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The 988 Suicide and Crisis Lifeline Legislative Report for New York State

Dec. 31, 2023

The Commissioner of the Office of Mental Health, in consultation with the Commissioner of the Office of Addiction Services and Supports, hereby presents this report which details the implementation of the 988 Suicide and Crisis Lifeline in New York State. This report is required by Part EE of Chapter 57 of the Laws of 2022.

I. Background and Context

On July 16, 2022, the National Suicide Prevention Lifeline officially launched across the nation as the 988 Suicide and Crisis Lifeline. The implementation of the 988 Lifeline was a watershed moment in the history of crisis and behavioral healthcare in the United States, offering an accessible means of communication for the millions experiencing emotional distress while destigmatizing seeking mental health support. New York State embraced the opportunity to become a national leader in coordinated comprehensive crisis response services.

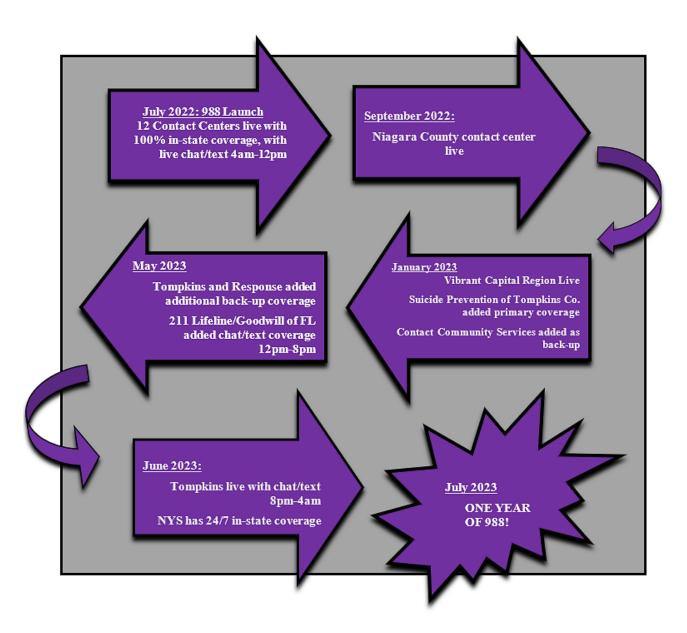
Since the early development of the 988 Lifeline, New York envisioned an accessible channel of communication linking anyone in mental health distress to a crisis counselor trained in deescalation, who is available to connect the caller to community resources and follow-up support, as needed. New York designed the 988 Lifeline to be more than a suicide hotline; it is an immediate connection to local crisis counselors specifically trained to assess and provide support for emotional distress, mental health or substance use crises, and/or suicidal ideation. Likewise, the 988 Lifeline is a mechanism for individuals concerned for a friend or loved one in crisis who may need guidance from a crisis counselor on how to best offer immediate support and link them to behavioral health services and/or community resources.

The 988 Lifeline crisis counselors assess the risk of every caller and aid in the development of a personalized safety plan. Statistics presented by the Substance Abuse and Mental Health Services Agency show that 80 percent of crises are resolved at the call center level, demonstrating the effectiveness of the crisis counselors' ability to defuse mental health crises

and suicidal presentations without the need for in-person intervention. However, if the crisis counselor has assessed the caller and determined that an in-person intervention is needed, with the caller's consent, the crisis counselor may use the 988 Lifeline network to engage local mobile crisis services for a resolution within the safety and comfort of the caller's community setting. Follow-up procedures and protocols directed by 988 crisis counselors ensure the caller knows individualized support will be provided to them after the call has ended. After all, 988 is more than a number in New York - it is the portal for convenient access and rapid entry into the coordinated crisis response system.

