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A Place to Call	
SAMHSA KPIs for 988 Lifeline Crisis Centers	Reported to DOH monthly • Number of staff and/or volunteers in the mental health and related workforce trained in mental health practices or activities. • Number of individuals screened for suicidal ideation. • Number of individuals referred to mental health or related services. • Number and percentage of individuals receiving mental health or related services after referral. • The number of individuals who died by suicide. • The number of individuals who attempted suicide. **Reported to DOH monthly broken down by call, text, and chat** • Identified individuals in substance use crisis. • Number of contacts that result in mobile crisis outreach referrals. • Number of contacts that included suicide attempts in progress. • Number of contacts that result in an emergency rescue without law enforcement. • Number of contacts that result in an emergency rescue with law enforcement.
Vibrant 988 Metrics	Reported to Vibrant monthly ***State Calls:*** • **Routed:** Number of calls that listen to the initial greeting to then be routed to a center. This metric is used for network-wide and historic reporting, and includes all calls sent to a center, regardless of the time the caller abandoned. • **Received:** Number of calls that listen to the initial greeting to then be routed to a center. This metric is used for network-wide and historic reporting, and includes all calls sent to a center, regardless of the time the caller abandoned. – As of September 22, 2022, "Received" is equivalent to "Routed" due to improved accuracy in tracking the routing process. The field remains for historical comparison. • **Answered In-State:** Number of "Received" calls answered by a state or territory's center(s). • **In-State Answer Rate**: All "Answered In-State" calls divided by all calls "Received" to the state. • **Abandoned In-State:** Number of "Received" calls that disconnect prior to being engaged by a counselor at a state or territory's center(s). Disconnection may happen for a number of reasons, including but not limited to: the person reaching out changes

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Vibrant 988 Metrics (cont'd)	their mind about seeking care at that moment; the person no longer feels they have privacy or safety in their environment; or there is a random technical service interruption, which may occur due to internet instability, carrier glitches, etc. • **Flowout to Backup:** Number of "Received" calls not "Answered In-State" nor "Abandoned In-State". • **Rollover Rate to Backup:** Number of "Flowout to Backup" calls divided by total number of "Received" calls. • **In-State Abandon Rate:** All "Abandoned In-State" calls divided by all "Received" calls. • **Average Speed of Answer (ASA) In-State:** Out of all "Answered In-State" calls, the average time a contact takes to be answered after listening to the automated greeting. As "ASA's" are by nature an "average," the experience of those contacting the Lifeline at different centers in different states or times of day may experience variations in individual wait times. ***Chats/Texts*** • **State Demand:** The number of contacts initiated from the state/territory. For text, the contact's state is based on the contact's exchange (first 6 digits of their phone number). For chat, state is based on the contact's IP address. • **Received:** Number of contacts that enter the state/territory's queue. For text, the contact's state is based on the contact's exchange (first 6 digits of their phone number). For chat, state is based on the zip code entered in the contact's pre-chat survey. The values will be populated whenever routing to a 988 crisis center is established to respond to in-state chats and texts. • **Answered In-State:** Number of contacts answered from the state/territory's queue. The values will be populated whenever routing to a 988 crisis center is established to respond to in-state chats and texts. • **In-State Answer Rate:** All contacts "Answered In-State" divided by all contacts "Received". The values will be populated whenever routing to a 988 crisis center is established to respond to in-state chats and texts. • **Abandoned In-State:** Number of "Received" contacts that disconnect prior to being engaged by a counselor at a state/territory's center(s). The values will be populated whenever routing to a 988 crisis center is established to respond to in-state chats and texts. Disconnection may happen for a number of reasons, including but not limited to: the person reaching out changes their mind about seeking care at that moment; the person no longer feels they have privacy or safety

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Vibrant 988 Metrics (cont'd)	in their environment; or there is a random technical service interruption, which may occur due to internet instability, carrier glitches, etc. • **In-State Abandon Rate:** All contacts "Abandoned In-State" divided by all contacts "Received". The values will be populated whenever routing to a 988 crisis center is established to respond to in-state chats and texts. • • **Flowout to Backup:** Number of "Received" contacts not "Answered In-State" nor "Abandoned In-State". • **Average Speed to Answer:** Out of all "Answered In-State" contacts, the average time a contact takes to be answered after being offered to the state/territory's queue. As "ASA's" are by nature an "average," the experience of those contacting the 988 Lifeline at different centers in different states or times of day may experience variations in individual wait times. ***Center-Level Metrics*** • **Offered:** Number of calls that Vibrant offers to the center. – With the exception of July 1, 2022 to September 22, 2022, the term Offered includes all calls routed to a center, regardless of what time they abandoned at the center. • **Answered:** Number of calls that Vibrant sees the center answering. – Note that prior to July 2022, Answered was calculated using Center Performance Metrics to approximate center performance at ACD centers. • **Answer Rate:** All "Answered" calls divided by all "Offered" calls for center-level metrics, as defined above. • **ASA (Average Speed to Answer):** For centers, this is the average time to answer a call, for all answered calls at the center. The time to answer a call is calculated from the moment a call is offered to the center, until Vibrant receives the answered signal from the center. As "ASA's" are by nature an "average," the experience of those contacting the 988 Lifeline at different centers in different states or times of day may experience variations in individual wait times.
BH-ASO Reports for Regional Crisis Lines	Reported by the BH-ASO quarterly. • Total number of calls to the crisis line: The number of calls that were received at the RCL. • Total number and percentage of calls answered by the RCL: All calls that were answered by the crisis line and as a percentage of total calls received.

