- Substance Use/Misuse
- Addiction (Substances, Food, Sex, Tobacco, Gambling, Exercise, Work, Relationships,...)
- Depression
- Eating Disorder
- Anxiety/Stress
- Grieving
- Experiencing/ed Loss
- Sexual Assault
- Domestic Violence/Abuse
- Anti-Social

- Experiencing Trauma
- Post Traumatic Stress
- Bi-Polar Disorder
- Psychosis
- Schizophrenia
- Hallucinations/Delusions
- Mood Disorders
- Dissociative Disorders
- Obsessive Compulsive Disorders
- Phobias
- Brain Injury
- Disability
- Family concerns
- Worried about someone else

Feel Helpless, Hopeless, Worthless, or Just need someone to talk with Feeling lonely, isolated, and/or withdrawn

Determine the Level of Distress

- NMCAL assesses the caller's distress level at the beginning, and at the end of the call
 - Assessment consists of the clinical situation, as well as the caller's affect
- Five levels include:
 - No Apparent
 - Mild
 - Moderate
 - Marked
 - Severe



NMCAL Applies a Clinical Process

- Identify what thoughts are occurring
- Find out what is the intended plan
 - means, lethality, and accessibility
- Understand if there was a precipitating event
 - Determine when the event occurred
- Review the history of attempts of self-harm, suicide, or harm to others
 - Identify present physical circumstances and level of danger
 - History of violence and/or impulsiveness
 - Identifying the person potentially at risk (if it is not the caller)
- Review recent use of substance(s) and/or a failure to take medication(s)
 - The name of substance used/using
 - Frequency of use, last use, amount used, duration of the use, current symptoms (from sober to withdrawal)
 - Look at treatment history
- Discuss reasons for living = protective factors
- Identify support network
- Discuss safety plan

Warmline Applies a Peer Approach

- Identify what the caller needs support with
- Listen in an open minded and non-judgmental manner
- Keep caller focused on "Here and Now"
- Review risks and protective factors
- Share personal experiences as appropriate, to reinforce recovery and resiliency
- Encourage engagement, healthy choices, and involvement
- Refer caller to additional supports that can be utilized, and/or implemented, to continue care in their community
- Create an action plan or safety plan, if needed, with the caller to support their recovery beyond the call

Goal of a Call or a Text Crisis Line and Warmline

- The goal of any conversation is to get a caller/texter to a calm, safe place where they feel supported as a result of the discussion.
- Most of the time.... it just means being here to hear people, and/or providing information on providers and services that can be accessed beyond the call.
- But, sometimes it means engaging others for additional support beyond the call/text.
- Conversations typically end when the caller/texter and the call taker both feel like there has been support provided by the communication.

Ending the Call and Documentation Crisis Line and Warmline

- Encourage commitment
- Summarize call
- Develop action steps
- Reconfirm safety plans
- Document and maintain calls with highest standards of HIPAA and HITECH compliance





If you are Concerned About Someone...

- Threatening to, or talking about wanting to, hurt or kill him/herself?
- Seeking access to firearms, available pills, or other means to kill him/herself?
- Talking or writing about death, dying, or suicide, when these actions are out of the ordinary for the person?
- Expressing feelings of hopelessness?
- Displaying rage, uncontrolled anger, or seeking revenge?
- Acting reckless or engaging in risky activities, seemingly without thinking?
- Saying he or she feels trapped, like there's no way out?
- Increasing alcohol or drug use?
- Withdrawing and Isolating from friends, family, work, school, and/or society?
- Demonstrating anxiety, agitation, and insomnia (or sleeping all the time)?

If you or a loved one is experiencing these, or other emotional crises, you can find help 24 hours a day, seven days a week, 365 days a year by calling
The New Mexico Crisis and Access Line, 1 (855) NMCRISIS (662-7474)

The Peer to Peer Warmline, 1(855) 4NM-7100 (466-7100)

Thank you for all you do in our community!



