

Frequent Questions About Crisis Services

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Q1: What is a crisis?

A1: A person is in crisis if they find they lack the skills or are unable to cope with a situation or event that is impacting them. A crisis can look different for different people, however may include struggling with suicidal thoughts, substance abuse, anxiety, psychosis, or social issues.

Q2: What are crisis services?

A2: Crisis services can be any number of behavioral health services that can assist a person when they are experiencing a crisis. In Arizona, the most commonly used and easy to access services are Crisis Hotlines, Crisis Mobile Teams, and Crisis Stabilization Centers. Each of these service providers have trained Crisis response experts on staff who work to stabilize anyone in crisis as quickly as possible. While crisis experts can attempt to engage a person who is reluctant, services are voluntary and most effective for individuals who are willing to receive them.

Q3: Who is eligible for crisis services and what is the cost?

A3: Crisis Services are available to everyone in Arizona, regardless of health insurance coverage or AHCCCS eligibility. There is no cost to anyone who uses crisis services regardless of insurance coverage, services for crisis are covered under state, federal and grant funding with no copayment. If you need additional services after the initial crisis episode, this may result in copayments or additional charges depending on your insurance coverage and follow up needs.

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Q4: Who provides crisis services?

- A4: Crisis experts are individuals trained to respond in a supportive and nonjudgmental way to individuals in crisis situations. This could include, but is not limited to, the following:
 - Peer supports: individuals who have lived experience within the behavioral health system,
 - Trained volunteers, and
 - Clinicians: behavioral health professionals at various levels of licensure and education.

While some law enforcement agencies receive specialized training to better serve individuals in crisis, crisis services are not provided by law enforcement.

Q5: What are crisis hotlines?

A5: A crisis hotline is a telephone line staffed by crisis experts who can help someone during a crisis and connect them to community resources. All phone calls are confidential and anonymous, however a crisis expert may ask you to share basic information such as your name, birthdate, call back number, or your location in order to send additional help if you ask for it. What information you choose to share is optional and entirely up to you. The crisis hotlines are open every day of the year, 24-hours a day. There are many hotlines in Arizona. Some are for specific populations like veterans, teens, or American Indians. Find all hotlines on the AHCCCS Crisis web page.

Q6: What's the difference between calling a crisis hotline and 911?

A6: When you call 911, dispatchers send fire, police, or EMT responders. Crisis hotlines are staffed with crisis experts who can talk to you over the phone to help you resolve a crisis and connect you with community resources for continued support.

Q7: When should I call a crisis hotline?

A7: Call a crisis hotline when you or someone you love is having suicidal thoughts, struggling with anxiety, psychosis, substance use or social issues, or simply cannot cope with their immediate situation. If you are experiencing a life threatening medical emergency or dangerous situation, call 911.

Q8: What crisis hotline should I call?

A8: The easiest number to remember is 988. You can also call a crisis provider in your local area. That way, you'll speak to someone familiar with resources and applicable laws in your community, and you'll get the most effective support possible. In Arizona, crisis lines are operated locally by the Regional Behavioral Health Authorities (RBHAs) based on geographical region. You can call the single statewide Arizona crisis line from anywhere in Arizona by dialing 1-844-534-4673 (HOPE) to connect with a crisis expert in your area, or you can call one of the RBHA operated local lines in your region below:

Northern Arizona: 1-877-756-4090 (Coconino, Navajo, Mohave, Yavapai)

Central Arizona: 1-800-631-1314 (Maricopa, Gila, Pinal)

Southern Arizona: 1-866-495-6735 (Apache, Cochise, Graham, Greenlee, La Paz, Pima, Santa

Cruz, Yuma)

For a complete listing of all hotlines visit the AHCCCS Crisis web page.

Q9: Can I call on someone else's behalf?

A9: Yes, if you are concerned about someone who appears to be in crisis you can call a crisis line for guidance and support from a crisis expert who may offer resources and coaching for how you can

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best help the person experiencing the crisis. Keep in mind that while crisis experts are trained to provide support they cannot provide intervention or services to a person who is not willing to receive them.

Q10: What will happen when I call?

