

# Frequently Asked Questions

TN IECMH  
W A R M L I N E

AIMHiTN  Allied  
BEHAVIORAL

## Q: What is the average response time once a request is submitted?

A: Our intention is to have the confirmation email received within **1 business day** and consultations can be scheduled the same day the email is received. If a request does not receive a response within 1-2 business days, please reach out to [warmlinecoordinator@alliedbehavior.com](mailto:warmlinecoordinator@alliedbehavior.com).

## Q: How is a supervisor looped in?

A: After a consultation, a professional receives a summary of what was discussed and recommendations. The Warmline Coordinators will encourage those seeking consultation to share the feedback form with Supervisors and other relevant supports. The Warmline is supplemental support and not intended to replace agency supervision or reflective supervision.

## Q: Do families have to consent for a professional to seek Warmline Consultation?

A: A family **does not need to consent** for a professional to seek consultation. The content of consultation calls will be focused on helping the professional determine how they can best support children and families when they encounter concerns or questions around mental and behavioral health. Warmline Coordinators will not have contact with families.

### **Q: Can a DHS licensing consultant request consultation?**

**A:** Warmline is intended to support Infant and Early Childhood Mental Health, If a licensing consultant requested warmline consultation regarding a licensing concern, this would be outside the scope of the TN IECMH Warmline and the Warmline Coordinator may suggest further support from CCR&R or DHS.

### **Q: How does Warmline maintain confidentiality?**

**A:** The Warmline **does not** ask for any identifying information about a family or child. Warmline Coordinators uphold confidentiality, meaning that the specifics of the conversation are not shared outside of the consultation. If there are safety concerns around child abuse or neglect or suicidality for a family, the Warmline Coordinator will support the professional in following their specific agency crisis protocol.

### **Q: Why does the request form ask about general family demographic information?**

**A:** The request form asks questions that are needed to appropriately allocate funding for the Warmline. Family demographic information is optional but will support Warmline Coordinators as they prepare for consultations.

### **Q: What about protected health information (PHI)?**

**A:** Specific information (address, phone number, name, etc) will not be requested when utilizing Warmline. Only generalized, non-identifiable information will be shared and is strictly for the purpose of professional support. No protected health information will be collected, shared, or stored.

**Q: Are centers able to use this resource in their marketing or handbook, i.e. "This center uses warmline resources to help with the mental health of our staff, families, and children"?**

**A:** Warmline consultation is intended to be a prevention-based support rather than a long-term solution for any mental health challenges. A center might include a statement similar to this in their staff handbook: "This center encourages staff to seek out Warmline Consultation for behavioral or mental health challenges in young children. To request consultation, please visit the QR link below."

**Q: How is Warmline Consultation different from Reflective Supervision?**

**A:** Reflective Supervision is **ongoing**, holds space, and supports professionals to explore how **their** personal experiences, feelings, and responses may be impacting their work with families. Warmline Consultation is **short-term** and while it may support reflective practice, the primary goal is to support professionals in their **concerns** in the mental and behavioral health of the families and children they work with.

Have additional questions? Email [warmline@aimhitn.org](mailto:warmline@aimhitn.org) for more information.