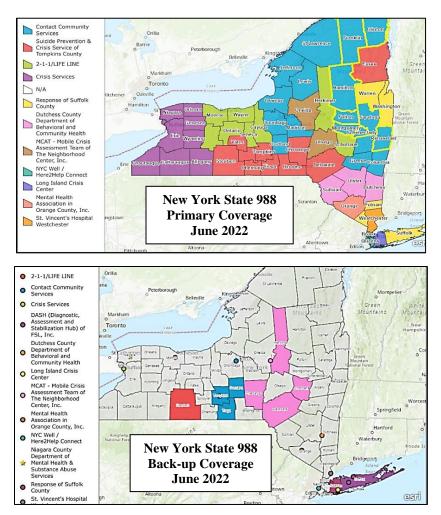
In the first year of operation, the national 988 Lifeline answered nearly five million contacts – almost two million more than the previous 12-month period before the transition to the threedigit 988 number from the ten-digit National Suicide Prevention Lifeline number. Of the nearly five million contacts answered, about 665,000 were texts, validating that this accessible form of communication is preferred by many. Within the first year of operation, the number of texts answered grew by 1,135 percent, while online chats answered increased by 141 percent and calls answered increased by 46 percent. Data continue to trend upward with an overall growth in number of contacts being made and answer rates significantly improving, further demonstrating that more people are connected to mental health and crisis services faster than ever before. Similar data trends can be seen in New York State as well, giving credence to the presenting need for rapid crisis assessment and de-escalation support.

The 988 Lifeline presents an opportunity to weave the national mental health safety net of ondemand telephonic emotional support into the fabric of the local crisis care continuum. Increased collaboration between the 911 network and the 988 Lifeline presents greater support opportunities for those experiencing suicidal ideation and/or a mental health crisis. Deescalation and assessment efforts by trained crisis counselors and the subsequent engagement of mobile crisis teams as needed, in place of using law enforcement or EMS resources, not only works to destigmatize crisis support, but ultimately reduces the burden on hospital emergency departments. Furthermore, transitioning mental health crisis response away from the 911 network's purview builds on community trust in a crisis program that does not result in the overutilization of law enforcement presence, when avoidable. OMH has begun strengthening reciprocal relationships with law enforcement, 911 Public Safety Answering Points, and other emergency response affiliates, through the implementation and coordination of the 988 Lifeline. i. Major Milestones in the First Year of New York State 988 Implementation:



II. 24/7 New York State 988 Suicide and Crisis Lifeline Centers Statewide Coverage

Since its nationwide launching last year, the 988 Suicide and Crisis Lifeline continues to offer high-quality behavioral health responses from local crisis counselors throughout New York. Twelve 988 contact centers, operating 24/7, were available to serve all 62 counties in New York when the system was introduced in 2022. At that time, Niagara County Department of Mental Health and Substance Abuse Services was finalizing the onboarding phase to become the primary 988 center for three counties in Western New York (Niagara, Genesee, and Orleans). Additionally, two agencies were awarded a Request for Applications to develop two new contact centers in areas lacking permanent 988 crisis services coverage. Vibrant Emotional Health and the Mental Health Association of Essex County began the onboarding process to join the 988 Lifeline network and serve as the primary contact center for the Capital Region and North Country, respectively. During the onboarding process, existing contact centers delivered temporary coverage services for these regions until the new centers became fully operational, ensuring that all 62 counties in New York were covered for 988 calls.



i. New York State 988 Contact Center Primary and Back-up Coverage: July 2022

It is OMH's priority for each county to have both in-state primary and back-up 988 contact center coverage since calls are routed by area code and not by geolocation. In the event a primary contact center is unable to answer due to high caller volume, the call will automatically reroute to one of the assigned back-up centers. Enhancing this safeguard, OMH systematically designed an in-state back-up center coverage schedule, minimizing both the number of calls routed to the national back-up system and the likelihood of New Yorkers having their calls answered out-of-state. In July 2022, there were 10 counties in New York State assigned for instate back-up coverage.

