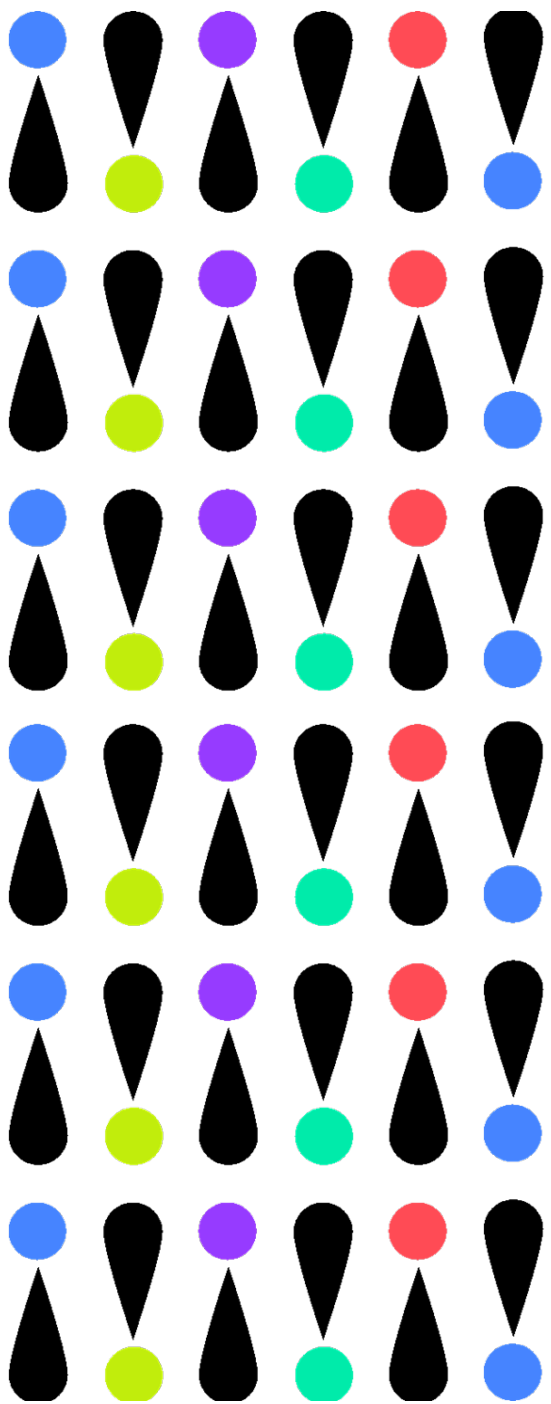


Crisis Services, 988, and How States are Working Towards Implementation

2021 Transformation Transfer Initiative, Information Exchange

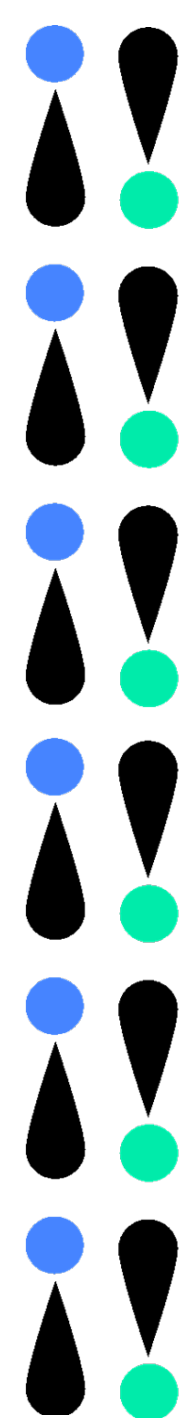
August 4, 2021

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National Suicide Prevention Lifeline
(Vibrant Emotional Health)



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.



Lifeline: America's Public Mental Health Safety Net



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.

