



988 Implementation and Collaborative Opportunities with 911

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What is 988?

- **Vision:** 988 serves as America's mental health safety net. We will reduce suicides and mental health crises and provide a pathway to well-being.
- **Mission:** Everyone in the US and its territories will have immediate access to effective suicide prevention, crisis services and behavioral healthcare through 988.
- **3 digit number** for familiarity and easy access

9-8-8
ANSWERING THE CALL

What do you hear when you call:



You have reached 988

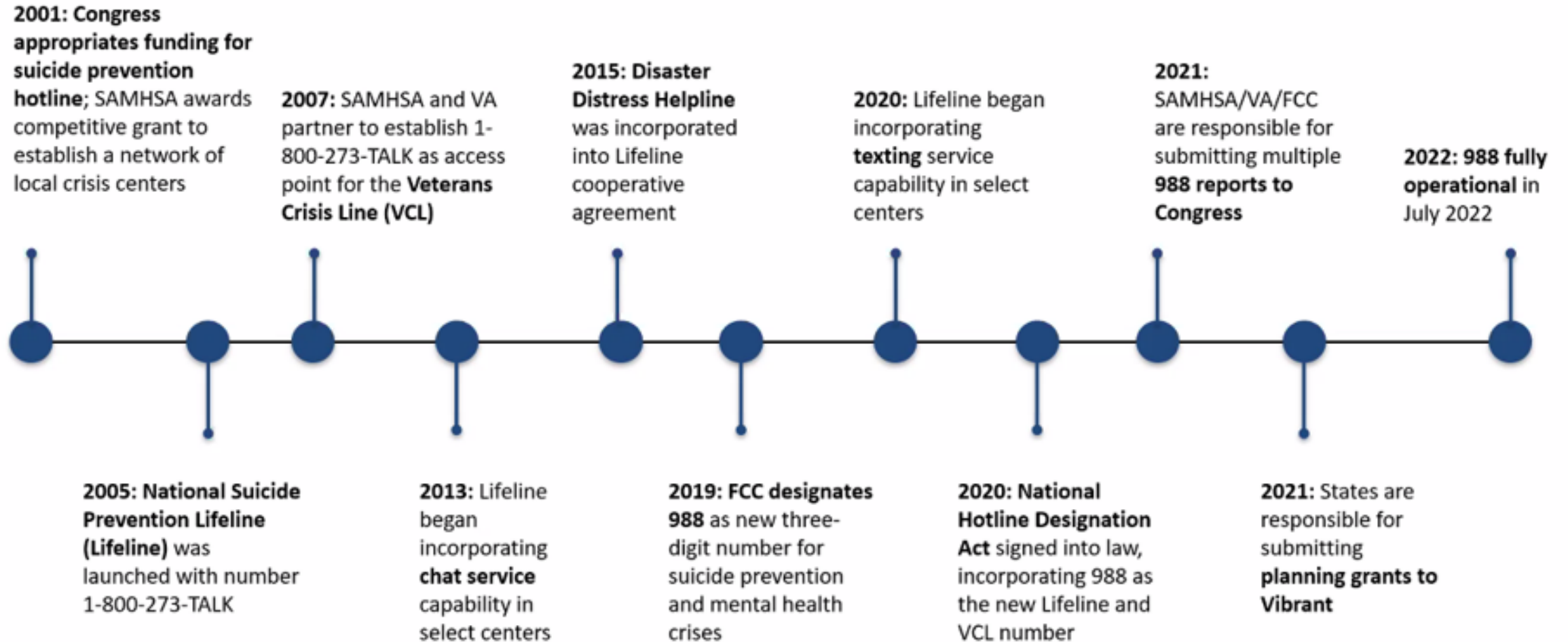
Spanish, press 2

Veterans Crisis, press 1

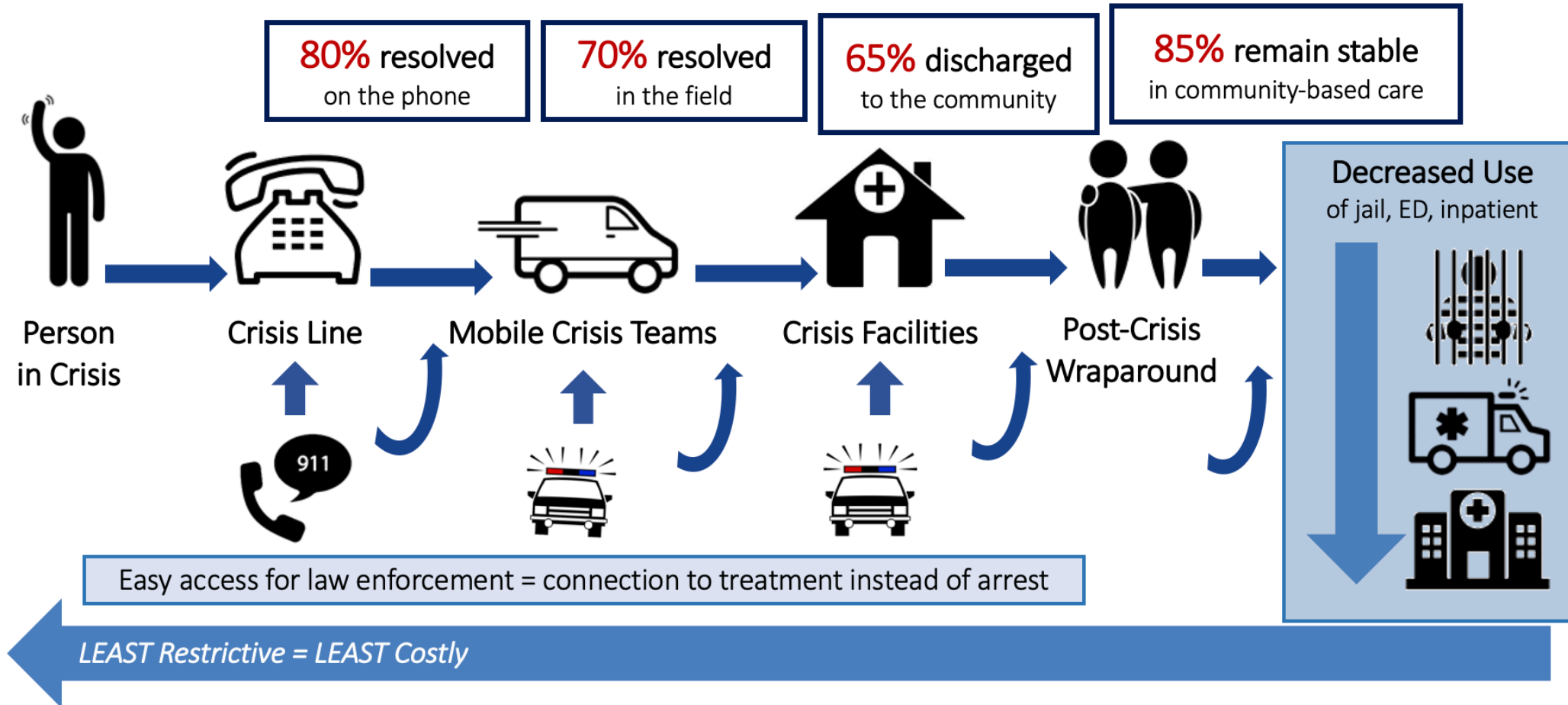
LGBTQI+ under 25, press 3

Otherwise stay on line

988 timeline: National focus

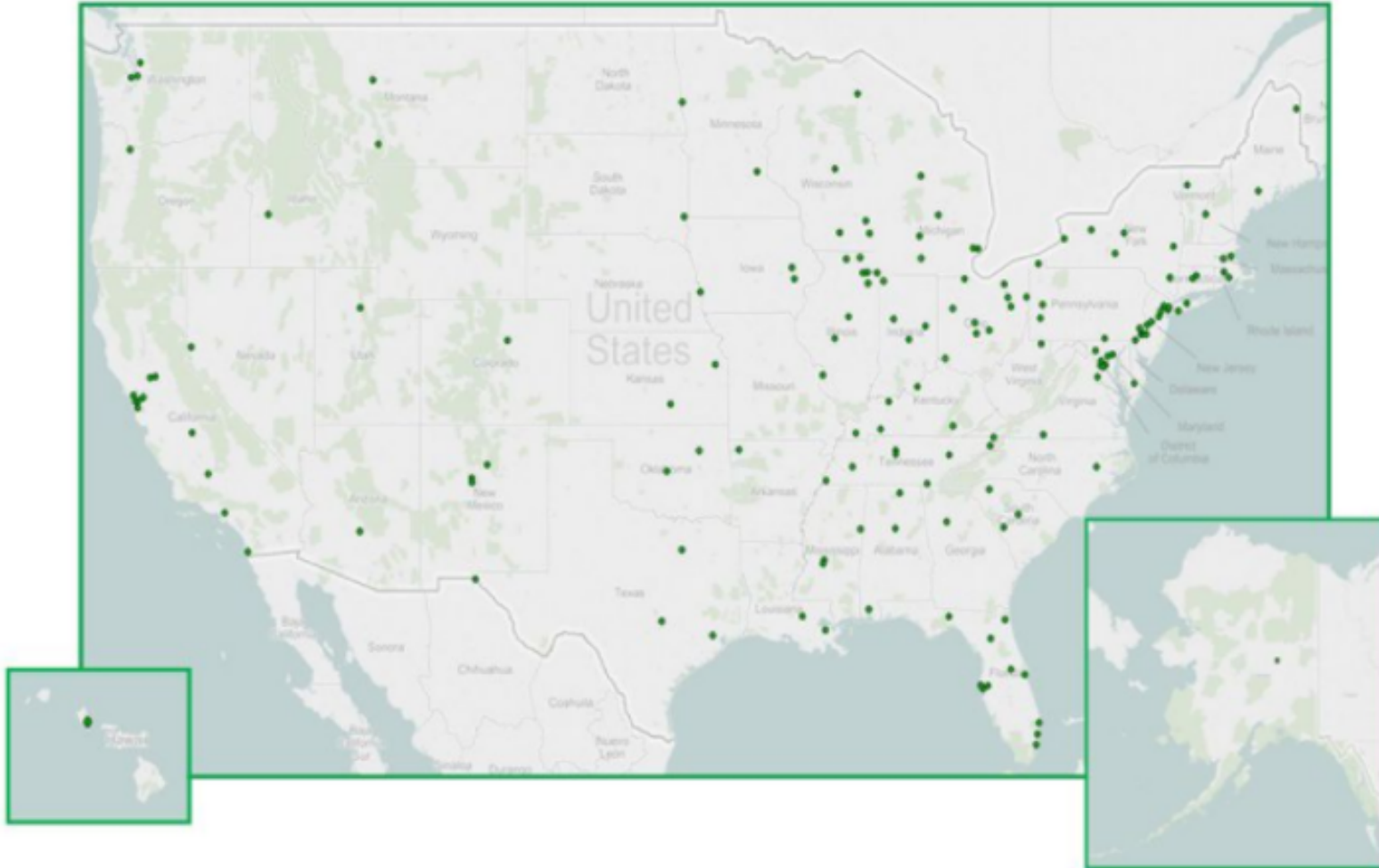


Model Crisis Service Continuum: Alignment of services toward a common goal