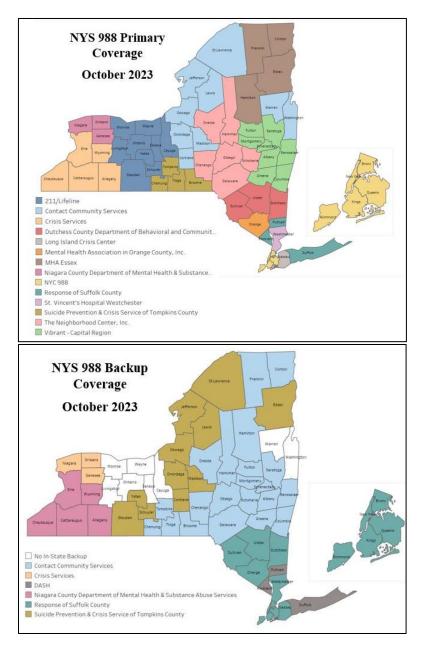
Broad State Metrics, Vibrant Emotional Health, July 2022			
KPIs	July 2021	July 2022	
Routed	12,496	16,376	
Received	12,496	15,543	
Answered In-State	7,852	12,154	
In-State Answer Rate	63 percent	78 percent	
Average Speed to Answer	54 seconds	38 seconds	

According to reports released by Vibrant Emotional Health, the administrator of the 988 Lifeline, during the first weekend of 988 being live, there was a nearly 60 percent increase in calls answered and more than double the numbers of calls received than the previous weekend. This resulted in the in-state answer rate increasing from 69 percent to 82 percent in one weekend (*Broad State Metrics, Vibrant, August 2022*). Comparing July 2021, the year before 988 went live, to July 2022, New York increased the in-state answer rate by 15 percent, received 3,000-plus more calls, and answered 4,300-plus calls in total.

Throughout the first year, as New York State 988 contact centers increased their capacity to respond to more contacts, six of the centers systematically joined the state routing queue to receive New York State chats and texts on a 24/7 rotating schedule. By June 2023, in less than one year, New York was able to achieve 24/7 in-state coverage for all methods of communications of 988.

ii. Current Landscape of 988 in New York State: October 2023

All 62 counties in New York State maintained in-state primary coverage since July 2022. As of October 2023, 54 New York State counties have in-state back-up coverage for 988. This includes complete primary and back-up coverage of all five boroughs in New York City. This is a major accomplishment as nearly 50 percent of the total annual statewide 988 volume is attributed to area codes associated with the New York City region. In 2024, OMH will work with the existing contact centers to secure back-up coverage for the remaining eight counties. By ensuring both primary and back-up in state coverage, this significantly reduces the likelihood of New Yorkers receiving emotional support outside of New York State.



III. Data Collection and Metrics for New York State 988 Contact Centers

i. Data Metrics

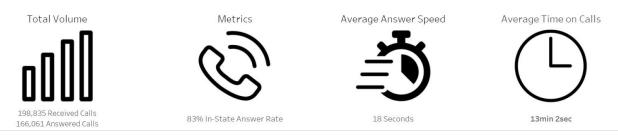
Beginning in July 2022, the New York State 988 contact centers began collecting data metrics identified by the Commissioners of the Office of Mental Health and the Office of Addiction Services and Supports in accordance with the reporting metrics outlined in the 988-enacting legislation.

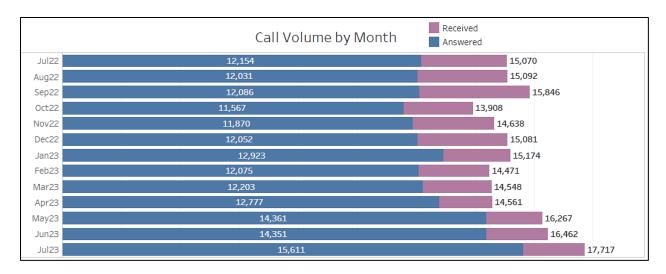
The New York State 988 contact centers have worked closely with the OMH's Bureau of Crisis, Emergency, and Stabilization Initiatives and the OMH's Office of Population Health and Evaluation to establish a monthly data reporting tool using a RedCap self-report survey to collect the following metrics:

- Demographics (gender, age, race/ethnicity, language, military status)
- Primary presenting concern
- Suicidal ideation and experience
- Homicidal ideation and experience
- Imminent risk/emergency dispatch
- Third party imminent risk
- Outcomes
- Follow-up
- How they heard about 988

ii. RedCap Survey Self-Reported Data: July 2022 – July 2023

Between July 2022 and July 2023, New York 988 contact centers reported a total volume of 198,835 calls received. Of the 198,835 calls received, 166,061 calls were answered by a New York State 988 contact center, an average of an 83 percent in-state answer rate for this period. Additionally, the average speed to answer 988 calls once routed to the contact center was 18 seconds. The average talk time spent on the line with a 988 caller was 13 minutes and 2 seconds.