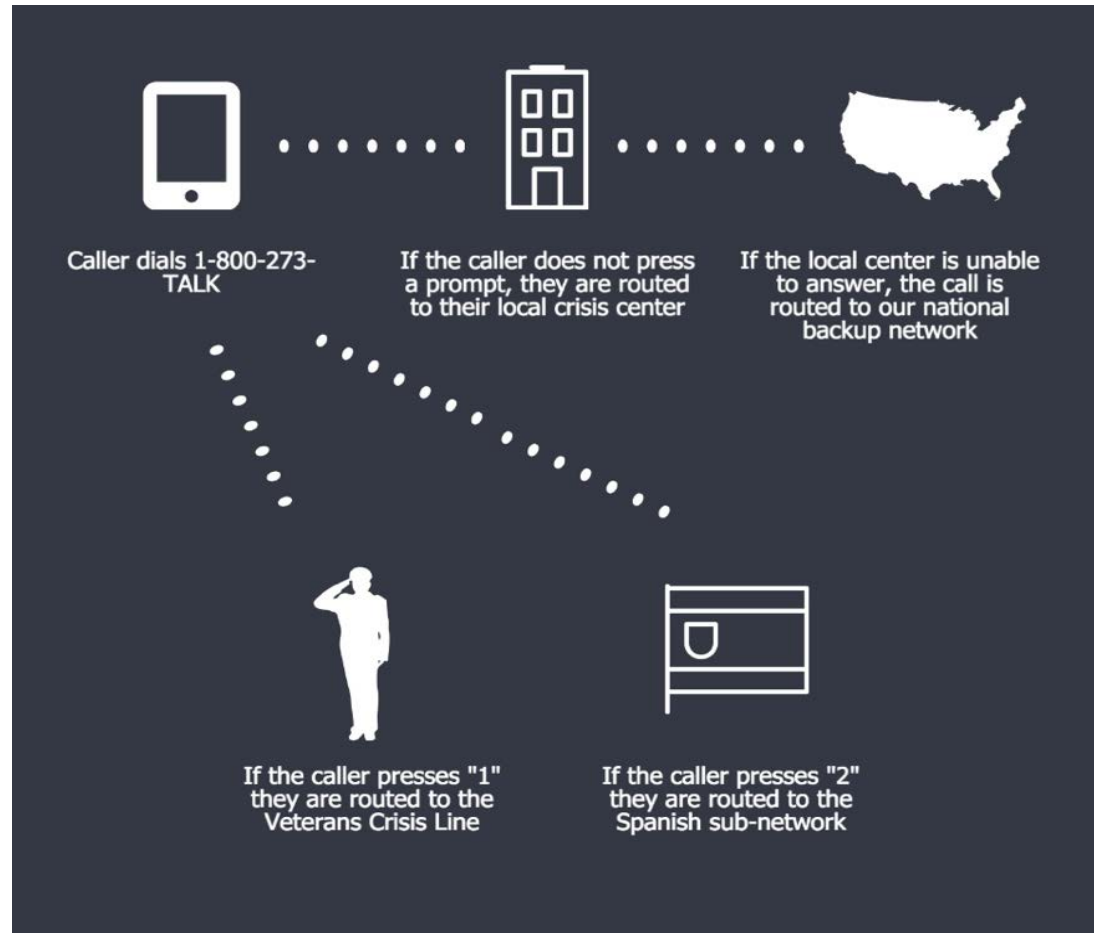


Lifeline Current State

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. It is a national portal for connecting to localized services.**

**2.4m calls
received
FY 2020**

**2020 Survey:
Only 30% Lifeline
centers received
public funds to
specifically
answer Lifeline
calls**



**190+ centers
including**

- **9 national backups**
- **30 Crisis Chat Centers**
- **5 SMS Centers**
- **3 Spanish centers**
- **1 VCL backup**

Suicide prevention hotline to get three-digit phone number

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



FCC requires all Telephone Providers to Enable 988 to Connect to the Lifeline Nationally by 7/16/2022

“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.”



National Suicide Hotline Designation Act of 2020

- FCC must designate 988 as the three digit dialing code for the Lifeline
- FCC must complete a 6 month study on feasibility of providing geolocation/dispatchable information
- SAMHSA and VA must complete a 6 month study on federal resources necessary
- SAMHSA must complete a 6 month study outlining how to better serve high risk populations
- States are not prohibited from levying fee on mobile and IP enabled services to be used for 988 crisis centers and related services
- Signed into law on October 17, 2020



What should 988 & the Lifeline of the future provide?

At Vibrant Emotional Health we believe:

Vision



988 serves as America's mental health safety net. We will reduce suicides and mental health crises, and provide a pathway to well-being.