Balfour ME, Hahn Stephenson A, Winsky J, & Goldman ML (2020). *Cops, Clinicians, or Both? Collaborative Approaches to Responding to Behavioral Health Emergencies*. Alexandria, VA: National Association of State Mental Health Program Directors. <https://www.nasmhpd.org/sites/default/files/2020paper11.pdf>

The 988 Family of Crisis Centers

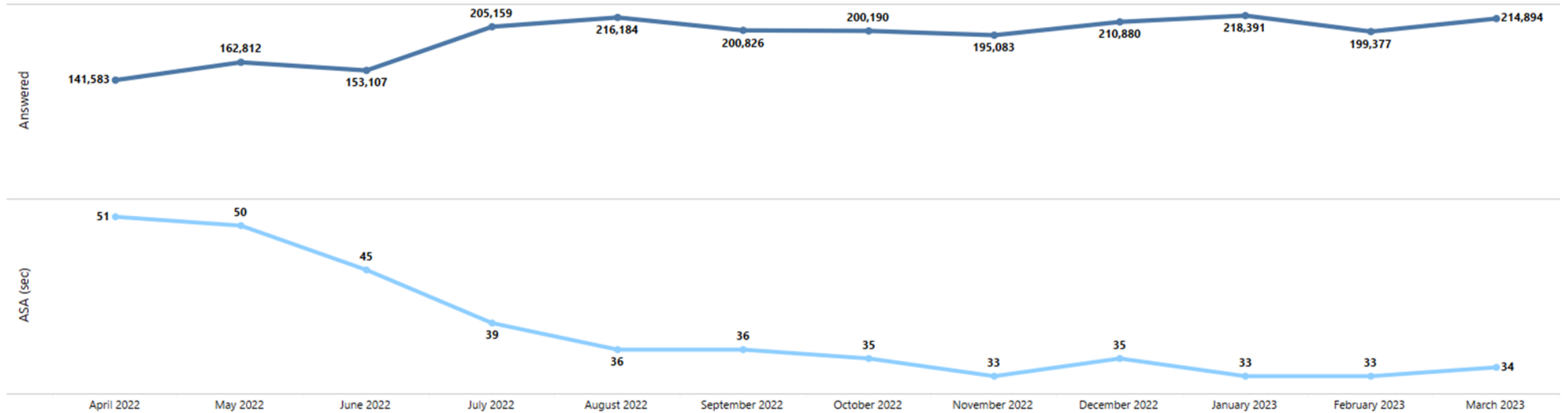


200+ centers

- 371,822 calls
- 61,146 chats
- 64,259 texts
- Veterans option
- Spanish option
- LGBTQ+ option