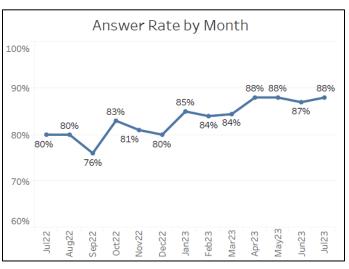




In the past year, the call volume to 988 contact centers has steadily increased. At the same time, the number of calls being answered in-state also increased, demonstrating that more calls were being connected to and answered by New York's 988 contact centers. In July of 2023, New York's 988 contact centers received and answered the most calls reported; 17,717 calls received, 15,611

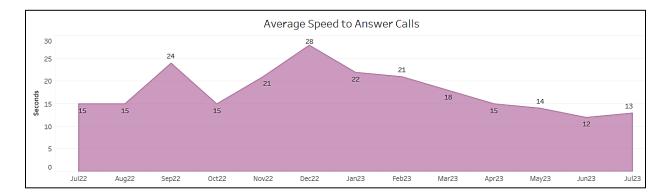
answered for an in-state answer rate of 88 percent.

As the 988 contact centers strengthened their workforce and enhanced their capacity to respond to increasing call volume, the abandonment rate of calls originating in New York State (calls being rerouted to the national back-up system) decreased. The average abandonment rate of 988 calls originating in New York was 17 percent in the first year of operation. As depicted in the adjacent chart, the percentage of calls flowing outside of New York began steadily decreasing in

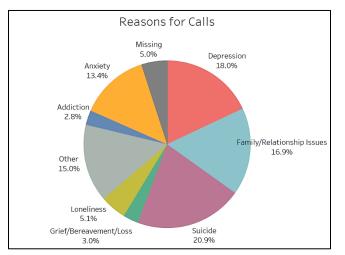


Adandonment Rate

17%
24%
21%
20%
19%
18%
18%
19%
18%
13%
11%
13%
12%



March 2023. This confirms that as the call volume was increasing, more calls were being answered in-state than flowing to a national back-up system.



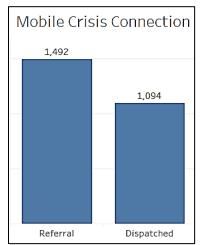
The 988 Suicide and Crisis Lifeline is a resource for all New Yorkers experiencing emotional distress and is not limited as a resource solely for suicidal crisis; as such, the types of requests for assistance are varied. Community education promotes 988 as a direct pathway to emotional support for any mental health, substance use, or suicidal crisis. In August 2023, Governor Hochul announced the successful rollout of

New York State's <u>988 Community Education and Awareness Toolkit</u>, an interactive resource tool designed to support individuals facing suicide-risk.

In addition to suicidal crisis, New Yorkers in need of support have contacted 988 for resources relating to depression, family and relationship issues, anxiety, loneliness, substance use, grief and bereavement, and other issues. When 988 launched, there were concerns expressed nationally by advocates and individuals with lived experience that contacting 988 would automatically generate a law enforcement response. In New York, OMH has clearly communicated that 988 is a separate and distinct service from 911 and law enforcement.

E		
Transfers to 911		
Transfers to 911	495	
% of Calls	0.3%	

Educational content, including <u>988:Just the Facts</u>, was created to help alleviate concern that law enforcement would be overutilized for 988 contacts. It is significant to note that of the 166,061 calls answered during this period, only 495 were transferred to 911 for additional assistance (0.3 percent of total calls answered).