For More Information Please Contact:

Wendy Linebrink-Allison, MSW, MBA, CPSW

- Program Manager, New Mexico Crisis and Access Line
- Toll Free: 866-821-9098 | Mobile: 505-263-9140
- E-Mail: wendy.linebrink-Allison@nmcrisisline.com
- Website: http://www.nmcrisisline.com



Appendix

- Overview of Special Projects
- What is a Routine, Urgent, Emergent Call
- Finding Resources
- About Callers
- Warmline Information
- Texting Program
- Community Programs
- Prevention Training
- Contracting Behavioral Health Agency Programs
- Public Safety Engagements
- Engaging the Community
- Public Awareness Materials

Special Projects

- Engage in multiple stakeholder & community meetings
- Participate in STR PDO OUD Public Awareness
 - Partnerships with:
 - NM DOH SBHC Garrett Lee Smith Grant
 - CYFD Pull Together Campaign
 - NM BHSD OSAP Dose of Reality Campaign
 - NM AWARE Mental Health First Aid SAMHSA Grant
 - CNM Community College
 - Bernalillo County Behavioral Health
 - Dona Ana County Public Safety & Mobile Crisis Response
 - Support NM BHSD Network of Care Resource Directory
 - Member of NMBHPA, OPRE Advisory Board, PSRANM



Provide: Routine Interventions

There are no immediate safety concerns being expressed on a routine intervention call.

- Call is resolved with de-escalation, if necessary.
- Call takers assess functional status, substance use, and risk associated with harm to themselves or others.
- Connect caller with internal and external resources.
- Connect to a past experience of successful coping, elicit competence: find what works
- Identify who else can help?
- Search for one thing the caller can try right now?
- Referral to local resource are offered.
- Caller initiates next steps.

Identify Community Resources



Network of Care



- Resource for individuals, families, and agencies concerned with behavioral health.
- Providing information about behavioral health services, laws, and related news, as well as communication tools and other features.
- Assists in efforts to protect our greatest human asset, our minds....and helps ensure that there is "No Wrong Door" for those who need services.



Find Naloxone Resources

Prevent, Recognize, Respond

NALOXON E SAVES IIVES

HAVE IT. USE IT.

Naloxone can reverse the effects of a prescription painkiller or heroin overdose. To learn how to use naloxone, and where to get it, please visit doseofrealitynm.com





Get it, Carry it, Use it

https://www.doseofrealitynm.com/



Assist: Urgent Matters

Caller has exhibited potential safety concerns and requires deescalation using a model that emphasizes the least restrictive means possible.

- Call taker uses a variety of techniques to help the caller which include, but are not limited to:
 - Drawing on internal and external resources, to help the caller to remain safe
 - Using Mindfulness exercises
 - Utilizing applicable SFBT/DBT/MI techniques
 - Using a Contingency Planning/Risk Mitigation Model
- Caller is offered information on local resources.
- On some calls a determination is made, with consultation from a clinical supervisor, to consider setting up a follow up outbound call to mitigate any potential ongoing risk.



Help: Emergent Callers

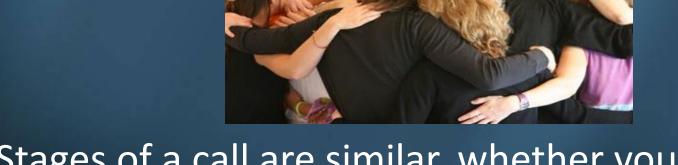
Call requires immediate emergency attention as safety concerns have been endorsed.

- Call taker determines and utilizes the least restrictive measures for the caller by completing an assessment of natural supports the caller may have
- Voluntary movement toward emergency care is ideal, but not always possible.
 - Follow American Association of Suicidology standards
 - Identify that the caller is unable, and/or unwilling, to remain safe
 - Utilize least restrictive alternatives, when available
 - On some calls, Public Service Officials are contacted to complete a wellness check of the caller.

Sometimes, People Call Because They're Worried about Someone Else

You do not have to be the one in crisis to call

You can call NMCAL to find out how you can help someone else experiencing a mental health concern.



Stages of a call are similar, whether you are calling on behalf of yourself, or someone else.

Frequent Callers

Callers have a choice



What is the Peer to Peer Warmline?