Mission



Everyone in the US and the territories will have immediate access to effective suicide prevention, crisis services and behavioral healthcare through 988.

How is 988 different than 911?

“988 is designated as the universal telephone number within the United States for the purpose of the national suicide prevention and mental health crisis hotline system operated through

the National Suicide Prevention Lifeline...”.



Centralized Network Routing

- Backups and Efficiencies
- Centralized quality assurance and operating standards



A Crisis Care Service

- Effectively reduces emotional distress & suicidality (free and accessible to all, 24/7/365)
- Can also link to care & outreach services, follow-up

How We Talk About 988

From the National Suicide Hotline Designation Act of 2020 (10/17/20), 988 shall be the:

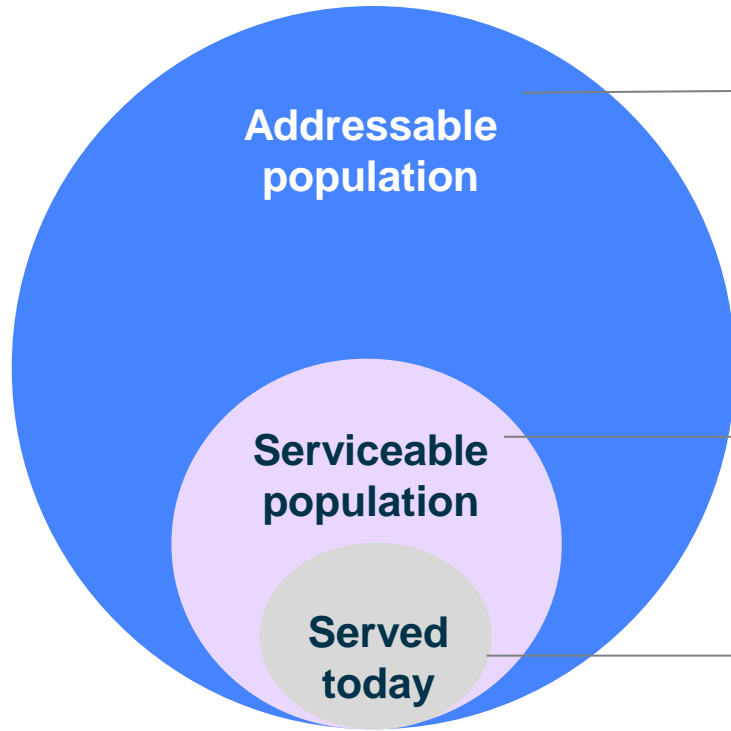
- “UNIVERSAL TELEPHONE NUMBER FOR NATIONAL SUICIDE PREVENTION AND MENTAL HEALTH CRISIS HOTLINE SYSTEM.
 - 9–8–8 is designated as the universal telephone number within the United States for the purpose of the **national suicide prevention and mental health crisis hotline system** operating through the National Suicide Prevention Lifeline.”
- **Vibrant recommends states and territories advertise 988 as a *crisis line*.** We **do not** recommend advertising this line for services that are not crisis related.
 - Lifeline centers, including our backup centers that may receive overflow calls, chats and texts from your state or territory, may not all have specialized expertise across a broader range of topics. For this reason, consistency in public messaging about 988’s scope of services, including its distinction from 911, is important.
 - Marketing 988 as something other than a crisis line may misrepresent the line's services and be problematic for people in distress.
 - If your state or territory has specific questions about how to advertise the range of services 988 provides, please contact SAMHSA.

How We Talk About 988

While some national and local telecom providers have been able to activate 988 locally, this service will not be available nationally until July 2022.

We encourage state and U.S. territory public and mental health agencies, 988 planning grant partners/coalitions, as well as people in crisis, to continue to call 1-800-273-TALK (8255) up until July 16, 2022.

How many people and who will 988 serve?



Estimates and Definitions

~150 million people

Individuals with mental health and/or substance use disorders

Individuals with lifetime exposure to potentially traumatic events excluding those with mental health or substance use disorders

~39 million people

Subset of the addressable population that 988 could support (i.e., individuals exhibiting suicidal thoughts and/or serious psychological distress)

Excludes individuals who are institutionalized and/or not able to access a 3-digit number (i.e., do not have access to a phone/internet)

~12 million people

Number of people that use Lifeline, local/regional crisis centers, or 911 for mental health or suicide crises call, online chat, SMS

Individuals in the potential addressable and potential serviceable populations for 988 may be at higher risk for emotional distress, and may move between and in and out of these categories throughout life.

