NHS
England

Crisis Text Support Guidance and Specification

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We are seeking feedback on this document before formal publication.

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Introduction

We have come a long way since the inception of the NHS Long Term Plan (LTP), with mental health services undergoing an immense transformation marked by a commitment to enhancing accessibility and quality of care. A key achievement has been the introduction of age-appropriate crisis care through NHS 111. This achievement stands as a testament to our dedication to improving accessibility, although we acknowledge services are facing challenges meeting levels of demand and managing staff vacancies, meaning that further work is needed to make services truly accessible to all.

As set out in the [Urgent and Emergency Care (UEC) Recovery Plan](#) and the [Suicide Prevention Strategy,](#) the next step to improve access to crisis services is the introduction of nationally-available crisis text services integrated into already-established crisis care pathways.

Drawing inspiration from successful models implemented in other countries, such as the [Crisis Text Line](#) in the United States and the [Mental Health Helpline](#) in New Zealand, this represents a transformative step forward in making crisis care truly equitable and accessible. By harnessing the power of digital communication platforms, we should aim to bridge the gap between individuals in crisis and the support they urgently require breaking down barriers of stigma, geography, and accessibility.

Resources and implementation support

NHS England has made £7m service development funding (SDF) available in 24/25, that has been allocated to ICSs on a fair share basis. This funding is recurrent and solidifies our commitment to ensuring that *crisis text functionality is fully operational by the end of March 2025*. It provides ICSs with the necessary financial resources to establish and sustain the crisis text service, enabling more equitable access to mental health support for individuals in crisis across all of England.

ICSs must allocate adequate resources to support the successful implementation and sustainability of the crisis text service within their localities. This includes allocating funding for *staffing, training, technology infrastructure, promotion and awareness-raising activities, and ongoing service evaluation and improvement*.

Regional teams will play a key role in supporting and overseeing the implementation of the crisis text service, providing guidance, expertise, and assistance where necessary. This collaborative approach ensures that resources are utilised effectively and that the service meets the needs of local populations.

Nationally, NHS England will oversee the national rollout of the functionality, facilitating learning events and providing support systems where needed to ensure consistency and effectiveness across all regions. We have also produced a high-level national level specification (*Annex A*) to help support rapid local commissioning. The development of this specification has been driven by a commitment to ensuring that all individuals, regardless of their demographic characteristics or specific needs, have equitable access to timely and effective crisis care, with this offer consistent in all parts of England.

Governance and quality assurance considerations

ICSs will play a pivotal role in overseeing the implementation and operation of the crisis text service across their geographies and therefore it is important to establish robust *governance structures* to ensure the effective delivery of the service and adherence to quality standards.

At the local level, ICSs should:

- *Establish governance structures* to oversee the implementation and operation of the crisis text service. These structures will involve key stakeholders, including people with lived experience and grassroots organisations, to ensure comprehensive oversight and coordination as well as meeting the needs of the local population.

- *Establish Key Performance Indicators (KPIs) and quality standards* to monitor the effectiveness of the crisis text service and user satisfaction. For suggested KPIs see *Annex A*. With respect to quality standards, it will be important to ensure there are appropriately trained staff, there is a commitment to service evaluation and improvement through robust feedback mechanisms, outcome monitoring, and quality assurance processes being in place. This would include feedback and ensuring change is implemented based on service user feedback sought. The crisis text staff should have access to regular training and professional development to ensure they remain up to date with best practices and evidence base. Training includes cultural sensitivity and trauma informed practice.

- *Establish processes for handling feedback, complaints, and incidents* to ensure accountability and continuous improvement of the service. This will include mechanisms for users to provide feedback, report complaints or incidents, and seek resolution in a timely and transparent way. Escalation pathways will be defined for addressing serious incidents or safeguarding concerns, involving relevant authorities and stakeholders as necessary.

- *Analyse feedback, complaints, and incidents* to identify learning opportunities and areas for improvement. Regular review meetings should be organised to share insights, best practices and lessons learned.

By establishing robust governance structures, defining clear KPIs and quality standards, and implementing effective procedures for handling feedback and incidents, ICSs can ensure timely implementation and operation of the crisis text service, ultimately improving outcomes for individuals in crisis and enhancing the quality of mental health care delivery (see Annex B for publications on the impact of crisis text support initiatives).