- A phone number anyone can call or text to talk to someone who has "been through it"
- Answered by people with lived experience
- Engages people before they are in crisis
- Can potentially reduce psychiatric hospitalizations and criminal incarcerations
- Facilitates self help and the use of natural community supports

1-855-4NM-7100 (1-855-466-7100)

When is a Peer Available?

- The Warmline is available to call or text
 - 24 hours a day, 7 days a week, 365 days a year
- Peer Support Specialists are available to engage with
 - Call: 3:30pm 11:30pm MT every day
 - Text: 6:00pm 11:00pm MT every day
- If a Warmline call is made outside of the times when peer support specialists are staffed, or if a peer specialist is not available to talk to, the caller has an option to:
 - Talk to the crisis line by pressing 1, when you call the Warmline
 - If a Warmline caller speaks to the crisis line, they will receive the same support all other crisis line callers.

Why People Call the Warmline,

and Talk to a Peer Support Specialist?

- Just need someone to talk to, but are not in crisis
- Need to talk to someone that has been there and has lived experience with some of the same things the caller may be going through
- Seeking support for yourself, or someone else, struggling with health concerns: mental, behavioral, emotional, social, and/or well being
- Struggling with substance use/abuse
- Feeling lonely, isolated, and/or withdrawn
- Looking for services that can help facilitate the next step in recovery and resiliency

Beginning a Text Conversation

- The first text message received shares the program agreement terms and conditions: "By using the Warmline Text you agree to its current Terms of Service found at http://www.nmcrisisline.com/textlineterms"
- The next text message will say "Thank you for contacting the NM Peer to Peer Warmline, my name is _____, how can I support you?"
- If a text happens outside of the times when a Peer Support is available to respond, an automated message is recieved "Thank you for texting the Warmline. The texting service is available from 6p − 11p every day. Peers are available by phone from 3:30p − 11:30p by dialing 1-855-466-7100."

What Happens During a Text?

- It usually takes less than five minutes to connect with a Peer Support during texting hours.
 - It may take longer during high-traffic times.
- When a Peer Support is reached, they'll introduce themselves, reflect on what was said, and invite the texter to share at their own pace.
- Peer Support will help texter sort through thoughts, emotions, feelings, and concerns by asking questions, empathizing, actively responding, and providing assistance.

Engaging the Community



ProtoCall Services: NM Programs

Public Awareness Campaign



We invite you to view our New Mexico Crisis and Access Line Media Awareness Campaign at https://www.youtube.com/watch?v=7gRYg5AS1Lg&feature=youtu.be

Rio Grande Gorge Call Boxes

- Visitors to the Río Grande Gorge Bridge are now met with a message that there is hope.
- Ten intercoms, with a sign reading: "There is hope. Make the call.", were installed on the bridge in December of 2014



It is a reminder that some people who visit the bridge are not tourists, but are contemplating suicide.

 Pressing the button on the intercom connects the community member to the New Mexico Crisis and Access Line. The person will receive support in that moment and the call center will engage police to assist in emergencies.

Community Awareness

Attend and participate in meetings, conferences, summits, exhibits, workshops, health fairs, trainings, consortiums, and events statewide

- Advocacy, Recovery, Resiliency, Community
- Schools, Education
- First Responders
 - Sheriff, Police, Fire, EMT, & 911 Dispatch
- Courts, Judicial, And Detention Systems
- Government (Federal, State, County, City)
- Housing, Homeless
- Cultural
- Healthcare Providers

Community Prevention Training

- Mental Health First Aid
 - Adult, Youth, Higher Education, Public Safety, Rural
- Question Persuade Refer Suicide Prevention
- Opioid Overdose Prevention, Recognition & Response Education
- Whole Health Action Management
- Managing your Chronic Disease
- Counseling on Access to Lethal Means
- Recovery and Resiliency
- Peer Support
- Recovery Friendly Language

