

ILLINOIS  
MENTAL HEALTH COLLABORATIVE  
FOR ACCESS AND CHOICE

# Illinois Warm Line

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# Illinois Warm Line

o **866.359.7953**

o Press 2 (Consumer or Family Member)

o Press 5 (The Warm Line)

o **Hours**

o Monday - Friday

o 8:00 am - 5:00 pm

o **Calls = Approximately 20 Minutes**

o **Free Service**



# Warm Line Team

## ◦ Peer & Family Support Specialists

- Carl Abbott
- Sharon Grant
- Julie Tull

## ◦ Recovery & Resilience Team Manager

- Tenda Hedges



CRSS professionals perform a unique function in the specialty of health care and human services, and can work in a variety of settings, using various approaches to provide supportive services with a wide range of consumer populations.

Warm Line staff have various educational degrees and a vast amount of experience working with mental health, substance use, co-occurring, criminal justice, and social service populations. Obtaining the CRSS credential is a requirement to work on the Warm Line.

Weekly staff supervisions and monthly team meetings are conducted to ensure professional services are provided through the Warm Line.

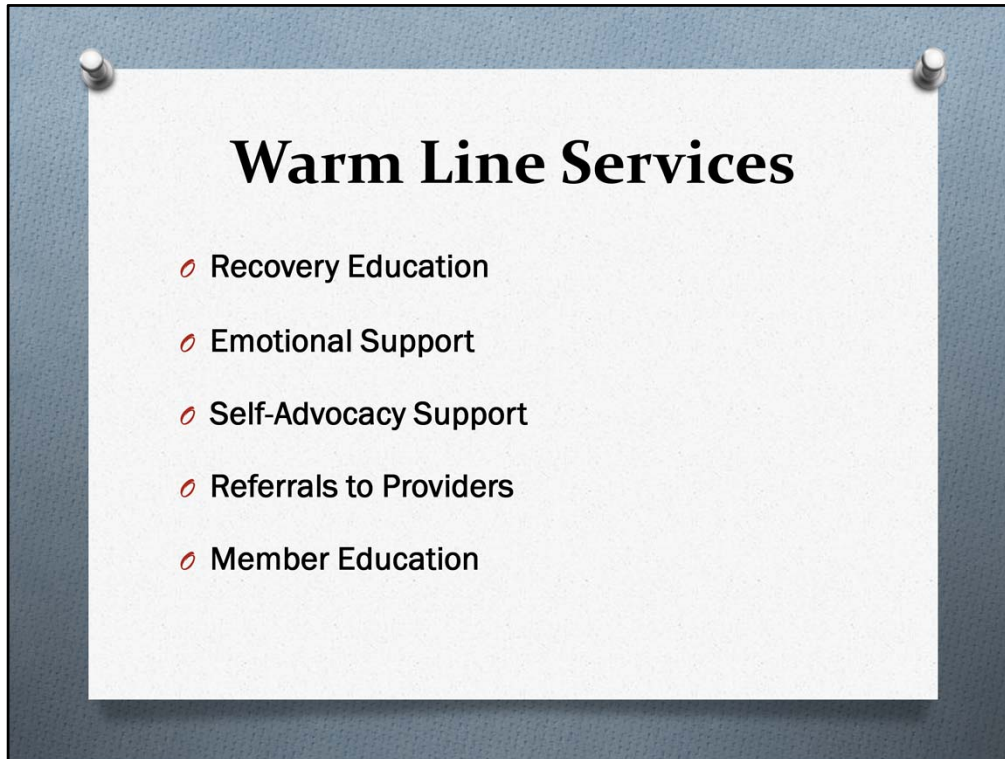
## Warm Line “Customers”

- o Individuals *receiving* mental health services
- o Individuals *needing* mental health services
- o Individuals *choosing* to do recovery without professional services
- o Family Members, Friends, Colleagues, and Co-Workers who are trying to effectively support people with mental illnesses
- o Providers

