



CRISIS LINE SERVICES - OUTCOMES REPORT APRIL 1ST 2020 – MARCH 31ST 2021

PROGRAM DESCRIPTION The Crisis Line program provides telephone crisis intervention services. These services are available to people in crisis, who are depressed or who are in emotional need. The Crisis Line services philosophy encourages an approach to telephone intervention that communicates support and the exploration of meaningful options through the use of calm, non-judgmental, and respectful tones and language.

PURPOSE – This report is intended for board, management, program staff, stakeholders, and persons served. Feedback and suggestions to assist with continuous quality improvement planning are both solicited and encouraged. The data referenced in this report was collected, recorded, and collated via the use of *iCarol* database system. Past Participant and Stakeholder feedback data are recorded in spreadsheets created in-house.

Key Demographic Indicators	2016 2017	2017- 2018	2018- 2019	2019- 2020	2020 2021	5Yr. comparative Average	Findings
Male	1027	1001	538	387	782	747	There was a substantial increase in male callers with a moderate decrease in female callers. Part of this increase is the reduction of access to mental health services throughout the pandemic. Staff also feel that more males are reaching out for mental health support because of this.
Female	2069	2393	1124	1854	1644	1817	
Gender Diverse	0	2	1	5	6	2.8	
Gender unidentified	37	42	25	20	98	44.4	
*Excluded calls	269	268	229	490	228	296.8	
CL Sub-total	3402	3706	1917	2756	2758	2907.8	Missed call is now N/A as we have switched to a National Line that does not offer the ability to miss calls.
Missed Calls	724	1274	5350	789	0	1718.6	
CL Total	4126	4980	7267	3545	2758	4535.2	
Average Age of Caller (if known /identified)	52	52	52 40-64	52 40-64	52 40-64	52	iCarol shows age ranges not the exact age of caller. CLW's are not required to ask this information from the caller.
Median length of call	11.8	13.8	15.24	11.25	14	13.22	This year's call length average has increased slightly. Staff believe this is due to the intensity of call support during pandemic.



Caller Issues <i>Data Sources: iCarol</i>	2016 2017	2017- 2018	2018- 2019	2019- 2020	2020 2021	5 Yr. Comparative Average	Findings
Mental Health	1784	1871	635	1444	1437	1434.2	Mental health calls remain consistent. These calls cover the spectrum of mental health issues which impact most callers. There were also 1656 calls where mental health concerns were a contributing factor to the main issue for the caller.
Addictions	143	142	53	132	87	111.4	There is a significant decrease in Suicide calls as the presiding factor, however there were 258 calls where suicide was a contributing factor to the issue the caller's main issue. There is a slight increase for addiction related calls as the main concern however, there were 184 calls where addiction was a contributing factor for the caller's main concern. There is a slight increase for Abuse /Violence related calls. There were also 269 calls where this was a contributing factor for the callers main issue/concern. There was also a significant increase with networking our mental health and suicide crisis lines on radio, through our community agencies, volunteers, press releases and social media.
Abuse/Violence	155	153	118	193	200	163.8	
Suicide	89	157	140	339	164	177.8	
Homelessness 2017-18 is tracking housing/emergency shelter'	69	136	2	94	59	72	There is a slight decrease in for Homeless calls/Emergency shelter calls . There were 177 calls taken where this was a contributing factor for the main issue for the caller.
Individual/Family Issue	480	594	328	166	170	347.6	There is consistency from 2019-20 though to 2020-21 fiscal years with Individual and Family related calls. There were also findings that showed there were 385 calls where family and individual issues were a contributing factor to the caller's main concern.
Information	196	170	100	124	N/A	160.6	This is no longer a category in iCarol.
Physical Health	248	293	188	330	258	263.4	There is a moderate decrease with Physical health calls however there were 402 calls where physical health was a contributing factor to the main issue for caller.



Financial 2017-2018: financial/employment	26	36	21	161	34	55.6	There is a significant decrease for Financial/Employment calls. There were 178 calls where financial/employment concerns were a contributing factor for the caller's main concern for call.
Legal Issues	86	147	75	137	96	108.2	There is a slight decrease with legal issue calls as the presiding issue however there were 162 calls where legal issues were a contributing factor to the caller's main concern.
Basic Needs					174	N/A(new category)	There was also a finding of 355 calls where basic needs were a contributing factor to the caller's main concern.
Military-related issue					7	N/A	This is a new category.

Referrals made to Callers by Crisis Line Responders	2016 2017	2017 2018	2018 2019	2019 2020	2020 2021	5 Yr. Comparative Average	Findings
Emergency Medical	70	66	21	21	25	36.4	<p>There was a slight increase for both emergency and non-emergency medical related calls. This could be due to the intensity of calls increasing during the pandemic.</p> <p>Emergency Mental Health calls have decreased and it is believed that this is due to the staff and volunteers supporting call interventions which ultimately reduce the need for emergency support. The calls for non-emergency mental health support have increased for this reason.</p> <p>Ambulance interventions have increased significantly. This is due to some consistent callers who experience chronic thoughts of suicide.</p>
Medical-Non-Emergency	156	142	87	101	113	119.8	
Emergency Mental Health	71	94	99	184	115	112.6	
Mental Health-Non-Emergency	174	142	130	129	207	156.4	
Police Emergency	64	61	58	67	54	60.8	
Police Non-Emergency					31	N/A(new category)	
Ambulance/ Paramedics	23	21	16	0	19	15.8	
MCFD/Child Protection	4	19	28	10	6	67	



