

988 Desired Outcomes and Metrics. Messaging Campaigns

988 Stakeholders' Webinar

June 2021

NEBRASKA

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Meeting Objectives and Agenda

Meeting Objectives:

- Describe considerations regarding messaging for the behavioral health crisis line (988) in Nebraska.
- Describe the current metrics collected by the behavioral health crisis line (988) in Nebraska.
- Stakeholders should consider current metrics and messaging and identify gaps or opportunity for growth, as evidenced by feedback on the post-webinar survey

Agenda:

- Post-Meeting Survey Announcement
- Messaging
- Metrics

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988 Messaging Considerations

- Procedural Messaging versus messaging to all Nebraskans
- Consistency of messaging

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Monthly Data Reported to Vibrant on NE Lifeline Calls

- Total number of Lifeline calls received this month:
May YTD monthly avg: 850
- Total number of Lifeline calls the center answered this month:
May YTD monthly avg: 700
- Answer rate: *May YTD 82% Vibrant Requires 80% by 9/21 and 90% by 7/22*
- Average Speed of Answer (in seconds): *May YTD avg: 18 seconds*
- Average Handle Time (in seconds): *May YTD avg: 940 seconds*



Gender: Male, Female, Transgender/Non-Binary, Gender Unknown

Total number of Lifeline calls this month by age:

Age 12 and under

Age 13-24

Age 25-34

Age 35-44

Age 45-54

Age 55-64

Age 65-84

Age 85 and older

Age unknown

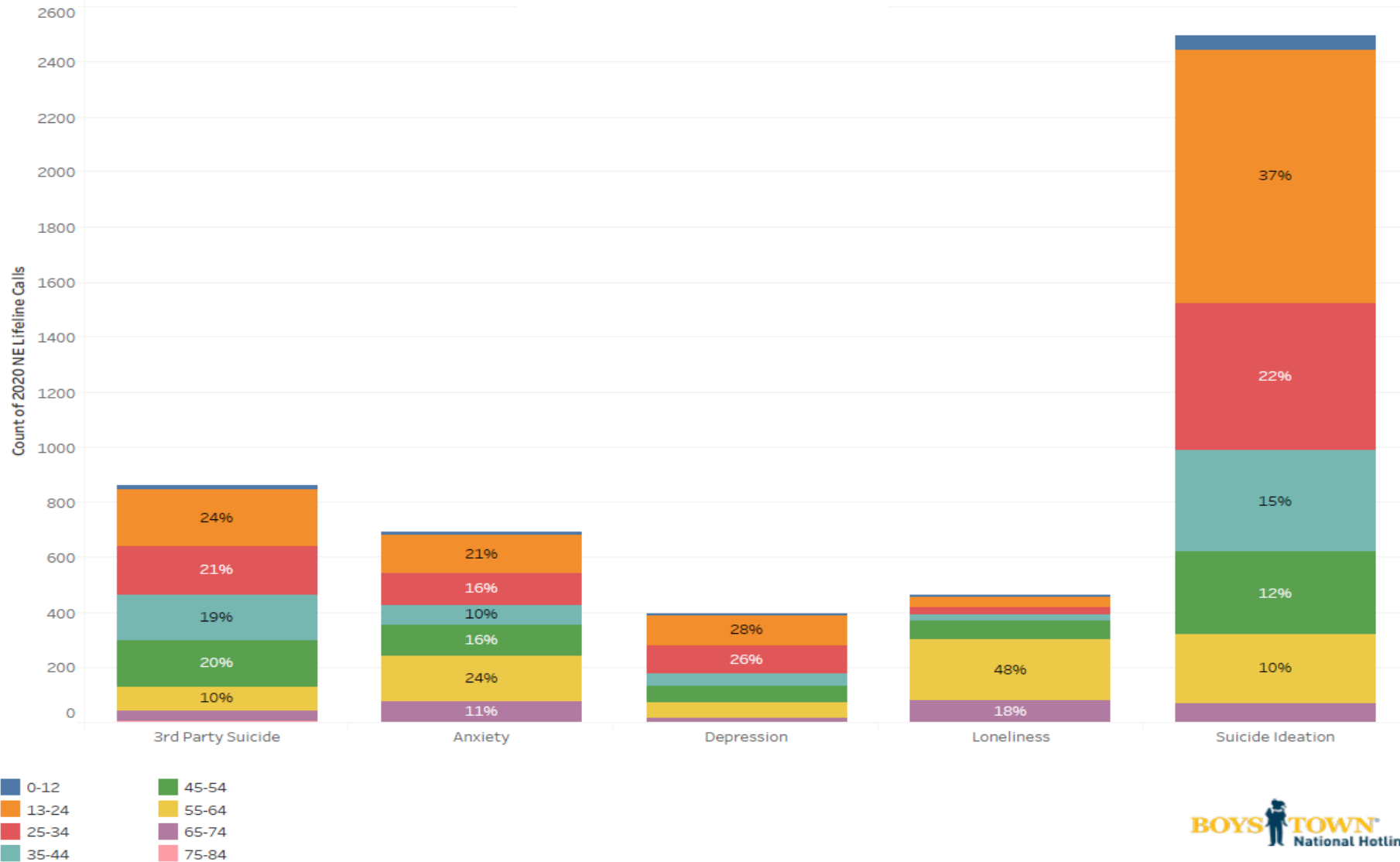
Suicide Ideation: (when the caller is thinking about or creating a plan to attempt suicide)