National 988 Data

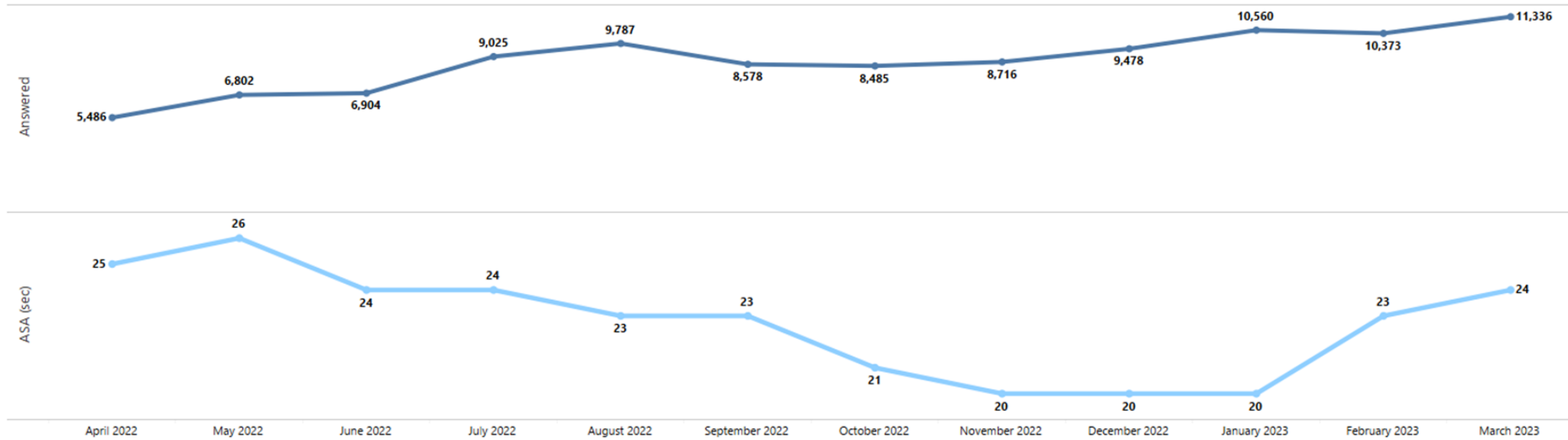
988 National



**52% increase
since last year
this time.**

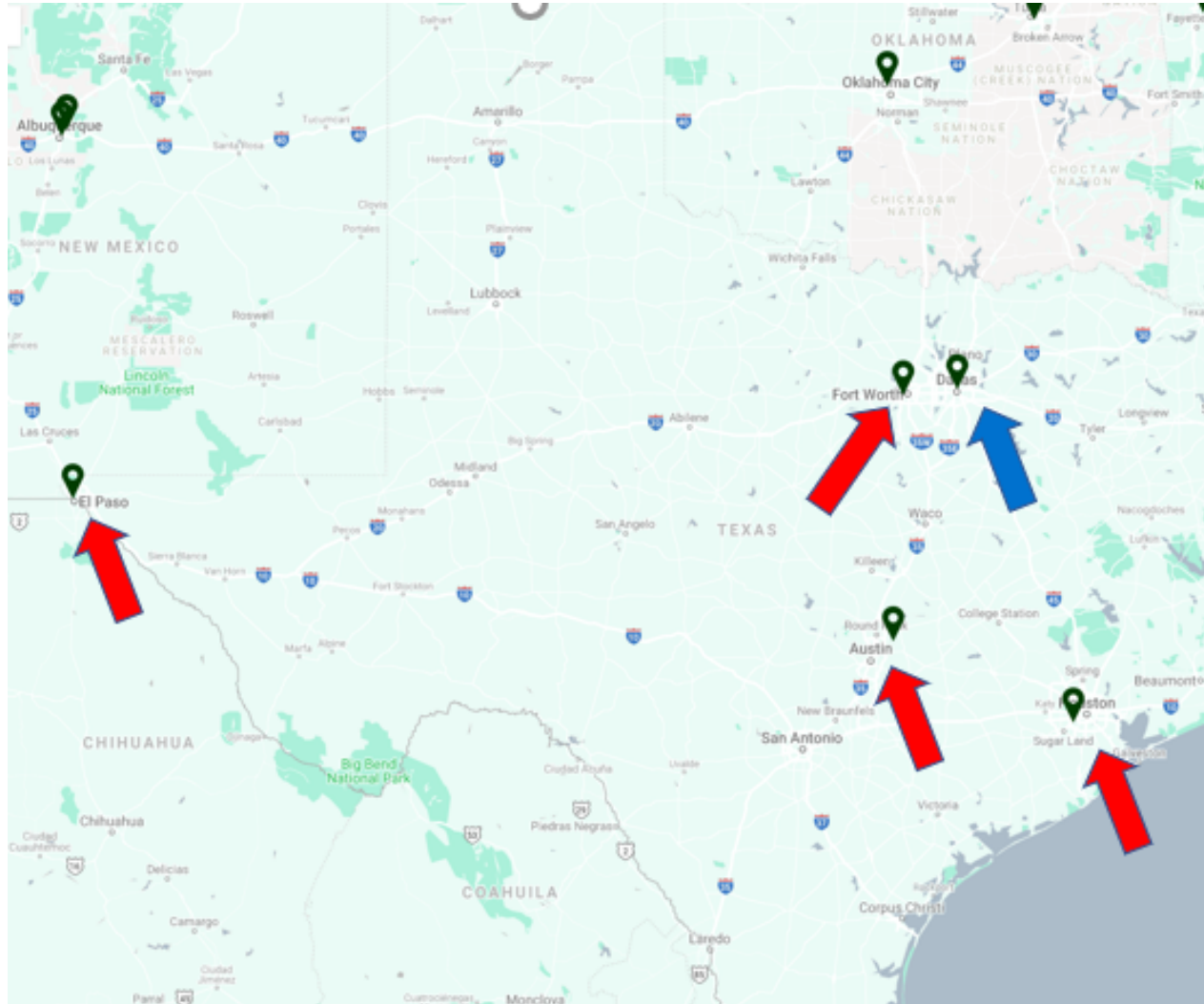
The State of Texas 988 Data

988 State



107% increase in volume since this time last year.

4 LMHAs & 1 partner who operate crisis lines



- Emergence Health Network (El Paso)
- MHMR of Tarrant County (Forth Worth)
- Integral Care (Austin)
- The Harris Center (Houston)
- Suicide & Crisis Center (Dallas) – Lifeline partner

*Bluebonnet Trails subcontracting to provide State back-up

Good news... Texas was set up for this!

- No wrong door!
- We have the LMHA system – regional response
- We seamlessly work together
- Routine services get referred to LMHA main line
- Crisis services get referred to LMHA crisis line



988 Highlights & Impacts

- Texas: 3rd highest call volume
 - In-State answer rate increase
 - 30% to 76% (and going up!)
 - Increase in staff
 - Funding
 - Remote work/technology
 - All 254 Texas counties covered
- Minimal Impact on LMHA services:
 - Approximately 7% of calls receive a referral to a LMHA.
 - Minimal Impact on 911/Emergency Services:
 - Less than 2% of calls require an emergency response

988 \neq 911

Crisis call centers stabilize most situations over the phone through support, compassion, and guidance.

Protecting privacy, saving money, ensuring safety and empowering community members.



DID YOU KNOW?

On average, crisis call centers stabilize 90% of crisis situations over the phone.

