

Resources in Behavioral Health Crisis Services

Overviews of Crisis Services

Expanding Behavioral Health Community-Based Crisis Response Systems: A Webinar Series

<http://wciconferences.com/2014-CRSwebinars/index.html>

Author: Substance Abuse and Mental Health Services Administration, 2014.

This is a series of six webinars on how to expand community-based crisis response services and systems. These webinars describe new and emerging crisis response practices across a continuum of need that includes pre-crisis planning, early intervention, crisis stabilization, and post-crisis support. In addition, the webinars explore the outcomes sought for different approaches and how these approaches are financed, and provides state and local examples.

Crisis Services: Effectiveness, Cost-Effectiveness, and Funding Strategies

<http://store.samhsa.gov/shin/content/SMA14-4848/SMA14-4848.pdf>

Author: Substance Abuse and Mental Health Services Administration, 2014.

This report summarizes the current evidence base on the clinical effectiveness and cost-effectiveness of different types of crisis services. Case studies show different approaches being used by states to coordinate, consolidate, and blend funding sources to improve crisis services.

Practice Guidelines: Core Elements in Responding to Mental Health Crises

<http://store.samhsa.gov/shin/content/SMA09-4427/SMA09-4427.pdf>

Author: Substance Abuse and Mental Health Services Administration, 2009.

The goal of these guidelines is to improve services for people with serious mental illness or emotional disorders who are in mental health crises. The guidelines define values, principles, and infrastructure to support appropriate responses to mental health crises for organizations ranging from hospitals and mental health clinics to schools and foster care. They can be used to help evaluate existing protocols or establish new ones.

Treatment of Psychiatric Patients in Emergency Settings

<http://www.cnsspectrums.com/asp/articleDetail.aspx?articleid=2675>

Author: Scott L. Zeller (2010). *Primary Psychiatry*, 17(6), 35–41.

This article gives an overview of different emergency care settings and models for treating patients with mental health problems, including suicidal ideation, as well as the types of interventions used. It covers three basic models: psychiatric consultant in a medical emergency department (ED), separate section of a medical ED for mental health patients with specially trained staff, and stand-alone psychiatric emergency service in a hospital or the community.

SPARK Talk: Person-Centered Care in Suicide Prevention

<http://sparktalks.sprc.org/>

Author: Suicide Prevention Resource Center, 2014.

John Draper, director of the National Suicide Prevention Lifeline, explains the importance of person-centered care, enumerates the challenges in implementing it, and explains how these challenges can be overcome. A person-centered care approach strives to provide people with

choices about when, where, and how they want to receive crisis services and other behavioral health and health services.

Crisis Lines (phone, text, chat)

National Suicide Prevention Lifeline

<http://www.suicidepreventionlifeline.org/>

1-800-273-TALK (8255), TTY: 1-800-799-4889, Spanish: 1-888-628-9454, [online chat](#)

This free and confidential national crisis line is for anyone who needs emotional support, and is available by phone 24 hours a day, 7 days a week and via online chat from 2 p.m. to 2 a.m. The Lifeline's website contains information on suicide prevention, instructions on how to get help if someone is suicidal, and a tool to find local crisis centers.

Veterans Crisis Line

<http://www.veteranscrisisline.net/>

1-800-273-8255 and press 1, TTY: 1-800-799-4889, Text: 838255, [online chat](#)

The Veterans Crisis Line connects veterans in crisis, and their families and friends, with trained Department of Veterans Affairs responders through a toll-free phone hotline, online chat, or text messaging service for confidential support 24 hours a day, 7 days a week. The website contains information on suicide prevention and a tool to find local resources.

Crisis Text Line

<http://www.crisistextline.org/>

Text "CTL" or "LISTEN" to 741-741

The Crisis Text Line provides free emotional support and information to teens in any type of crisis, including feeling suicidal. Trained specialists are available 24 hours a day, 7 days a week.

Trevor Project

<http://www.thetrevorproject.org/>

Trevor LifeLine: 24-hour toll-free suicide hotline at 1-866-488-7386

TrevorChat: online crisis chat six hours a day at www.thetrevorproject.org/chat

TrevorText: Fridays late afternoon to early evening. Text "Trevor" to 202-304-1200.

The Trevor Project provides crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth ages 13–24. Its website has information about the signs of suicide and a way to connect online with other LGBTQ youth.

Trans Lifeline

<http://www.translifeline.org/>

1-877-565-8860

Trans Lifeline is a hotline primarily for transgender people experiencing a crisis. This includes people who may be struggling with their gender identity and are not sure that they are transgender. While the goal of the hotline is to prevent self-harm, calls are welcome from any transgender person in need. This line is staffed by trained volunteers who are transgender.

Establishing Standards for the Assessment of Suicide Risk among Callers to the National Suicide Prevention Lifeline

<http://www.suicidepreventionlifeline.org/media/5370/Joiner-et-al-2007.pdf>

Authors: Joiner, T., Kalafat, J., Draper, J., Stokes, H., Knudson, M., Berman, A., & McKeon, R. (2007). *Suicide and Life-Threatening Behavior*, 37, 353-365.

This article describes the need for the Lifeline's Risk Assessment Standards and the process that produced them, reviews how the standards can be weighted in relation to one another to effectively guide crisis hotline workers, and discusses the implementation process undertaken by the Lifeline.