How will 988 impact contact volume?

There are 3 potential sources of volume under 988 that, together, will increase contact volume.

Volume type

Definition

Baseline volume

Volume of **potential future Lifeline calls that may be serviced by 988** based on historical Lifeline patterns across call, chat, and text.



Diverted volume

Volume of **non-Lifeline crisis center volume that may be serviced by 988** (instead of regional/local numbers) based on historical patterns and assumptions on individuals choosing to use 3-digit 988 number over local numbers.

Volume of **future 911 volume that may be serviced by 988** (instead of 911) based on historical 911 data, academic literature, and potential considerations around systems change related to 911 diversion.



New volume

New potential volume to 988 based on the estimated **share of the potential serviceable population** that has not been historically serviced by the Lifeline, local/regional centers, or 911, but may use 988 in the future (primarily driven by an assumption on potential effect of marketing and awareness of 988 in the general population).



Total potential volume to 988

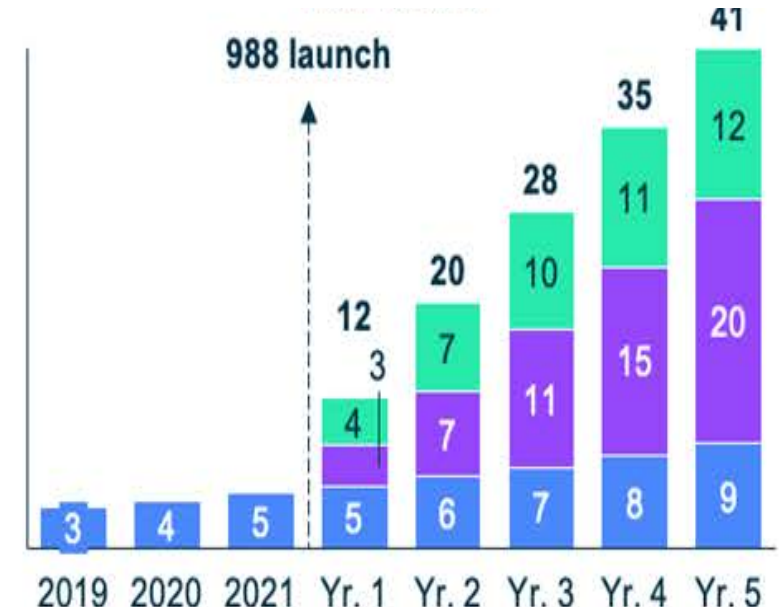
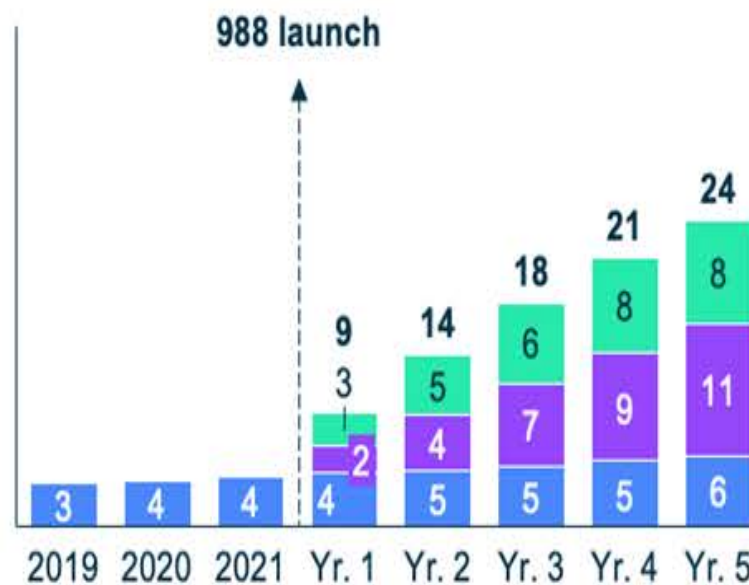
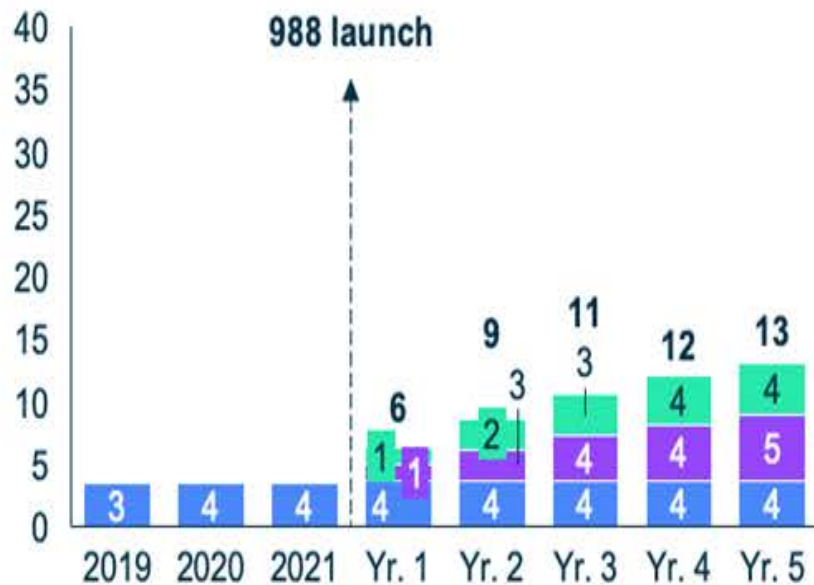
Total volume reflects demand and will vary by design choices and over time.