Looking ahead, NHS England is intending to update the UEC Mental Health Data Quality guidance in the first quarter of 2024/25. This update will include details on how crisis text activity should be reported into the Mental Health Services Data Set (MHSDS), ensuring that robust data collection and reporting mechanisms are in place to monitor the impact and effectiveness of the crisis text service at a national level.

Evaluation and continuous improvement

NHS England recommends that all areas rigorously evaluate the introduction and functioning of crisis text support from the outset. ICSs should establish mechanisms for ongoing evaluation of the crisis text service, including user feedback, outcome monitoring, and service evaluation. This may involve obtaining feedback from service users through surveys or focus groups and monitoring KPIs. Furthermore, continuous review approaches should be implemented to address identified areas for improvement and optimise service delivery. This may involve implementing changes to service or procedures based on user feedback, providing additional training or support to staff to address development gaps, having a quality improvement (QI) process/lead and infrastructure that enables QI to be embedded into delivery or introducing new technologies or innovations to improve service efficiency and effectiveness.

By prioritising evaluation and continuous improvement, ICSs can foster a culture of learning and innovation within the crisis text service. This involves encouraging staff to reflect on their practice, identify opportunities for improvement, and actively engage in quality improvement. NHS England will collate and share these insights and best practices from across regions through learning events, enabling ICSs to learn from each other and adopt emerging best practices to enhance the delivery of crisis text support.

Annex A: High-level national service specification (to be adapted to meet local need)

Expectations for the service

The national specification for a crisis text service is defined by the comprehensive approach to supporting everyone in mental health crisis, irrespective of their background and demographics. The service aims to provide timely, accessible, and effective support including a range of interventions tailored to meet the diverse needs of service users.

i.   The crisis text service is designed to cater to individuals across all age groups, ensuring that no one is excluded from accessing support. From children and young people grappling with the challenges of adolescence to older individuals facing the complexities of aging, the service is committed to providing inclusive care to all.

ii. Recognising that crisis can occur at any time and to anyone, the crisis text service operates 24/7, 365 days a year. Streamlined and easy to navigate accessibility ensures that individuals can seek help whenever they need it, even during late-night hours or holidays when other support services may be limited.

iii. The crisis text service offers the following range of support interventions to address the diverse needs of service users (*see below*):

- *Text-based crisis intervention*
  Trained practitioners engage in real-time conversations with texters to provide immediate support and crisis intervention. These interventions may include active listening, safety planning, and de-escalation techniques tailored to the individual's needs.

- *Emotional support*
  In addition to crisis intervention, the service offers empathetic and non-judgmental emotional support to individuals in distress. Practitioners work collaboratively with texters to explore their feelings, validate their experiences, and offer comfort and reassurance.

- *Referrals to appropriate services*
  Recognising that some crisis may require additional support beyond the scope of the text service, practitioners are equipped to provide referrals to appropriate services and resources. Whether it's connecting individuals with local mental health services, urgent mental health helplines / NHS 111 'select mental health option', or community organisations, the service aims to facilitate access to ongoing support and care.

- *Safety planning and risk formulation*
  Conduct a risk assessment (by qualified mental health clinicians) to understand what the presenting risks are, which will contribute to safety planning. Often a safety plan will include carers and the wider multi-agency network, and practitioners should be skilled in identifying which other agencies in the care network need to contribute to safety planning, where appropriate. Practitioners will make reasonable adjustments in line with the Equality Act 2010.

By offering a holistic and person-centered approach to crisis support the crisis text service aims to empower individuals to navigate their mental health challenges with resilience and support. Through timely interventions, empathetic care and collaborative partnerships with local services, the service aims to ensure timely access to crisis care.

Training and support

Addressing the training requirements for crisis text service staff are key to ensure effective collaboration with other services and the delivery of high-quality support to texters. All practitioners must undergo comprehensive training that covers essential topics such as active listening, de-escalation techniques, suicide risk formulation, risk assessment and safety planning across all age ranges These skills are essential for practitioners to effectively engage with individuals in crisis, provide empathetic support, and manage potentially life-threatening situations.