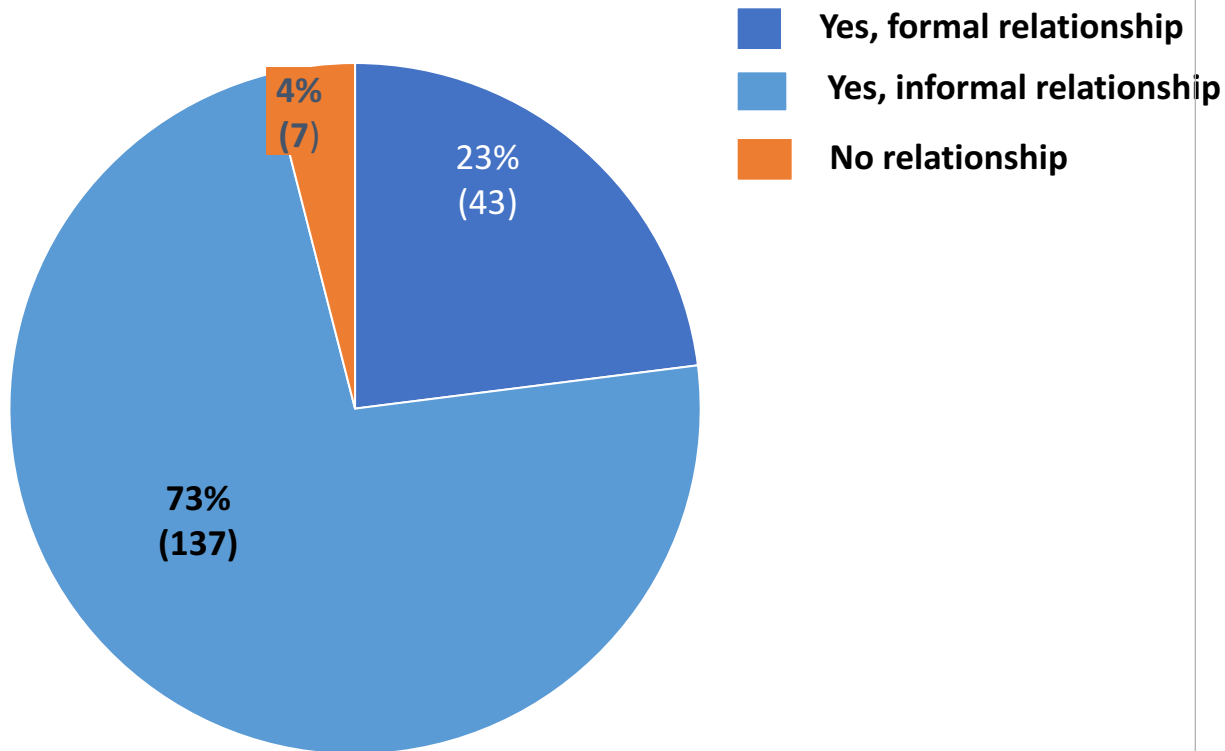


- <https://988answeringthecall.org/>

Lifeline Centers and 911 PSAPs

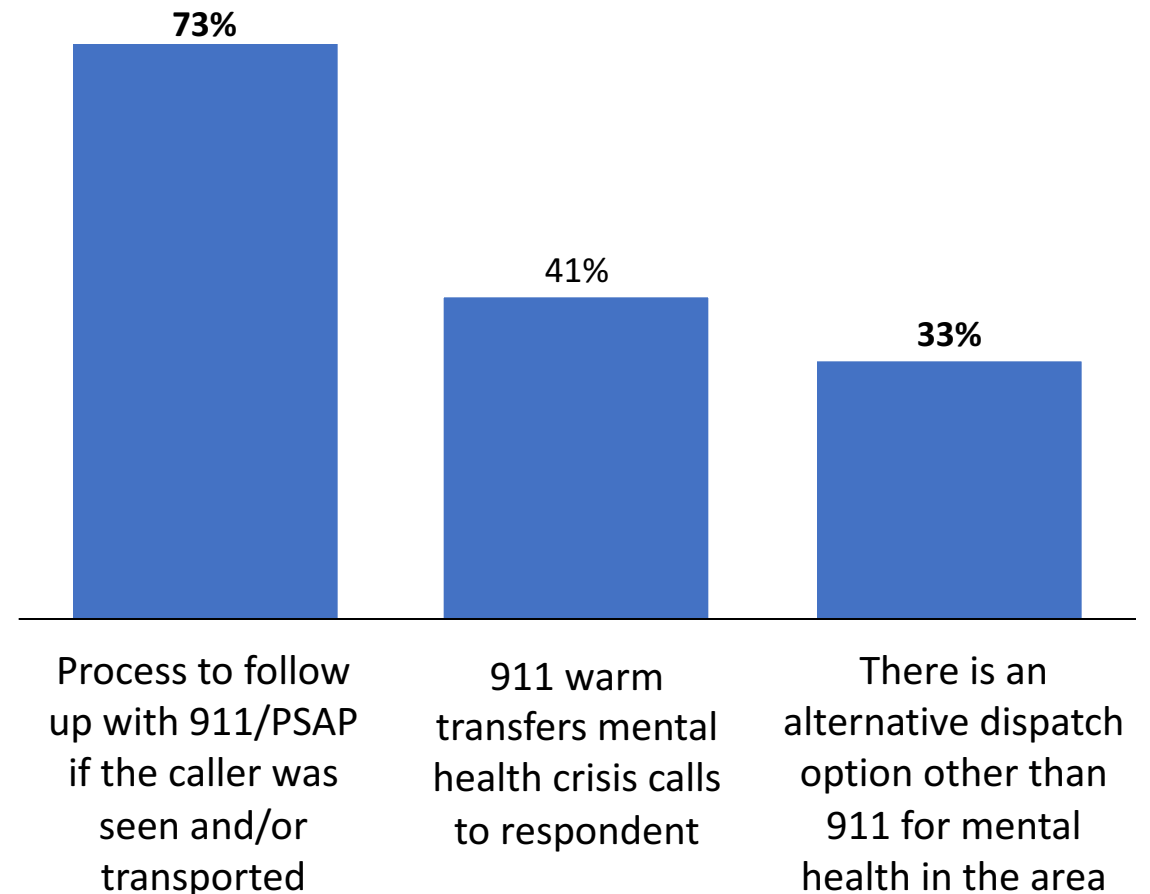
Relationship to local 911/PSAP

% of centers (number of centers)



Communications procedures with 911/PSAP

% of centers



Source: Vibrant Landscape Analysis (as of March 2021), n=187

Q86. What is your crisis center's relationship with local 911/PS.