Counseling/Therapy	240	270	116	136	208	194	Counseling/therapy referrals have increased significantly and it is believed that this is due to pandemic challenges for callers.
Support Groups	91	109	47	65	49	72.2	
Family/Friends	259	311	217	115	137	207.8	Family/Friends referrals have increased which shows that callers are accessing more support from family and friends during the pandemic due to decreased access to mental health services.
811 Health Link					74	N/A	
Other	679	785	326	233	221	448.8	
Qualified Call-back Invitation	2382	2596	1002	1171	2721	1974.4	QCBI has increased. Staff and volunteers are required to offer this resource in all calls as appropriate.
Shelters and Transportation					17	N/A (new category)	
Local/Other Crisis Line					738	N/A(new category)	
Related to Opioid Use					13	N/A (new category)	
Related to COVID-19					283	N/A (new category)	

EFFECTIVENESS OUTCOMES – Effectiveness outcomes are: a. Did the caller indicate / feel the call to the Crisis Line was helpful (caller reported); b. Was the caller given the opportunity (able) to explore options (as assessed by the 1st Responder); and c. Provided community resources (worker reported). This year a total of 2758 calls were answered. Of these, 228 were not measured (excluded) because they were considered bogus, prank, silent, hang-ups, wrong number, telemarketer, line transfer, or missed calls. The remaining 2530 were measured for effectiveness in each of the three identified categories.

Objective: Effectiveness Measures	Indicator	Who Applied to	Target Goal Expectancy	Actual Result	Met or Exceeded
1. Call effectiveness (was the call helpful) Total Answered Calls 2758 Minus Excluded Calls 228 Total Measured Calls 2530	Percentage of callers who stated or implied the call was helpful as recorded on the iCarol database system <i>NB: this statistic is also used as a Program Satisfaction measure.</i>	All callers who indicated that the call was helpful (1761 of 2530 calls)	85%	72% (1761 of 2530 calls)	X
2. Callers who were given the opportunity (able) to explore options. Measured calls 1669	Percentage of callers who were able to explore options.	All measured callers (1669 of 2530 calls)	85%	69% (1669 of 2530 calls)	X
3. Callers who were provided community resource(s) Measured calls 1786	Percentage of callers for whom worker confirms that at least ONE community resource was provided.	All measured callers (1786 of 2530 calls)	85%	73.97% (1786 of 2530 calls)	X
<p>Findings: This fiscal year, we did not meet caller effectiveness standards. This could partially be due to the fact that CLR's may not be completing effectiveness measures thoroughly. We work hard to try to meet the standards that we provided the caller with opportunity to explore options and provided callers with community resources. Not all calls are requests for resources and some calls do not go past the Acceptance and Definition of callers concerns which results in challenges assessing effectiveness. We received a total of 1 complaint call this year.</p>		<p>Recommendations: Continue to monitor effectiveness in all calls possible. Staff will ensure volunteers are calculating effectiveness in all calls possible.</p>			



PROGRAM EFFICIENCIES: The efficiencies measured by Crisis Line staff included service utilization rates and number of volunteer hours logged on the Crisis Line. These measures are retrieved from the iCarol database system. Target goals were established to ensure minimum averages are maintained over the term of the fiscal year. Efficiency results have been tabulated below.

Objective: Efficiency Measures	Indicator	Who Applied to	Target Goal Expectancy	Actual Result	Met or Exceeded
1. To increase service utilization rates	Call Rates =(2758)/(30.42*12)	All Callers	8 calls per day	7.55 calls/day	X
2. To increase the number of hours volunteers log on the Crisis Line	Volunteer Hours 52 weeks = 3.47	All CL Volunteers 681 hours on line	25 hrs. per week	13.09 hrs./ week	X
Efficiency Findings: We increased our calls answered from 6.71 to 7.55 calls/day. We have increased volunteer hours on the line significantly from 180.75 to 681. We have also increased our weekly call answer rate from 3.47 to 13.09.			Recommendations: Continue to build our volunteer base, in order to have sufficient line coverage so goals may be met.		

PROGRAM SATISFACTION

Objective: Caller and Stakeholder Input	Indicator	Who Applied to	Target Expectancy	Actual Result	Met or Exceeded
1. To maintain caller satisfaction levels	Percentage of callers who stated or implied they were satisfied with the Crisis Line support provided by indicating the call was helpful to them	All callers who indicated they were satisfied with the service because the call was helpful to them 1761 of 2530 calls	85%	72% (1761 of 2530 calls)	x
2. To maintain stakeholder satisfaction levels	% of stakeholders who report the service meets their expectations	All stakeholders: 16 surveys sent out with 16 responses.	85%	100% (16 of 16)	✓
Findings: We continue to make contact with our stakeholders in order for the necessary feedback to be gathered.		Recommendations: We continue to monitor caller satisfaction by ensuring outcome measures are filled out in call reports on iCarol.			



ADMINISTRATIVE OBJECTIVES:

Objective: Key Administrative Tasks	Indicator	Who Applied to	Target Expectancy	Actual Result	Met or Exceeded
1. Increase Crisis Line Responder Training options (to promote enhanced training results)	Three Crisis Line Responder trainings will be held annually involving 32 hour in-class group trainings and observation shifts.	CL Responders	100%	100% Three in-class and one online Crisis Line Responder trainings were held and attended.	✓
2. Increase CL staff professional development options.	A minimum of two professional development opportunities offered during the course of the year	CL Staff Members	100%	100% Between two staff members, three professional development opportunities were engaged.	✓
Findings: Professional development included ASIST and safeTALK instructor training.			Recommendations: To continue to focus on professional development for staff and training Crisis Line responders.		

Data Confirmed by: Natalie Hake, Director of Public Education and Crisis Services
Report Reviewed and approved by: Carey Fraser, Executive Director

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