Furthermore, all staff, must undergo training that addresses the diverse needs of all age groups and populations, this includes specific training on engaging with individuals with (but not limited to), ADHD, learning disabilities, dyslexia, autistic people, LGBTQ+ individuals, refugees, asylum seekers, individuals whose first language is not English, deaf and hard of hearing individuals, and racialised and/or marginalised communities. By equipping staff with the knowledge and skills to engage effectively with diverse populations, the crisis text service can ensure that all individuals receive culturally sensitive and inclusive support that meets their unique needs.

Guidelines for ongoing support and supervision of all staff are essential to prevent burnout and ensure the delivery of high-quality service. This may include regular check-ins with staff to assess their well-being, provide opportunities for debriefing and reflection, and offer additional training or support as needed. By prioritising the well-being of the crisis text staff and providing them with adequate support and supervision, the crisis text service can maintain a resilient and effective workforce dedicated to supporting individuals in crisis with compassion and professionalism. Often supervision can be provided by qualified mental health clinicians, this not only supports the well-being of the practitioner but also ensures that they are able to understand and manage risk as appropriate.

Accessibility and inclusivity

The crisis text service must ensure *accessibility and inclusivity* ensuring that individuals from all backgrounds and demographics can readily access timely crisis support. This encompasses disabled and neurodivergent people, non-speakers, and those with other language barriers, as well as careful considerations for older people and children and young people.

- *All-age accessibility* - the crisis text service is designed to be accessible to individuals of all ages, from children to older adults. The crisis text workforce is specially trained, competent, and experienced in all-age mental health, ensuring that texters receive support tailored to the developmental stage and specific needs of the users. For example, for children and young people, the service must offer age-appropriate support and safeguarding measures to ensure their safety and well-being. For older people, this may involve providing support tailored to age-related concerns, such as loneliness, bereavement, and physical health issues.

- *Culturally competent care* - cultural competence is valued and culturally sensitive care is provided to individuals from diverse backgrounds. The crisis text workforce is trained to understand and respect the cultural norms, beliefs, and values of texters, ensuring that support is delivered in a way that is respectful and affirming. Language barriers must also be addressed to ensure that individuals from diverse backgrounds can access support in their preferred language. This may involve employing multilingual staff or utilising translation services to facilitate communication with non-English speaking texters.

- *Neurodivergent and learning disability affirming care* - the needs of neurodivergent individuals must be accommodated, this includes autistic people, people with ADHD, dyslexia, or Tourette's to name a few. People with learning disabilities must also be considered. The crisis text workforce is trained to adapt their communication style, language use, and approaches to meet the needs of various neurodivergent communities ensuring that support is accessible, effective, and neurodivergent affirming. This also include providing clear and concise communication, minimising sensory overload, and affirming that the individuals neurodivergence not as a flaw that needs correction but as a distinct neurotype or brain style that is an integral part of their identity.

By prioritising accessibility and inclusivity, the crisis text service aims to reach and support individuals from all walks of life, ensuring that everyone has access to the mental health support they need, when they need it. Through these focus areas a more inclusive and supportive service is created for all individuals experiencing a mental health crisis.

Integration with NHS 111 'select mental health option' and other services

Ensuring individuals in crisis have access to a variety of options for timely support is paramount in supporting those in mental health crises effectively. With the streamlining of all age urgent mental health helplines via NHS 111 'select mental health option,' it becomes equally crucial to provide an alternative access option via text, ensuring seamless care pathways.

Integration, in this context, refers to the ability to support individuals most acutely unwell through an uninterrupted pathway of care. While the number of individuals in acute crisis may be relatively small, it is key that they receive the support they need when they need it. Practitioners within the crisis text service must be equipped to seek advice or refer individuals to urgent mental health helplines staff, particularly where face-to-face assessment may be necessary, with local protocols in place setting out operating guidelines for how this will be implemented and monitored.

For the majority of texters, accessing timely support may involve signposting to self-help resources such as the [Hub of Hope](#) or referrals to locally available crisis alternatives (for example crisis cafes, sanctuaries and safe havens), small local grassroots organisations and non-mental health places which may offer mental health support such as churches, communities centres, and disability charities. Therefore, it is essential that crisis text support staff have access to up-to-date information on services available locally, ensuring texters are directed to the most appropriate support options for their needs.