Q87. When our crisis center refers callers at imminent risk to 911, we have a process in place where they can inform us if the caller was seen and/or transported

Q88. Does 911 warm transfer mental health crisis calls to your center?

Q89. Is there an alternative dispatch option other than 911 in your area for mental health crisis situations?

National 911 Collaborations with 988

NENA Suicide Prevention Standard



NENA Suicide Prevention Standard

NENA-STA-001

DSC Approval: 04/26/2013

PRC Approval: 05/17/2013

NENA Executive Board Approval: 06/15/2013

Prepared by:

National Emergency Number Association (NENA) PSAP Operations Committee, Standard Operating Procedures Subcommittee, Suicide Prevention Work Group.

Published by NENA

Printed in USA

988

Convening Playbook

Public Safety Answering Points
(PSAPs)

NASMHPD

988 Convening Playbook Public Safety Answering Points (PSAPs)

Overview

Goal. The document sets out to help:

- Articulate the need for operational readiness for 988
- Help PSAPs prepare for the 988 transition (not a specific mandate for them)
- Explain how to make progress on the criteria that are central to 988 readiness
- Identify best practices and examples seen in the field today

Audience. The playbook is written for public safety answering point supervisors / leadership

Structure. The document is structured in three sections:

- I. Operational readiness self-assessment for PSAPs
- II. Playbook for PSAPs
- III. Additional resources for PSAPs

Expanding 911 & 988 Collaborations

2023 and beyond...

- ***Vibrant partnership with NENA and NASNA to:***
 - Protocols/models for 911/988 interoperability (transferring calls, co-location, etc)
 - Engagement with NENA/NASNA members to promote local collaborations, disseminate protocols
 - Assist with public messaging for when to call 988 vs. 911
 - Co-facilitate 911/988 Community of Practice sessions
- ***911/988 Community of Practice Sessions***
 - To develop consensus on vision for 911/988 collaboration, share and disseminate promising models and protocols
 - Includes NENA, NASNA, U.S. DoT's Office of EMS, SAMHSA, VA, FCC, Vibrant, Law Enforcement and Crisis Center entities, etc.



Emergency Health Network

El Paso Center for Mental Health/Intellectual Disabilities



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities



- ✓ Available 24/7/365
- ✓ Accredited
 - ✓ AAS, CCBHC, and Joint Commission
- ✓ 16 full time degreed Crisis Line Specialists



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities

- ✓ Average 2,000 Local Crisis Line calls answered monthly.
- ✓ Average 730 calls answered from 988 monthly.
- ✓ Average 170 diversion calls answered from 911 monthly.
- ✓ Serves as the 988 responder for 55 Texas counties.



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities

- ✓ Core Services
 - ✓ Lethality/Risk Assessment
 - ✓ Crisis Interventions/De-escalation
 - ✓ Crisis Safety Planning
 - ✓ Mobile Crisis Outreach Team Dispatch/Rescue Services
 - ✓ Community Resource Referral/Linkage
 - ✓ Follow-Up Support Contacts



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities

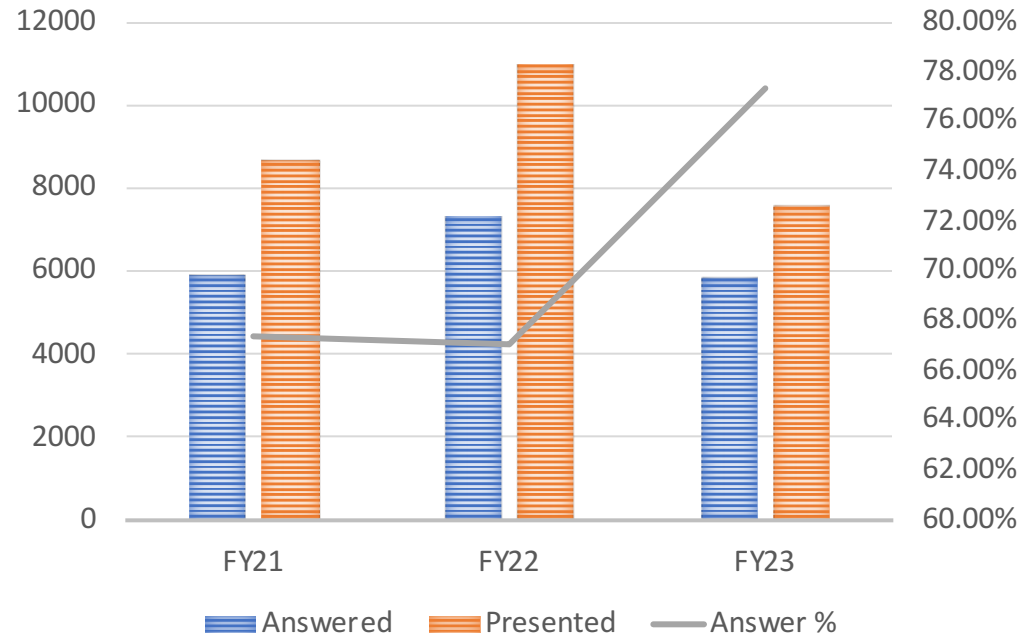
- ✓ Secondary Services
 - ✓ Hospital Coordination
 - ✓ Jail Crisis Calls
 - ✓ EDO Hospital Rotation