The Warm Line customer population is diverse. It includes:

- Individuals who currently receive mental health services in Illinois
- Individuals who want to be connected to services
- Individuals who have chosen to do recovery without services
- Family members of individuals who have mental health conditions
- Friends, partners, and colleagues of people with mental illnesses
- Providers who have questions about the Warm Line services
  - Or who are modeling the use of the Warm Line for individuals and introducing them to our services





The Warm Line provides five core services to callers:

- Recovery Education
- Emotional Support
- Self-Advocacy Support
- Referrals to Mental Health Providers
- Member Education

Out of the five core services, we find the greatest demand for:

- Recovery Education
- Emotional Support
- Self-Advocacy Support

More detail on those top 3 services will be covered in the following slides. First, let's briefly discuss Referrals and Member Education

When Warm Line staff provides a referral – it is a soft referral; meaning we give the caller names and phone numbers to providers in their area. We encourage callers to follow up on their own and may provide some self-advocacy support to ensure the caller effectively communicates his or her needs to the provider. We do not connect a caller directly to a provider.

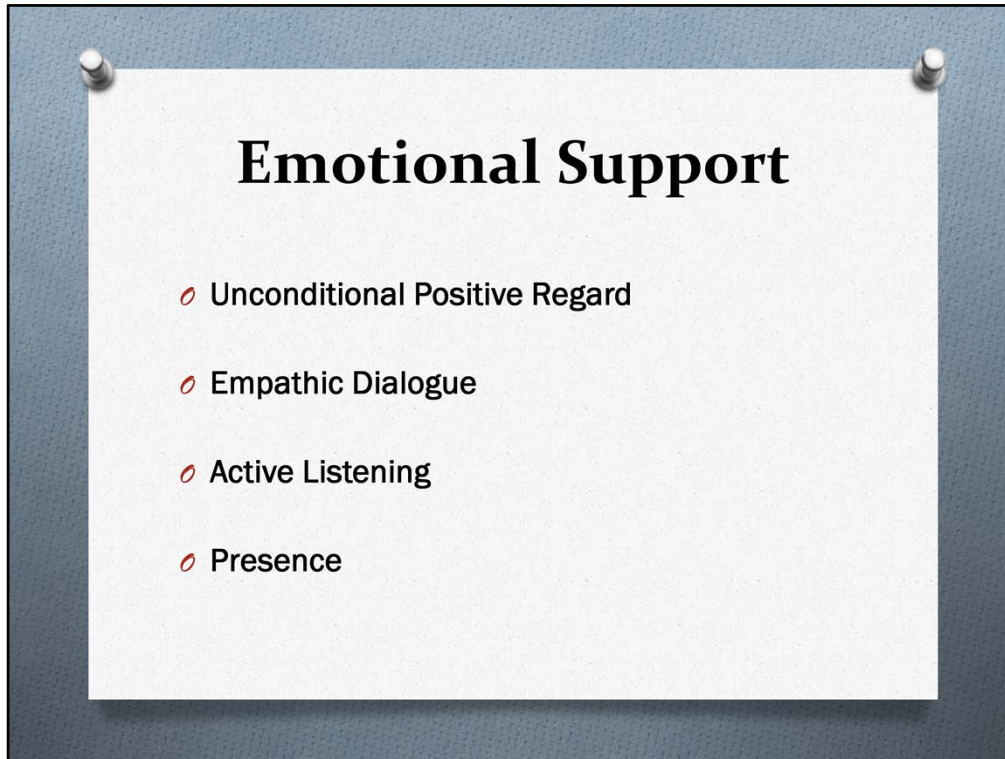
Member Education encompasses a variety of things ranging from information on the Recovery & Empowerment Handbook to the services provided by Equip for Equality, Social Security benefits, and information on specialty hotlines.