The 988 contact centers will continue to strengthen their connections with mobile crisis teams over the next year and beyond. This advancement in connectivity will naturally enhance as mobile crisis team expansion continues and connectivity between the various components of the comprehensive crisis response system evolves. Currently, 988 in New York does not exist as a single point of access for mobile crisis referral in all contact centers. Connectivity to all mobile crisis teams using best practices for technology and deployment is being studied.

Furthermore, as data reporting to OMH became a new process with the advent of 988, New York contact centers continue to work with the counselors on accurate and complete data reporting. According to the data provided by 988 contact centers

accurate and complete data reporting. According to the data provided by 988 contact centers that have processes in place to refer and engage mobile crisis services, 1,492 referrals were made with mobile crisis and 1,094 mobile crisis teams were engaged.

iii. Mobile Crisis Expansion and Data

Mobile crisis services are a critical part of the crisis service continuum as they have the capacity to divert individuals from unnecessary law enforcement interactions and reroute them from excessive emergency room use and nonessential hospitalization. To understand the intersection of mobile crisis and law enforcement, OMH will collect and analyze data directly from the mobile crisis teams that connect 988 calls to mobile crisis responses. In addition, expanded data collection points will include the frequency in which law enforcement is connected to mobile crisis responses, the role of law enforcement officers in the response, and the degree to which law enforcement is called to accompany mobile crisis as a default response.

In an attempt to collect data from mobile crisis providers related to 988 and mobile crisis response, OMH surveyed mobile crisis providers on the overall functioning of the mobile crisis team from July 1, 2022 through Aug. 31, 2023. Forty-one (41) out of 65 mobile crisis providers responded to this inquiry. Of these 41 providers, 24 submitted data specific to 988 metrics. In

New York City, New York City Well was the single point of access and triage for mobile crisis services for all five boroughs. If during a 988 contact a mobile crisis referral was indicated, the 988 counselors would transfer the contact to New York City Well. In September 2023, New York City Well transitioned to 988 New York City, resulting in a change of processes for all mobile crisis referrals to be triaged through 988. Data received prior to that transition do not reflect the direct relationship between 988 and mobile crisis. More specific data related to 988 in New York City will be available in 2024.

24 of 65 Mobile Crisis Teams Responded to the Survey			
OUTCOME	OCCURRENCE		
Transported to alternate level of care	59		
Transported to ED/CPEP	573		
Transported from MCT to law enforcement to ED/CPEP	65		
Mobile Crisis as first responder on scene	Unknown – not currently tracked by EHR		

Anecdotally, it has been confirmed that law enforcement is involved with mobile crisis services, through pilot projects such as Westchester County 911, Albany County ACCORD, Orange County Crisis Services and Essex County Law Enforcement Mental Health Response Services, for example. At this time, mobile crisis teams do not regularly document when they call law enforcement for support and/or assistance. This reveals the need for mobile crisis providers to capture specific 988 and law enforcement

data points in their electronic health records or other data monitoring processes consistently. These data metrics have been identified and mobile crisis providers will begin to submit data monthly to OMH beginning in January 2024.

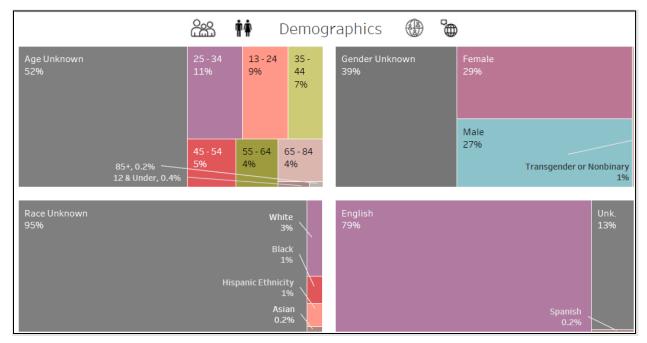
The work for 2024, led by Daniel's Law Task Force, is to understand the current landscape of mobile crisis services in New York State, including current community mobile crisis response models, co-response models with law enforcement and/or emergency medical services or OMH Mobile Access Programs, intersection with law enforcement and community providers, and make recommendations for mobile crisis team configuration and best practices.