Demand for 988 services may range from ~6-12M contacts in year 1 and ~13-40M contacts in year 5

Scenario 1:
Low Volume

Scenario 2:
Medium Volume

Scenario 3:
High Volume



■ Baseline volume (Lifeline)
 ■ Diverted volume from 911 and crisis centers
 ■ New volume (previously un-served)

State-level volume projections were adapted from national volume predictions to inform service planning (single state example)

State level forecasts focus on **potential utilization (total number of contacts handled)** to best inform service planning. In crisis work, it is common for callers to change their minds about talking to a crisis worker and hang up before a crisis worker can respond. Handled contacts are those that do not immediately disconnect. The most accurate estimates of are those based on the work required to handle contacts, so abandoned contacts are excluded from the state-level forecasts to best inform planning.

Key assumptions that might change volume distribution across states as policymakers finalize decisions about the scope and structure of the services:

- State forecasts assume:
 - Call, chat, and text are funded locally rather than nationally.
 - 988 network will have access to and utilize geolocation data.
- Specialized support for high-risk populations may be handled nationally reducing the overall work for each state.

Idaho Forecast Volume

Population	1,860,120	Percent of US Population	0.6%
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		Low	Medium	High
Year 1	Offered	35,000	51,100	69,400
	Handled	26,100	37,800	51,700
	* Phone	14,500	21,000	28,700
	* Chat	11,100	16,100	22,000
	* SMS	500	700	1,000

Year 5	Offered	72,800	138,300	231,600
	Handled	53,900	102,700	172,700
	* Phone	28,300	55,200	93,000
	* Chat	21,000	39,100	65,700
	* SMS	4,600	8,400	14,000

Vibrant and the Lifeline are planning for 988, and working with states on this planning, to ensure 988 includes:

- Universal and convenient access
- High quality and personalized experience
- Connections to resources and follow up

988: Universal & Convenient Access

Theme

Tenets / goals

Universal and convenient access



Public awareness and engagement: 988 will have public awareness levels comparable to 911, and the public will be aware of the scope of services provided by and accessible through the line



Resources for self-help: 988 will provide access to resources for individuals to effectively help themselves and others to de-escalate crises, develop coping skills, and build resiliency



Multi-channel availability: 988 will be accessible through varying modalities based on individual needs (e.g., call, chat, text, video) by a unified platform



Reliable and timely response: All persons contacting 988 will be connected to professionally trained individuals in a reliable, timely, and efficient way

988: High Quality & Personalized Experience

Theme

Tenets/goals

High quality,
personalized
experience



Tailored support: 988 will be a source of personalized, trusted support (e.g., tailored support for frequent callers, specialized services to meet functional, linguistic, or cultural needs)