After Hours Crisis Services Program

- A call handling database tailored to the needs of the Behavioral Health Provider system of care and the Behavioral Health Agencies clients.
- Coverage is for after-hours which begins at 5pm to 8am MST Monday -Friday, all day on weekends and holidays (as defined by the New Mexico State Treasurer's Office), and/or during unexpected interruptions of service emergencies as needed 24/7/365. Emergencies would include Acts of God such as severe inclement weather.
- Client alerts for unique or critical situations are available.
- Tailored on-call staff response.
- Each Provider must sign an Agreement with ProtoCall in order to participate in the After Hours Program.
- Calls may be recorded for quality purposes.
- Call Documentation of each respective Behavioral Health Provider's client is sent to the Behavioral Health Provider, for the Provider's follow up (as needed), utilizing a HITECH/HIPAA compliant file delivery system.
- Monthly utilization reports are provided to each Behavioral Health Provider.

To Participate in AfterHours Program

- New Mexico Core Service Agencies (CSAs) are preapproved by BHSD to participate in program.
- Non CSA Behavioral Health Medicaid providers may request approval to be funded to participate in program through submitting an application to BHSD
 - HSD.csmbhsd@state.nm.us
- Any agency that is interested in this program, and does not qualify through the BHSD AfterHours Program, may contract with ProtoCall Services directly.
 - Rachel.Williams@ProtoCallServices.com

Engagement with Public Safety

Crisis Intervention Trainings

- Training public safety officials to engage NMCAL as a part of the Crisis Intervention Team (CIT) process
- Offering the community member a mental health professional to talk to in their moment of need
- Allows public safety officials to:
 - Offer a resource to engage a trained mental health professional through involving NMCAL as a part the intervention and escalation process
 - Transfer to NMCAL from a dispatch center
 - Engage a community member in a conversation with a behavioral health professional when leaving a scene

Bernalillo County Public Safety MOU

Memorandum of Understanding (MOU) to engage and transfer mental health calls to NMCAL, when protocol criteria is met



No apparent risk of harm to the caller, or other community members

Public Safety Calls

- Offer the community member a mental health professional to talk to in their moment of need
- Allows public safety officers to:
 - Provide an immediate resource to the community member, which will support them in engagements with a mental health professional when the scene has been cleared
 - Provide contact information to people
 - > NMCAL cards, magnets, or flyers
 - Establish a way to leave the scene, and engage the community member in an alternate resource

Collaboration with Bernalillo County

Community Engagement Team

- When appropriate, NMCAL and Warmline staff offer Bernalillo County callers an opportunity to connect with the Community Engagement Team.
- Benefit: Offers the community member an opportunity to connect with a peer support team for additional support beyond the call.

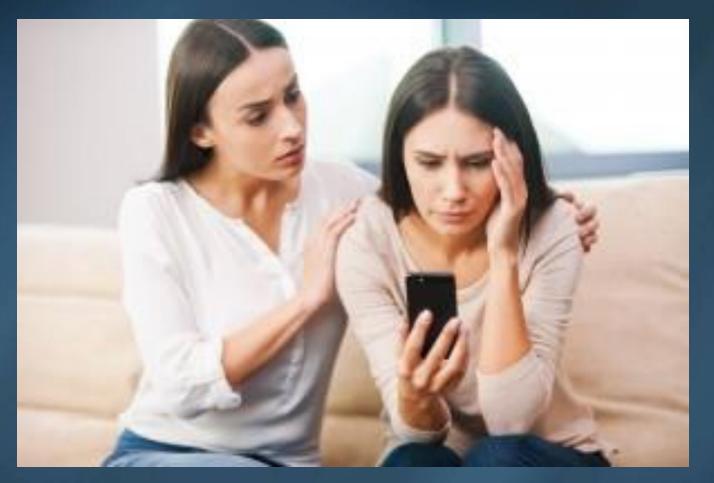


Encouraging People to Think about their role

We all encounter mental health situations at times.

- Think about a time when you, or someone you know, had a mental health situation occurring.
 - How was the situation handled?
 - Did the outcome of the response support the person?
 - If you were trying to help someone else, what did you do to take care of yourself and the emotions that you may be feeling after the event?
- Given that stigma can be a barrier when responding to people with mental health, how does this stigma play a part in a persons response during those times?

