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## **Guidance for Supporting Familiar Individuals**

Familiar individuals can evoke many reactions from crisis center staff who are supporting them. Some may become exhausted or frustrated by repeated contacts or feel helpless because it appears to them that they aren't making a measurable difference in helping the individual. Some may value the very real relationship which includes being part of someone's daily support network or feel comforted by seeing a familiar name, phone number, or hearing the voice of someone they enjoy talking with. Striking the balance between empathy, maintaining healthy boundaries, and setting appropriate limits is an ongoing challenge for crisis counselors and crisis center supervisors. The goal is to always listen and acknowledge the individual's concerns, conduct an assessment, and determine an appropriate intervention, including when to end the conversation.

## Basic guiding tips and script examples for responding to familiar individuals:

- Identifying familiar individuals: Crisis counselors may identify a familiar individual by name, the sound of their voice, their phone number or IP address, and the content of their conversation. Centers may decide to circulate a brief description of a familiar individual to the team in order to prepare consistent language and approach. This information may be tracked in the contact center database, CRM, or EHR as appropriate. It may prove to be necessary for a designated person to keep the familiar individual information updated and distributed to all crisis counselors.
- Opening conversations: The crisis counselor should always start by being open and welcoming to the person in need while acknowledging that they genuinely need help with what they are struggling with that day.
- Remember we want familiar individuals to reach out. A person's contact pattern may
  change depending on what is going on in their life. Some may reach out daily, while others
  may check in more infrequently. Remember that we want them to contact 988 when they are
  struggling and that the 988 Lifeline is just as important to someone who reaches out daily as it
  is to someone who only makes contact one time.
  - Advocate and assist. To assist in connecting familiar individuals to an ongoing
    provider, consider offering to contact the provider together in order to assist them in
    obtaining an appointment or accessing services. They may have encountered barriers
    and/or frustrations in the past when they were given a list of referrals to call on their
    own. ("I know it can be difficult and frustrating to connect to services when you are
    already feeling overwhelmed. Would you like to try contacting some of them



together?"). If a familiar individual is open to using the phone, identify appropriate providers and make a few calls with the individual to those offices to ask about services or obtain an appointment. Be mindful that depending on the modality that the familiar individual reached out on, they may not be willing or able to make these connections over the phone.

Planned follow-up contacts: Offering planned follow-up contacts may support a
familiar individual's ability to identify additional coping skills or supports, in between
episodes of outreach to the 988 Lifeline. Follow-ups may also provide a unique
opportunity for a center to explore if an individual is connected with resources or if they
need further support in this area. Crisis counselors should be trained in providing
appropriate support to familiar individuals and consult with a supervisor if unsure
whether or not offering follow-up to a familiar individual would be beneficial.

## Supporting familiar individuals by offering care coordination:

- Encourage engagement with treatment providers. If it is known the individual is engaged in treatment, refer back to that provider after assessing current safety and providing crisis support around what brought them to contact the 988 Lifeline.
  - This sounds like something you have been struggling with a lot today/on a daily basis and could be a good thing for you to also talk about with your therapist. It might help to make a note for yourself to bring it up at your next appointment so that you can discuss some strategies or skills you could use when this comes up for you. Does that sound like something that you would consider or could be helpful?"
- Facilitate connection to current providers. Explore connecting a familiar individual to their
  provider to facilitate that conversation and inform the practitioner of the individual's frequent
  contacts to the 988 Lifeline. Every effort should be made to obtain verbal or written consent
  and collaborate with the individual in this process, as well as to document consent and any
  interaction with the provider. Crisis counselors are uniquely placed to help individuals
  advocate for their needs with their ongoing mental health providers.
  - Would you like us to help you contact your therapist to let them know that you are struggling right now and see if we can obtain a sooner appointment?"
- Consider discussing a familiar individual plan with current providers. Depending on how your center categorizes itself and is staffed, HIPAA does allow an exception to communicate with other mental health providers for care coordination which can help centers and providers to align helping strategies for the individual. "HIPAA permits health care providers to disclose to other health providers any protected health information (PHI) contained in the medical record about an individual for treatment, case management, and coordination of care and, with few exceptions, treats mental health information the same as other health information. HIPAA generally does not limit disclosures of PHI between health care providers for treatment, case management, and care coordination, except that covered entities must obtain individuals' authorization to disclose separately maintained psychotherapy session notes for such purposes." (<a href="https://bit.ly/2MrqEk9">https://bit.ly/2MrqEk9</a>). Steps should always be taken to check state law or professional practice standards which may place additional limitations on disclosures of PHI related to mental health.