Consistency in line with best practices: All persons contacting 988 should receive care in line with best practices

988: Connection to resources and follow up

Theme

Tenets/goals

Connection to resources and follow up



Localized response: All persons contacting 988 will be connected to helpline support and additional local community resources (e.g., emergency dept, support groups) that reflect their location and local context (as relevant)



Connection to local public health and safety services: As needed, 988 can connect to local public health and safety services (e.g., Emergency Medical Services (EMS), Mobile Crisis Teams (MCTs), law enforcement, healthcare providers) to provide appropriate support while avoiding unnecessary law enforcement involvement, emergency department (ED) use, and hospitalization



Follow-up as needed: As appropriate, persons contacting 988 may be offered follow-up services to facilitate on-going support and safety

988: Connection to resources and follow up

Theme

Tenets/goals

Connection to resources and follow up



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Planning & Preparation

Lifeline's
State Capacity Building Grants (2019-2021)



Current and Recent State Capacity Building Grants

Lifeline's State Capacity Building Grants:

- Grant funds come from increases in SAMHSA award to Vibrant for NSPL -- **and from private donations**. These were the some of the largest grant awards Lifeline has made in its 15-year history.
- First two awards were made in 2017 to WA and MS (1-year awards)
States moved from answer rates in the mid 40% range to the upper 70 and lower 80% range.
States have impressively, to date, maintained investments.
- Fall 2019 and early 2020: Thirteen 2-year awards were made:

Indiana - \$584,475	Pennsylvania - \$1,366,999
Kansas - \$193,946	South Carolina - \$741,672
Kentucky - \$278,433	Tennessee - \$203,894
Massachusetts - \$330,844	Texas - \$3,080,806
Michigan - \$1,368,944	Vermont - \$135,728
Nevada - \$168,659	Virginia - \$328,413
New York - \$2,063,101	

Gains in current 2-year capacity building grants

- 7 states have already exceeded their 2-year grant goals.
- 2 additional states (MI and SC) are within 4% and 3% points of meeting those goals.
- These gains have been made as of March 2021 (latest full data available) with 6 months still on the project
- Many states have plans in place to sustain gains with state funds.
 - States are in varying stages of sustaining investments (ex: MI and TX (two of our highest priority states due to volume) have committed \$3m+ per year to sustain NSPL center level gains.)
- Relative to boosting in-state answer rates:
 - VT has increased their answer rate by +81% points (from 0%);
 - PA and SC gaining +48% points each (both are significant call volume states)
 - MI, NV, and NY increasing by between +30 to +35% points (MI and particularly NY are high volume)
 - KY gaining by +25% points,
 - TN by +14% points
 - KS by +12% points.

988

Planning & Preparation

Vibrant 988 State Planning Grants (2021)



In the 988 Planning Grants, states will submit Implementation Plans based on Eight Core Planning Considerations

1. **24/7 statewide coverage** for 9-8-8 calls, chats, texts and follow-up services
2. Strategies for **diversified funding streams** for 988 centers, including consideration of 988 fees
3. Planning based on call, chat, and text **volume growth projections** provided by the Lifeline
4. States must support **Lifeline's operational, clinical and performance standards**
5. Multi-stakeholder **988 implementation coalitions** must be formed
6. 988 centers must maintain local **referral listings**, and assure **linkages to local crisis services**
7. **Follow-up services** based on Lifeline best practices and guidelines
8. **Consistency in public messaging** regarding range of services and how 988 is different from 911

Key 988 Planning Grant Activities

1. **Landscape analysis of all state crisis services**, data survey of all Lifeline centers, data to state agencies (March)
2. **Technical Assistance** session 2-3x per month February-August. Topics include:
 - Cost modeling and volume growth assumptions
 - Best practices in follow-up care
 - Operational performance metrics
 - Clinical standards
 - Equity and social justice considerations for centers and state planning/implementation coalitions
 - State legislation and 988 fee generation (similar to 911 fees)
 - Call center technologies (unified telephony platform and call management tools)
 - Public messaging for 988
3. Draft 988 Implementation Plan due from states to Lifeline 9/30/21
4. **Final 988 Implementation Plan** due from states to Lifeline and SAMSHA 1/21/22

Thank you for supporting national
and state efforts to prepare for, and
implement 988

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