After having the opportunity to collect a baseline understanding of the current processes, planning for oversight and data collection of mobile crisis providers are a priority in 2024. This entails the development of a designation process which includes the requirement of standardized data reporting measures and processes until regulations that provide state oversight of mobile crisis programs are complete.

Broad State Metrics, Vibrant, October 2023				
Month	Routed	Answered In-State	Answered Out-of-State	In-State Answer Rate
August	18,324	15,516	2,808	85 percent
September	28,557	24,638	3,919	86 percent
October	30,798	26,572	4,226	86 percent

iv. Most Recently Reported In-State Answer Rate (August – October 2023):

In September 2023, New York City Well transitioned away from an independent hotline and fully transitioned to the sole utilization of 988 for New York City, rebranding as New York City 988. As a result, the volume being directed to the 988 Lifeline in New York State significantly increased. This trend in call growth is expected to continue.



IV. Demographic Information

The 988 Lifeline is a voluntary and anonymous resource. As a result, contact centers are only capable of reporting the demographic information that is voluntarily shared at the time of contact. The above graphic depicts the reporting of age, gender, race, and preferred language of individuals contacting the 988 Lifeline.

V. Follow Up Care

Follow-up care reduces suicide risk, supports people in crisis, and is a cost-effective intervention, especially when contrasted with law enforcement, EMS, and hospital utilization. OMH wants to ensure that follow-up care is offered and available to all individuals who contact 988. Collaboration continues with the OMH's Suicide Prevention Office to identify areas in the state with high suicide rates for potential volume

<u></u>			
	-ollow-up		
	Amount	Percent	
Offered	11,226	5.6%	
Consented	7,522	67.0%	
Contacted	6,706	89.2%	

spikes and the impact that would have on the 988 contact centers that serve those areas. Contact Centers began adapting the practice of offering follow-up care to all individuals in 2023, shifting away from a model of follow-up for only a small subset of the population who have an elevated score on a risk assessment. Even without any formal expectations, over 1 in 20 callers is currently offered follow-up care. The expectation of offering follow-up to 100 percent of individuals who contact 988 will begin as a best practice in crisis care in 2024. OMH will utilize data and consider capacity of Contact Centers to set realistic benchmarks for follow-up practices over the next several years. There will remain an emphasis on considerations for acuity of presentation and with consideration for personal factors, such as age, developmental differences in adults and children/youth, and elevated risk of callers from various groups, including LGBTQIA+, veterans, middle-aged men, Latina adolescents, and Black youth.

VI. Funding

The Governor's Executive Budget for FY 2022-23 included \$35 million dedicated to funding the 988-crisis response system in FY 2023, growing to \$60 million annually thereafter. This critical investment has supported the 988 contact centers in developing, sustaining, and expanding their ability to respond to the most vulnerable New Yorkers in their time of crisis and beyond through follow-up and community linkage.

Additionally, OMH was awarded funding in April 2022 through SAMHSA's Notice of Funding Opportunity, FFY 2022 Cooperative Agreements for States and Territories to Build Local 988 Capacity. Through this funding opportunity, New York has been awarded \$7,280,460 over two years to support workforce capacity building at the local and state levels. Through a supplemental award opportunity in October 2022, OMH was awarded an additional \$2,000,000 from SAMHSA for the contact centers to expand their follow-up practices.

In June 2023, SAMHSA released the FFY 2023 Cooperative Agreements for States and Territories to Improve Local 988 Capacity. OMH applied and in September 2023 was awarded \$11,245,568 annually for three years to continue to support 988 growth, expansion, community education/marketing, and connection with the other components of the comprehensive crisis response system.

Dedicated and sustainable funding is critical to maintain capacity and achieve 100 percent instate answer rates. The funding sources have supported the 988 contact centers in the advancement of their crisis response practices and will continue to support their growth and connectivity to additional components of the crisis response system.