Helping Callers to the National Suicide Prevention Lifeline Who Are at Imminent Risk of Suicide: The Importance of Active Engagement, Active Rescue, and Collaboration between Crisis and Emergency Services

<http://onlinelibrary.wiley.com/doi/10.1111/sltb.12128/pdf>

Authors: Draper, J., Murphy, G., Vega, E., Covington, D. W., & McKeon, R. (2014). *Suicide and Life-Threatening Behavior*. doi: 10.1111/sltb.12128.

The Lifeline's "Policy for Helping Callers at Imminent Risk of Suicide" was developed to provide a uniform policy and approach that could be applied across crisis center settings. This article includes the policy itself; a sample of the research and rationale underlying development of the policy; and information on policy implementation, the challenges and successes, and implications for interventions to help Lifeline callers at imminent risk of suicide.

Mobile Crisis Intervention Teams (CITs)

NAMI CIT Resource Center

<http://www.nami.org/Template.cfm?Section=CIT&Template=/ContentManagement/ContentDisplay.cfm&ContentID=149520>

This resource center offers information about implementing programs that team up law enforcement officers with mental health providers and communities to provide crisis intervention services. The NAMI CIT Resource Center also engages in national networking and partnerships to establish standards and promote innovation in the CIT movement.

University of Memphis CIT Center

<http://www.cit.memphis.edu/>

This resource center serves CIT programs across the United States by providing general information about CITs, tips on starting a CIT program, an overview of a national curriculum on CITs, policies and procedures, and a tool to locate CITs in local areas.

Crisis Intervention Team Core Elements

<http://www.nami.org/Template.cfm?Section=cit2&template=/ContentManagement/ContentDisplay.cfm&ContentID=65065>

Author: University of Memphis CIT Center, 2006.

This guide provides information on 10 core elements for a Crisis Intervention Team to be successful in assisting individuals with mental illness while maintaining community safety,

building community partnerships, and problem-solving. The elements cover developing, implementing, and sustaining CIT programs.

Improving Responses to People with Mental Illnesses: The Essential Elements of a Specialized Law Enforcement-Based Program

<http://www.nami.org/Template.cfm?Section=cit2&template=/ContentManagement/ContentDisplay.cfm&ContentID=63867>

Author: Council of State Governments Justice Center and Police Executive Research Forum, 2008.

This report explains 10 essential elements for any specialized law enforcement-based response program. These programs include both CITs and programs where law enforcement and mental health professionals work in pairs to respond to people with mental illness. The elements provide a common framework for program design, implementation, and evaluation while allowing for every jurisdiction's specific needs and resources.

Guidelines, Accreditation Programs, and Directories

Framework for Developing Institutional Protocols for the Acutely Distressed or Suicidal College Student

<http://www.jedfoundation.org/professionals/programs-and-research/framework>

Author: Jed Foundation, 2006.

This framework provides college and university communities, no matter their size, culture, or resources, with a list of issues to consider when developing the following protocols:

- Safety protocol
- Emergency contact notification protocol
- Leave of absence and re-entry protocol

Suicidal Patients in the Emergency Department: Improving Care through Partnerships with Crisis Centers

<http://www.sprc.org/training-institute/r2p-webinars/suicidal-patients-emergency-department-improving-care-through-partne>

Author: Suicide Prevention Resource Center, 2011.

This Research-to-Practice webinar describes potential new roles for crisis centers in working with emergency departments (EDs) to improve continuity of care for suicidal patients after discharge from an ED. Research, best practices, tools, and resources to improve care for suicidal patients after an ED visit are highlighted.

AAS Crisis Center Accreditation Program

<http://www.suicidology.org/training-accreditation-crisis-center-accreditation>

Author: American Association of Suicidology, 2014.

The American Association of Suicidology provides accreditation to qualifying programs that offer crisis intervention services either as their primary focus or as a principal component of their service. The program includes a manual and webinar that explain the accreditation standards and process.

AAS Crisis Worker Accreditation Program

<http://www.suicidology.org/training-accreditation/crisis-worker-certification>

Author: American Association of Suicidology, 2014.

This program provides a standardized set of understandings and opportunities to practice both basic crisis worker skills and more advanced skills. With this training and its accompanying bibliographic resources, crisis workers should be well prepared to successfully pass the AAS individual crisis worker certification exam. Workshops for groups of crisis workers are available upon request. The program includes a manual and webinar that explain the accreditation standards and process.

Directory of AAS-Certified Crisis Centers

<http://www.suicidology.org/Resources/Crisis-Centers>

Author: American Association of Suicidology, 2014.

At this website you can find Crisis Centers in each state that have been certified by the American Association of Suicidology.

Directory of Peer Run Services

<http://www.power2u.org/peer-run-crisis-services.html>

Author: National Empowerment Center, updated 2013.

This is a directory of peer-run and peer-operated alternatives to psychiatric hospitalization. Peer respites are voluntary, short-term, residential programs designed to support individuals experiencing or at risk of experiencing a mental health crisis. They are staffed and operated by peers with lived experience in the mental health system who have professional training in providing crisis support.

January 2015

You may reproduce and distribute this sheet provided you retain SPRC's copyright information and website address.

The Suicide Prevention Resource Center is supported by a grant from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) under Grant No. 5U79SM059945.

Suicide Prevention Resource Center

Web: <http://www.sprc.org> | **E-mail:** info@sprc.org | **Phone:** 877-GET-SPRC (438-7772)