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	• Average time to answer calls: The average time of answering calls received by the RCL. • Total number and percentage of calls answered within 30 seconds: The number of calls answered within the contractual timeline of 30 seconds as both a total and percentage of answered calls. • Total number and percentage of telephone calls abandon: The number of calls that are abandon during an answered called to the RCL.
Someone to Come	
BH-ASO reports on mobile crisis/ITA investigations	• The total number of mobile crisis outreach services: How may mobile crisis services were provided in a region. • Precent of emergent referrals: Percent of mobile crisis response determined to be emergent and require teams to respond within 2 hours. • Percent of urgent referrals: Percent of mobile crisis response determined to be Urgent and require teams to respond within 24 hours. • Total number of ITA investigations: The overall total number of ITA investigations in a region. • Number of ITA investigations done via telehealth: The number of ITA services completed by telehealth. • Number of ITA investigations not meeting criteria resulting in referral to outpatient services. • Number of ITA investigations not meeting criteria resulting in referral to voluntary inpatient services. • Total number of ITA investigations that resulted in detention or revocation: Total number of detentions and revocations filled for either MH or SUD detention.
BHDS/General	Demographics: BHDS requires the following information if available for all transactions to identify a client and track for important measures: • Name • SSI • D.O.B • Gender

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	• Hispanic origin • Primary language • Race • Sexual orientation **Address:** BHDS requires an address for most transactions to determine the place the person lives and where a service occurred. This includes the following elements: • Address • City • County • State • Zip code **Client profile**: in addition to demographic data the following is also captured if available to provide more ways to split up the data. • Education • Employment • Marital status • Parenting • Pregnant • Smoking status • Residence • School attendance • Self help count • Used needle recently • Needle use ever • Military status • SMI/SED status **Program identification**: The identification of the program submitting the data to identify necessary elements. **Service episode:** An identifier to define the service episode for the reporting elements to allow for multiple program services to be submitted.
BHDS/Mobile crisis	• **Mobile crisis response type:** Distinguishes between an in person and telehealth service.

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(current)	○ In-person: an outreach to where the help seeker is in the community. ○ Telehealth: A telephone or telehealth service provided to the help seeker. • **Event start time and date:** the time and date a referral is received. • **Mobile crisis referral source:** The source of a referral for mobile crisis that includes: ○ Family or friend ○ Hospital ○ Professional ○ Care facility ○ Legal representative ○ Post secondary school ○ Law Enforcement ○ Community members ○ Self-referral ○ Crisis Call center referral ○ Designated crisis responder ○ Other • **Response time:** Tracks the acuity of the referral and the response times that each team should respond within. ○ Urgent (24-hours) ○ Emergent (2-hours) ○ Routine/Follow up • **Needs interpreter:** Asks if an interpreter is needed to work with a help seeker and whether or not the interpreter was used. • **Time of dispatch**: The time a mobile crisis team is dispatched. • **Time of arrival/telehealth encounter**: The time a team arrives to the scene and/or when a telehealth encounter is started. • **Presenting problem**: The main concern of the person in crisis. ○ Mental Health ○ SUD ○ Co-occurring (MH and SUD) ○ Other • **Co-responder involvement**: Whether or no law-enforcement co-response is present. ○ Law enforcement co-response present or not • **Mobile crisis response outcome:** The outcome of the mobile crisis service. ○ Routine follow-up completed. ○ Stabilized no additional services needed. ○ Stabilized with follow up recommended.

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	○ Transport to crisis stabilization ○ Transport to hospital ○ Police/911 ○ DCR for ITA investigation ○ Unable to locate ○ Other • **Referral given:** The referrals provided by the mobile crisis team to track what help seekers need to address needs. ○ Referred to SUD and MH services ○ Non-BH community services ○ Forensic Projects for Assistance in Transition from Homelessness. (F-PATH) ○ Forensic Housing and Recovery through Peer Services. (F-HARPS) ○ Housing and Recovery through Peer Services. (HARPS) ○ Projects for Assistance in Transition from Homelessness. ○ Other housing resources ○ Adult protective services ○ EBT/ABD ○ Educational assistance ○ Employment assistance ○ Home and community services ○ Job training ○ Medical insurance services ○ Dental care ○ SSI/SSDI ○ Veterans administration ○ Voluntary inpatient behavioral health services ○ Alternative housing support (shelters) ○ Food bank ○ No referrals given • **Event end time and date:** The time and date the services ended. • **County code:** A code to identify the county that the mobile crisis team provided services. • **NPIs:** The NPI numbers for the BHA and personnel involved in the mobile crisis service.
BHDS/Mobile crisis (future) Highlighter items are changed from the current version.	• Service type: Distinguishes between an in person, telephonic service, and HIPAA compliant telehealth service. ○ In-person: an outreach to where the help seeker is in the community. ○ Telephonic: A service provided over telephone ○ HIPPA compliant video: telehealth service provided to the help seeker.

