# SAMHSA 988 State and Territory Grant Program COHORT 1 Quarterly Report Template

**Base grant & supplement** 

Grant information				
Award Number	Add award number			
Project Title	Add project title here			
State/Territory	Your state/territory			
Project Period	MM-DD-YY to MM-DD-YY			
Reporting period	Month, Year; Month, Year; and Month, Year			

Note- Please remove highlights before submitting – those are there to indicate where you need to input information and/or directions for submission. Please email your report to your GPO.

☐ Please check this box to confirm you've submitted the most recent quarter's SPARS data. If not, please explain:

[statement here - delete this line if you've checked the box]

#### **Base Grant**

# Required activities: Fiscal & operational analysis of implementation

Please include detailed analysis for each of the required activities – do not leave any blank. Please also ensure you cover all goals and objectives you identified in the Project Narrative of your application. Are you reaching your outcomes? If not, what adjustments are you proposing?

1. Distribute funds to selected local, regional, and/or statewide/territorial Lifeline crisis centers to maintain and expand the workforce to respond to an increase in Lifeline call volume due to 988 implementation.

[statement here - how did you distribute funds? Are you engaged with all local crisis centers in your state/territory? Any concerns re needed coverage or workforce development?]

2. Expand the ability of local, regional and/or statewide/territorial Lifeline crisis centers to respond to sudden and large spikes in call volumes following a public service announcement, disaster, or other type of traumatic event.

[statement here - if you had a spike, how did you respond? What's the current structure and setup? If you're identifying gaps in time of coverage, what's your plan to address?]

3. Ensure that selected local, regional and/or statewide/territorial Lifeline crisis centers collect and report monthly data on 988 contacts that result in emergency rescue, suicide attempts in progress, and/or mobile crisis outreach referrals.

[statement here - How are the crisis centers collecting these data? What's included? What are the results for the quarter? If you have chat and/or text data, please include in the chart below]

State/Territory Quarterly Reporting Updates (Cohort 1)	Month 1	Month 2	Month 3	Quarter Total			
Contacts and Dispositions							
Instructions: Please list the number of contacts that fall into each category below.							
Total number of contacts (phone)							
Total number of contacts (chat)							
Total number of contacts (text)							
Number of contacts that resulted in emergency rescue (phone)							
Number of contacts that resulted in emergency rescue (chat)							
Number of contacts that resulted in emergency rescue (text)							
Number of contacts that included suicide attempts in progress (phone)							
Number of contacts that included suicide attempts in progress (chat)							
Number of contacts that included suicide attempts in progress (text)							
Number of contacts that resulted in mobile crisis outreach referrals (phone)							
Number of contacts that resulted in mobile crisis outreach referrals (chat)							
Number of contacts that resulted in mobile crisis outreach referrals (text)							
Individuals Served by Age							
Instructions: Please list the number of unique individuals contacted that fall into							
each category below.							
0-12							
13-17							
18-25							
26-29							
30-39							
40-49							
50-59							
60-65							
66 and older							
Individuals Served by Military Status							
Instructions: Please list the number of unique individuals contacted that							
Ever been in the United States Armed Forces?							
Never been in the United States Armed Forces							
Information Missing or Unknown							
If yes to "Ever been in the United States Armed Forces?"							
Instructions: Please list the number of unique individuals contacted that							

In a Reserve component  Now separated or retired from the military  Individuals Served by Ethnicity Instructions; Please list the number of unique individuals contacted that identify their ethnicity as  Hispanic, Latino, or Spanish origin or descent Not Hispanic, Latino, or Spanish origin or descent Information Missing or Unknown Individuals Served by Race Instructions; Please list the number of unique individuals contacted that identify their race as(Mixed race individuals should be captured by selecting all categories that apply.)  American Indian or Alaska Native, including North American, Central American, and South American Indian or Alaska Native, including North American, Central American, and South American Indians Asian, including Asian Indian, Chinese, Filipino, Japanese, Korean, and Vietnamese  Black or African American Native Hawaiian or Other Pacific Islander, including Guamanian, Chamorro, and Samoan White Other Information Missing or Unknown Individuals Served by Gender Instructions: Please list the number of unique individuals contacted that identify their gender as  Male Female Transgender Uses a different term Information Missing or Unknown Individuals Served by Sexual Orientation Instructions: Please list the number of unique individuals contacted that identify their sexual orientation as Heterosexual, that is straight Gay or Lesbian Bisexual Uses a Different Term Not sure about sexual orientation is asking Information Missing or Unknown Not sure about sexual orientation is asking Information Missing or Unknown	<b>Currently</b> on <b>active</b> duty in the United States Armed Forces						
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Information Missing or Unknown	Caller/chatter/texter doesn't know what this question is asking						
	Information Missing or Unknown						

4. Facilitate timely and ongoing communication meetings with Lifeline crisis centers responding on behalf of the state or territory

[statement here – are all centers participating or only some? What's the frequency of meetings? How are centers communicating data outcomes to you?]