Make the Call With Them



Make sure they have the # 1-855-NMCRISIS (662-7474)

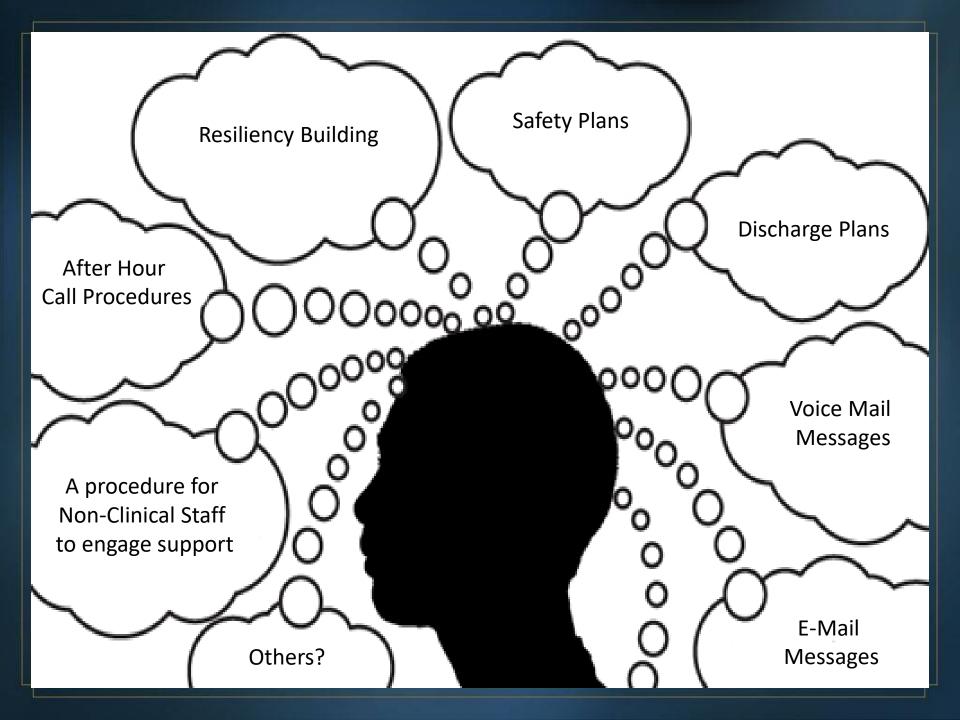
Engage NMCAL into Care Plans

Stigma regarding mental health is often a barrier that prevents people from accessing support

NMCAL is Here to Hear You!

Include NMCAL into Care plans to help people find help in the moment they need someone to talk to.

- NMCAL is:
 - Free and Available 24/7/365
 - Anonymous and Confidential
 - Not Just for the person in crisis.... but also for friends, family members, and colleagues
 - A Community Partner



Information Available Online @ www.nmcrisisline.com

- Data Reports
- Public Awareness Materials
- Hiring
- News
- Events
- Awards and Accreditations
- Resources



Free Public Awareness Materials

English and Spanish Materials

- Wallet Cards
- Informational Brochures
- Magnets
- Posters
 - 8.5x11
 - 11x17







Email New Mexico Program Manager to Request Materials wendy.linebrink-Allison@nmcrisisline.com

Wendy Linebrink-Allison MSW/MBA /CPSW NMCAL Program Manager

As Program Manager at the New Mexico Crisis and Access Line (NMCAL), Wendy is a critical link between crisis services and community education.

Her work in advocacy, assistance, and empowerment of people with physical, mental, behavioral, and/or substance use disorders strives to reduce stigmas and help people achieve healthy, meaningful lives. She provides advocacy, emotional support, and guidance by sharing real-world experiences. The work she does brings development and enhancement of community coping and functions skills.

Wendy is a Mental Health First Aid Instructor, Question Persuade Refer Suicide Prevention Trainer, Certified Peer Support Worker, Counseling on Access to Lethal Means Prevention Trainer, and Managing your Chronic Disease Workshop leader. She has been featured on radio, TV, and newspaper outlets as an advocate for promoting recovery and resiliency, while lobbying for community mental health within behavioral health systems, throughout New Mexico's varied communities.