• Would you be open to allowing us to speak with your current therapist to discuss your current stressors and collaborate on a plan to support you?

Supporting an Individual who is contacting the 988 Lifeline repeatedly in a short time period or engaging in multiple chat/text conversations at the same time:

- Acknowledge you are familiar with the individual.
  - I hear that today has been very difficult for you, we talked about your plan to (coping skills/distraction/support) after your last call. Were you able to try what you had planned?" or "I think we may have spoken earlier today. How have you been since we last talked?
- Crisis response plan: If the individual is not struggling with suicide, collaborate to develop a crisis response plan. This can include concrete steps the individual can take before contacting the Lifeline with a specified length of time to work through the plan before reaching out, such as 30 minutes of engagement in distraction/coping skills or contacting another support person first. Collaborate on the plan with the individual, provide it to crisis counselors, and coach them to ask the individual if they have been able to work through their plan, while providing support and helping to address any barriers. If not, let the individual know they can reach back out to the Lifeline if they are still struggling once they have worked through their plan for the time agreed upon.
- Remember to ask ALL individuals about suicide on every contact made to the Lifeline.
  Remember that even when an individual is familiar to you/your center and may not have
  disclosed suicidal thoughts to you in the past or on a specific day, this doesn't mean they are
  not thinking of suicide.
  - This is a really tough day/situation for you. Sometimes people who are struggling with strong and difficult feelings begin to think about suicide. Have you had any thoughts like that since we last talked?
  - I hear that you are really struggling today. Have you taken any action to harm yourself today?
- Remind the individual of the purpose of the Lifeline and clearly list options.
   Discuss any options available such as coordinating care with their current provider, mobile outreach services, follow-up programs, or walk-in crisis services.
  - I'm glad you reached back out. We are here to listen and to support you. I want to make sure that I understand what you need most right now so that we can help find the best tools and referrals or resources to help you while you are going through this.

## Balancing the needs of the familiar individual with the capacity of the center:

- **Ending contacts:** Once it is determined that no further assistance is required, explain you will end the contact and instruct the individual to reach back out if something changes and further help is needed.
  - Since we reviewed all the options the Lifeline can offer and you are not in need of emergency assistance right now, I will be ending this conversation. Remember you can contact us again if your situation becomes more difficult and you need further help."



- Requests for specific crisis counselors: If an individual requests a certain worker, it is
  advised not to transfer to a specific crisis counselor and inform them that all crisis counselors
  are trained to assist all individuals. Transferring to preferred workers may reinforce frequent
  contact patterns, in addition to impacting general operational productivity.
  - I'm available and here to support you at this time. Would you like to tell me what's going on for you?
- Setting limits: Center supervisors can elect to establish specific limits with familiar individuals such as: limiting length and/or frequency of calls/chats/texts, certain topics of discussion, or purpose of the contact (ex: problem solving around one immediate issue, or one time limited contact per shift). Limits should be created to benefit the individual in need and not just for the needs of the crisis center. Whenever possible, limits should be developed in collaboration with the familiar individual. Once limits are set, it is critical they be communicated to and adhered to consistently by all staff. At times, familiar individuals may increase contacts when limits are initially put into place, or to seek counselors who do not know/follow the limits. If these limits are not effective in helping the individual to adjust their calling pattern to one that the center has capacity to manage, please reach out to the 988 Lifeline. For phone call support, please reach out to askstp@vibrant.org. For chat or text related needs, please email <a href="https://licen.com/licen.c
- Communicating notice of limits: If a phone number is accessible, a supervisor may consider calling a familiar individual to address the pattern directly. Alternatively, the supervisor could also accept the next incoming interaction from the familiar individual themselves. The supervisor should advise the individual directly of any limits being set and the reason they are being put into place. They should also check in with the individual about what has or has not been helpful about their contact with the 988 Lifeline and work to address any challenges with crisis counselors. Where possible, engage in further collaborative problem solving and create a crisis response and/or safety plan with the familiar individual for future contacts with the 988 Lifeline that they feel would assist them most effectively. All familiar individual plans should be regularly evaluated and updated as needed. For additional information on developing familiar individual plans, as well as examples of what these plans may look like in practice, please see the Guidance on Developing Familiar Individual Plans, located within the NRC. Please note that the 988 Lifeline does not allow centers to block contact by phone, chat, or text.