A10: When you call, the crisis expert who answers will listen to you, help you stay safe, provide support, find community resources, and help you determine what to do next. If you need more help, the crisis expert might offer to send a mobile team to come to meet you wherever you are. If you are looking for someone to talk to or additional resources, you may be connected to someone like you who has had a similar experience.

Q11: What are mobile crisis teams and how can they help?

All: Crisis mobile teams are crisis experts who travel to a person to help them during a crisis. They provide support, find community resources, and help with planning next steps to keep a person safe. They may also offer to arrange transportation to a facility like a crisis stabilization center.

Q12: How do I contact a mobile crisis team?

A12: If you feel you need a crisis mobile team, call your local crisis hotline. Find all hotlines on the AHCCCS Crisis web page.

Q13: What should I expect when a mobile crisis team is sent to me?

A13: One or two crisis experts will meet with you in your current location to assess safety, provide support, and help you resolve the immediate crisis. The goal of a Crisis Mobile Team is to work with you to identify your next steps to stay safe. While crisis mobile teams often provide transportation to a crisis stabilization center if needed, every situation is different and there may be times when it is safer or more appropriate for the person in crisis to be transported by law enforcement or a parent or guardian. Depending on where you are, response times may vary based on availability of mobile teams.

Q14: What are crisis stabilization centers?

A14: Crisis Stabilization Centers are safe places where a person in crisis may choose to go. Once there, you might see a clinician and be ready to go home in a short time, or you might choose to stay for up to 24 hours, until other services can be started or the immediate risk is over. These centers have reclining chairs instead of beds as they are intended to be a short term stop while you and your crisis team agree on your next steps.

Q15: What can I expect at a crisis stabilization center?

A15: You can expect to see a professional who will interview and examine you to determine how to help you. Together with a team of experts, you will create a short-term treatment plan. The team will walk you through the process and explain your treatment options. Your treatment plan might include contacting your current doctors, your family members, and anyone else who is important to you. They might recommend new doctors or services. This plan is to help you safely return to your normal daily life, and set you up with services that can help you remain stable. You might stay at the center for up to 24 hours. After that time, you might be admitted to an inpatient behavioral hospital.

Q16: How is a crisis stabilization center different from inpatient hospitalization?

A16: A crisis stabilization center is a short-term safe place for a person to go while working to resolve their crisis. These centers have more of a living room feel, where people are seated in one large

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area in recliners while working with crisis providers and receiving brief services before going home with resources, or if needed, being admitted to an inpatient hospital. An inpatient hospitalization is generally for people needing additional stabilization past the 24-hour observation period who may have more complex or ongoing needs before they can safely return home. Inpatient hospitals are also intended to be a short-term intervention, however provide more of a residential environment with private or shared rooms with beds and additional short-term services such as group therapy.

Q17: What happens after the crisis is over?

A17: Often, a person who's had a crisis will need help for a period of time to maintain their normal life. This might mean a medication adjustment or counseling appointments to help reduce the chances you will experience a similar crisis in the future. The services you receive will depend on your individual needs and your choice of what services you would like. For AHCCCS enrolled members, crisis experts can work directly with your doctors and counselors to continue your care.

Q18: Where can I go to learn more about how to support myself or someone else in crisis?

A18: Additional information on Arizona Crisis Services can be found on the AHCCCS Crisis web page. The Substance Abuse and Mental Health Services Administration (SAMHSA) website, the National Alliance on Mental Illness website, and the 988 Suicide and Crisis Lifeline website can all be helpful places to start learning more about crisis intervention services and how to recognize and navigate a crisis for yourself or a loved one.

It can be helpful to discuss and write down a safety plan that you can keep accessible to recognize the first signs of a crisis and what you can do to remain safe. You can create your own safety plan and share it with your supports by visiting www.mysafetyplan.org.

In addition to completing a safety plan, it can be useful to have your treatment preferences on things such as medications, facilities and what has worked in the past legally documented. You can also assign a trusted person who can ensure your wishes are being followed as closely as possible. In Arizona, this can be done by completing a psychiatric advance directive, which can be written at a time when you are not in crisis to help you clearly state your wishes when you may be in crisis. More information on psychiatric advance directives can be found at the National Resource Center on Psychiatric Advance Directives and the forms to complete are free and available to download online through the Office of Arizona Attorney General. Once completed the form must be signed and notarized to go into effect.

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