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	• **Referral date/time:** The date and time the mobile crisis team received a referral.
	• Referral source: The source of a referral for mobile crisis that includes:
	  ○ Family or friend
	  ○ Hospital
	  ○ Professional
	  ○ Care facility
	  ○ Legal representative
	  ○ School (pre-k through 12, college, trade school)
	  ○ Social service provider
	  ○ Law Enforcement
	  ○ Community members
	  ○ Self-referral
	  ○ Crisis Call center referral
	  ○ Designated crisis responder
	  ○ EMS, fire, other responder
	  ○ Juvenile corrections
	  ○ Adult corrections
	  ○ MRRCT follow-up
	  ○ Other
	• **Level of acuity (former response time):** Tracks the acuity of the referral and the response times that each team should respond within.
	  ○ Urgent (24-hours)
	  ○ Emergent (2-hours)
	  ○ Routine
	• Interpreter utilized: Asks if an interpreter is needed to work with a help seeker and whether or not the interpreter was used.
	• **Time of dispatch:** The time a mobile crisis team is dispatched.
	• **Services arrival/time of telehealth**: The time a team arrives to the scene and/or when a telehealth encounter is started. Used to determine response time.
	• **Presenting problem:** The main concerns of the help seeker that need to be addressed by the mobile crisis team.
	  ~~○ Mental Health~~
	  ~~○ Co-occurring (MH and SUD)~~
	  ○ Suicidality
	  ○ Harm/risk to self
	  ○ Harm/risk to others

- Harm/risk from others
- Anxiety
- Disruptive behavior
- Depression
- Mood dysregulation
- Family conflict
- Trauma
- Peer difficulties
- School problems
- Psychosis
- Eating disturbance
- Intellectual/developmental disability
- Identity discovery
- Loneliness
- Intimate relationship problems
- Bereavement
- Critical incident
- Substance use
- Substance intoxication
- Substance withdrawal
- Other

- **Law Enforcement and Co-responder Involvement**: Whether other first responders were involved in the mobile crisis service.
  - Law enforcement present without co-responder
  - Law enforcement with BH co-responder present
  - Law enforcement with non-BH co-responder present
  - Community based crisis team response
  - Non-law enforcement based co-response.
- **MRRCT service outcome:** The outcome of the mobile crisis service.
  - Routine services completed
  - MRRCT service completed no follow-up recommended
  - MRRCT service completed follow-up recommended
  - Voluntary placements at a crisis facility
  - Voluntary transfer to community hospital.
  - Law enforcement
  - DCR for ITA evaluation.
  - Unable to locate individual no follow up recommended.
  - Unable to locate individual follow-up recommended.

- Voluntary placement at shelter or other safe location.
- Assisted with transport to needed services.
- Individual declined or terminated MRRCT services, no follow-up recommended
- Individual declined or terminated MRRCT services, follow up recommended.
- In-home stabilization.
- Other

- **Referrals given:** The referrals provided by the mobile crisis team to track what help seekers need to address needs.
  - Referred to SUD and MH services
  - Non-BH community services
  - Forensic Projects for Assistance in Transition from Homelessness. (F-PATH)
  - Forensic Housing and Recovery through Peer Services. (F-HARPS)
  - Housing and Recovery through Peer Services. (HARPS)
  - Projects for Assistance in Transition from Homelessness.
  - Other housing resources
  - Adult protective services
  - EBT/ABD
  - Educational assistance
  - Employment assistance
  - Home and community services
  - Job training
  - Medical insurance services
  - Dental care
  - SSI/SSDI
  - Veterans administration
  - Voluntary inpatient behavioral health services
  - Alternative housing support (shelters)
  - Food bank
  - No referrals given
  - Peer respite
  - Crisis stabilization or Withdrawal management
  - In-home stabilization
  - Recovery navigator
  - WISe

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	○ Transition aged youth (TAY) ○ School based mental health services ○ DCYF ○ DDA ○ Parenting support ○ Youth at risk information • **End event time and date:** The time and date the services ended • **MRRCT county code:** A code to identify the county that the mobile crisis team provided services. • **MRRCT NPIs:** The NPI numbers for the BHA and personnel involved in the mobile crisis service.
A Safe Place to Be	
Provider One Claims data	• **Claim data:** Currently the data collected for facilities is only basic claim data used to validate an encounter and ensure billing is happening in a timely manner. This data can be used to see individual level utilization. • Claim type • Provider name • Service type • Admission • Discharge. • Location address • Location city • Location county • Location zip code • Diagnosis code • Procedure code • Patient name • Patient DOB • Patient provider one ID.