# Recovery Education

- Wellness Recovery Action Plan (WRAP)
- Stages of Change
- Fundamental Components of Recovery
- Strengths Principles
- Problem Solving Skills
- Shared Decision Making

Here are some of the more common forms of recovery education the Warm Line staff provides to callers.

- We may introduce callers to Wellness Recovery Action Planning (WRAP), help them find a WRAP class, or work on one component of WRAP – such as daily maintenance or an action plan for coping with triggers.
- We may use Motivational Interviewing techniques to help callers move through the stages of change... such as “What would it take for you to move from complete isolation to some socialization”.
- Staff may discuss one or more of the fundamental components of recovery with callers – Self-Direction, Individualized & Person-Centered, Empowerment, Holistic, Non-Linear, Strengths Based, Peer Support, Respect, Responsibility, and Hope
- We may help callers identify their strengths
- Many times callers simply need help solving problems in their daily lives. In those calls, staff will work through different problem solving techniques to help callers solve their own problems. We do not solve problems for callers.
- The concept of shared decision making can be foreign – especially to callers who have been in the mental health system for years – and are accustomed to their doctors or other professionals making decisions about their recovery for them. Warm Line staff let callers know that it is ok to share in the decision making process.



Many of the Warm Line callers just need someone to talk with. We have some callers who are isolated and lonely. In those calls, staff express unconditional positive regard, empathy, and a presence that is comforting. Of course, staff will also more than likely insert some recovery education when appropriate.

Clinicians may understand this approach in relation to Carl Roger's Person-Centered therapy or Rogerian Therapy.

While it is not our goal on the Recovery Team to provide therapy or counseling services, we do want to point out the similarities between our Emotional Support approach and Rogerian therapy to provide a bridge between the clinical and recovery fields.





Self-Advocacy support has been a beneficial service offered by the Warm Line since its inception. Staff help callers enhance their ability to effectively communicate their needs as a vital part of the recovery process. Other

Let's pause for a minute and discuss Person First Language.

- If you're not familiar with this concept, think of it as referring to people as people, instead of using labels.
- Callers will frequently identify themselves as their illness... "I am bipolar", "I am schizophrenic", etc.
- Staff will model person-first language and help callers to see themselves as HAVING an illness versus BEING the illness

## Warm Line Do's & Don'ts

Do:	Don't:
Answer Incoming Calls	Call Back Callers
Provide Recovery Support	Provide Counseling
Prepare for Dr. Appointments	Give Medical Advice
Document the Service Provided	Keep Case Files
Discuss Suicidal Ideations	Assess for Suicide Risk

How do Warm Line services differ from other professional services? Here is a list of what the Warm Line does and does not do:

- Calls coming into the Warm Line are answered immediately by the next available staff person. In the event that all Warm Line staff are on other calls, our clinical team will receive call overflow. Callers are then given the opportunity to speak to the clinician or call back for a Peer & Family Support Specialist.
- The Warm Line team provides individuals with support with their recovery process. The team is specifically trained in recovery support and not in clinical counseling
- We have received many calls over the years from individuals concerned about their health and/or medications. Staff will help callers to prepare a list of questions to ask their health professional versus providing any type of medical or pharmaceutical advice.
- All calls are documented anonymously by the service provided. We keep no case files on individuals who utilize the Warm Line.
- At times, callers have communicated suicidal thoughts. The Warm Line team is trained to ask callers some direct questions pertaining to their safety. In the event that callers are at risk to themselves or others, we have a crisis team of clinicians who perform a formal risk assessment and help connect the individual with immediate assistance. Throughout this process, the Peer & Family Support Specialist will stay on the line with the caller to provide additional support and inform the person of every step in the process.

## Warm Line Resources

- Recovery & Empowerment Handbook
  
- Certified Recovery Support Specialist (CRSS)  
Study Guide & Model
  
- Collaborative Website
  - [www.illinoismentalhealthcollaborative.com](http://www.illinoismentalhealthcollaborative.com)
  - Consumer & Family Section