Information Reported monthly:

Callers with:

- Current thoughts of suicide
- Suicide ideation in the recent past (previous 2 months)
- Prior attempts survivors
- Suicide loss survivors
- Third-party caller concerned about another individual with suicide ideation
- Assessment of suicidal ideation was not applicable
- The presence of suicidal ideation could NOT be assessed

Top 5 Primary Presenting Concerns





Caller Imminent Risk - Suicide plan in place with means available and intention to act.

Suicide attempt in progress: When an individual takes actions to end their life prior to or during a conversation with the crisis counselor.

Emergency rescue (voluntary and involuntary) - The need during a call to request potentially life-saving services, such as the police or fire department, and/or Emergency Medical Services (e.g., ambulance or other transport services, 3rd Party Notification parent/adult).

In a **voluntary** emergency rescue, the crisis counselor and caller work together (or the caller gives the counselor permission) to contact emergency services/speak with 3rd Party.

In **involuntary** emergency rescue, the counselor requests emergency services to be dispatched without the consent of the person at risk.



Imminent Risk-Emergency Rescue Data Reported Monthly

Total number of Lifeline calls this month where callers were:

- At imminent risk for suicide

Total number of calls where:

- Emergency rescue was not needed because caller was NOT at imminent risk for suicide
- Voluntary emergency rescue was dispatched for suicide
- Involuntary emergency rescue was dispatched for suicide
- Emergency rescue was dispatched but the individual could not be located for suicide
- Emergency rescue was NOT needed because risk for suicide was reduced

Third Party Call Imminent Risk (when a third-party caller contacts Lifeline and the crisis counselor can determine that the caller is calling on behalf of another person that is at imminent risk for suicide.)

Total number of Lifeline calls this month where:

- Imminent risk for suicide for third party caller was present
- Emergency rescue was not needed because the person at risk was NOT at imminent risk for suicide
- Voluntary emergency rescue was dispatched for person at risk
- Involuntary emergency rescue was dispatched for person at risk
- Emergency rescue was dispatched but the person at risk could not be located for suicide
- Emergency rescue was NOT needed because risk for suicide for person at risk was reduced



Other Data Elements Tracked and Monitored

- **Resolution of Calls** - Resolved/De-escalated, Safety Plan/Agreement, Therapeutic Services in Place, Outbound Follow-up Offered, Referrals Given, Conference Call, Third Party Contact, CPS, Police/Emergency Medical and Mobile Crisis Team
- **Employee Performance** - # of incoming and outgoing calls, average Call Handled time, Average Call Answer time, accuracy of documentation and various quality standards (counseling and communication skills and adherence to policy and procedure)
- **Volume Trends**- half hour, shift, day of the week, weekly, monthly, etc.