Opportunities for collaboration between services should be explored to ensure the seamless integration of care pathways. There will be clear communication channels and referral pathways between crisis text services and urgent mental health helplines to ensure that individuals in crisis receive timely and appropriate support, regardless of the access route they choose and to ensure no unnecessary delays in seeking the right support.

Confidentiality and compliance with data protection laws

The crisis text service is committed to working collaboratively with individuals to provide tailored support and ensure their safety and continuity of care. This may involve linking them up with other appropriate services based on their needs and preferences. While individuals have the option to disclose their personal information, which can facilitate more targeted support and referrals, the service will still strive to provide assistance and guidance to everyone, even if no identifiable information is available. The service operates on the principles of confidentiality, respect, and empowerment with the overarching goal of providing effective crisis intervention and support to all individuals who reach out for help.

All processes and systems should adhere to data protection regulations, such as the General Data Protection Regulation (GDPR), to safeguard the privacy and rights of individuals accessing mental health support.

Key Performance Indicators (KPIs)

The crisis text service is monitoring and continuously improving its performance to ensure the highest standards of care for individuals in crisis. Key service KPIs have been developed in alignment with the national NHS 111 'select mental health option' pathway, emphasising responsiveness, the quality of interventions and patient experience. These KPIs are designed to measure various aspects of service delivery, including response times, the effectiveness of interventions and user satisfaction. By tracking and analysing these metrics, the service can identify areas for improvement and implement targeted strategies to enhance the overall quality and effectiveness of crisis support provided through the text service.

Category	KPI*
Clinical Effectiveness - CROM	Re-access rates (number of repeat texters) within 24 / 48 / 72 hours
Access - Crisis Text Service is responsive	Text abandonment rate
	Text response wait times
Patient experience. Patient reported experience measure - PREM	Texters feel that the service was to the standard they would recommend to friends and family members

The suggested KPIs are to be monitored for a year after implementation to gather sufficient data and establish safe thresholds before setting nationally expected standards.

In addition to above the crisis text service should collect demographic information where possible as the primary contextual measure to assess whether the service is effectively meeting the needs of the local population and addressing the needs of underrepresented groups.

Annex B: various research into the efficacy of crisis text support initiatives

Cote & Mishara (2022) Effect of helping suicidal people using text messaging: An evaluation of effects and best practices of the Canadian suicide prevention Service's text helpline. Suicide Life Threat Behav 52, 1140-1148. PMID: 35946317

Gould *et al.* (2021) National Suicide Prevention Lifeline crisis chat interventions: Evaluation of chatters' perceptions of effectiveness. *Suicide Life Threat Behav.* 51, 1126-1137. PMID: 34331471

Gould *et al.* (2022) Crisis text-line interventions: Evaluation of texters' perceptions of effectiveness. *Suicide Life Threat Behav.* 52, 583–595. PMID: 35599358

Mokkenstorm *et al.* (2017) Evaluation of the 113Online Suicide Prevention Crisis Chat Service: Outcomes, Helper Behaviors and Comparison to Telephone Hotlines. *Suicide Life Threat Behav.* 47, 282-296. PMID: 27539122

Pisani *et al.* (2022) Individuals who text crisis text line: Key characteristics and opportunities for suicide prevention. *Suicide Life Threat Behav.* 52, 567–582. PMID: 35615898

Sindahl *et al.* (2019) Texting for Help: Processes and Impact of Text Counseling with Children and Youth with Suicide Ideation. *Suicide Life Threat Behav*. 49, 1412-1430. PMID: 30468267

van Dolen & Weinberg (2019) An Empirical Investigation of Factors Affecting Perceived Quality and Well-Being of Children Using an Online Child Helpline. *Int J Environ Res Public Health* 16, 2193 PMID: 31234285

Williams et al. (2021) Evaluation of Outcomes for Help Seekers Accessing a Pilot SMS-Based Crisis Intervention Service in Australia. *Crisis* 42, 32-39 PMID: 32343171