5. Collaborate throughout the grant with the Lifeline administrator or representative on crisis center processes and response rates to align Lifeline network key performance indicators with individual center outcomes.

[statement here - note that you will be assigned a representative]

6. Please outline any ongoing data discrepancies between center data and Vibrant data or any other challenges in this area.

[statement here]

7. Ensure veterans, service members, or their families attempting to connect to or request Department of Veteran Affairs services are appropriately linked to the Veterans Crisis Line.

[statement here - these are for those who don't choose option 1. What's your policy around how they get connected?]

8. Ensure crisis workforce receives training on working with populations at higher risk of suicide in their communities, including awareness of referral options for high risk population-specific services.

[statement here – Are you as the state/territory doing training around higher risk populations? What are the high risk population(s) in your state/territory? Note that Vibrant is working on additional trainings for high risk populations and will be rolling these out in FY2023]

# Allowable Activities: Fiscal & operational analysis of implementation

Please include detailed analysis for each of the allowable activities only if they apply to you. If not, please remove this section.

1. Provide contracts or subawards to state or territory Lifeline crisis centers for the workforce needed to provide local, regional, tribal, and/or statewide/territorial covered chat and/or text Lifeline services.

[statement here - What's the status of your contracts/subawards? Please provide any updates re chat/text.]

2. Conduct root causes analyses on identified critical incidents (i.e., deaths by suicide) where the last contact was provided by a state or territory Lifeline crisis center, if identified within 7 days after contact or as defined by the state or territory.

[statement here - What's your definition of critical indecent? Define your review capacities and how can you tie back to the Lifeline crisis center? What improvements are you making based on the review?]

# Required activities: Fiscal & operational analysis of implementation

Please include detailed analysis for each of the allowable activities only if they apply to you. If not, please remove this section. If they do apply, are you reaching your outcomes? If not, what adjustments are you proposing?

1. Enhance 988 and 911 coordination in collaboration with the state or territory's 911 administrator. This may include developing MOU/MOAs between 988 Lifeline crisis centers and PSAPs, or other state and local emergency service entities.

[statement here]

2. In conjunction with state/territory 988 crisis centers, develop and implement state- or territory- wide policies and practices for follow-up of individuals needing emergent and urgent behavioral healthcare services.

[statement here]

3. Improve state/territory infrastructure and workforce to prepare for 988 Lifeline chat and text services initiated within the state or territory and in-state backup for calls, chats, and texts.

[statement here]

4. Support Lifeline crisis center workforce consultation (development and expansion of human resource systems to increase the pace of recruitment and hiring).

[statement here - how are you and the center(s) working with Vibrant's 988 Lifeline Workforce Management Team?]

5. Develop and enact communications and marketing of the 988 Lifeline in conjunction with SAMHSA and HHS's communications and marketing strategy.

[statement here]

6. Develop partnerships across the state/territory to create streamlined access to mobile crisis and crisis response teams for all 988 crisis centers.

[statement here]

7. Develop partnerships and data collection mechanisms across the state/territory and Tribes to track and trend referral outcomes to ensure individuals have connected to post-contact care as desired.

[statement here]

# Allowable Activities: Fiscal & operational analysis of implementation

Please include detailed analysis for each of the allowable activities only if they apply to you. If not, please remove this section. If they do apply, are you reaching your outcomes? If not, what adjustments are you proposing?

1. Enhance evaluation of follow-up services, including outreach for those identified at imminent risk of suicide and referred to emergency intervention (911/police/crisis intervention team referral, mobile crisis outreach, etc.).

[statement here]

2. Develop state/territory capacity to answer calls in languages appropriate for your state population (e.g., Spanish, Chinese, Arabic, Navajo, Samoan).

[statement here]

3. Conduct root cause analyses on identified critical incidents (i.e., deaths by suicide) where the last contact was provided by a state or

territory Lifeline crisis center, if identified within 7 days after contact or as defined by the state or territory.

[statement here. If you define last contact in any way other than 7 days, please include that definition.]

4. Develop and enhance technical systems and solutions to better support individuals throughout the crisis care continuum, including modifications to EHR/EMR/online documentation management systems to ensure continuity of care and referral.

[statement here]