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities

EHN 988 FISCAL YEAR ANSWER COMPARISON

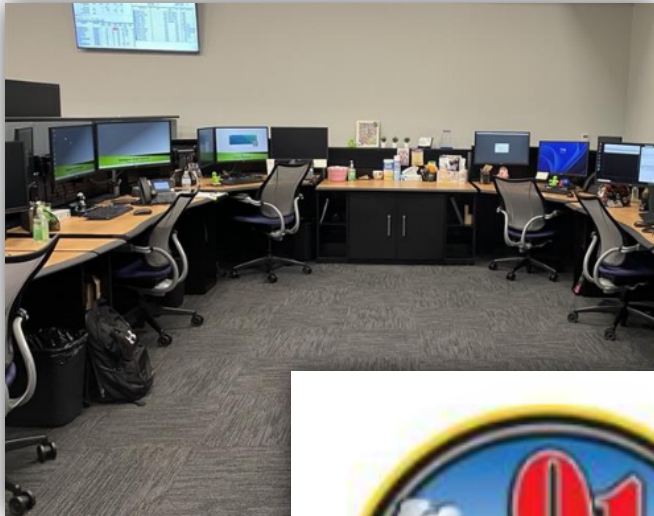


- ✓ Answer rate % has been improved on average by 10% from FY21
- ✓ Increase of 32.3% in calls presented from FY21



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities

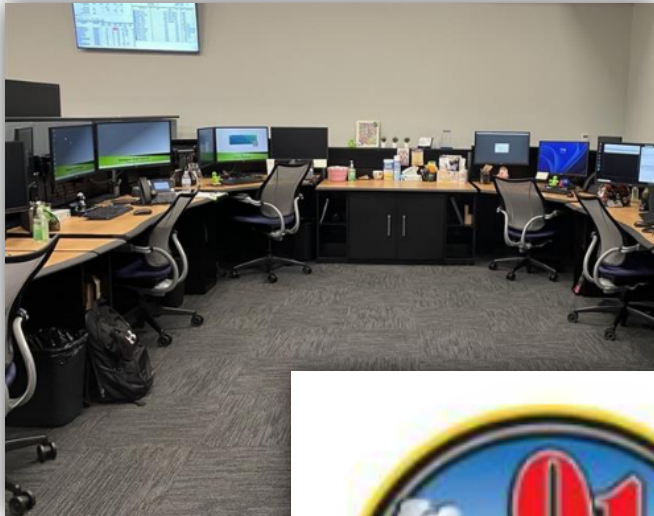


- ✓ EHN partnership with El Paso PSAP went live February 14, 2023.
- ✓ Feb to end of May 694 calls from 911 have been transferred to EHN for diversion.
- ✓ Goal: Reduce police dispatch for MH crisis or support caller during dispatch to increase safety for all parties engaged.



Emergence Health Network

El Paso Center for Mental Health/Intellectual Disabilities



- ✓ From 2-14 to 6-8 compared to the same time period the previous year we have seen impact of police dispatch rates.
- ✓ Verbal Domestic/Family Disturbance decrease of police dispatch by 11.1%
- ✓ Mental Health Calls decrease of police dispatch by 12.5%



My Health My Resources of Tarrant County



About Us-MHMR Tarrant

Serving North Texas since 1969

My Health My Resources of Tarrant County (MHMR) is the second-largest community center in Texas.

Our mission statement is
We Change Lives.

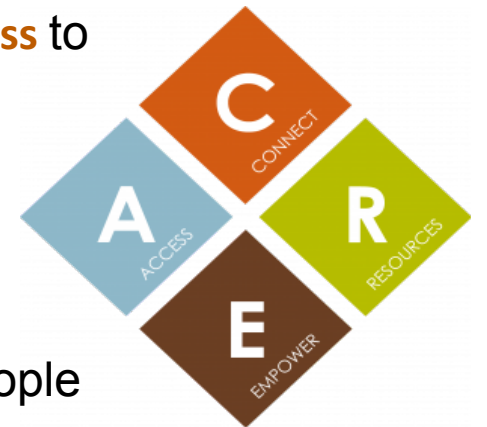
We **CARE**:

We **Connect** People in Our Community

We Provide **Access** to Services

We Link People to **Resources**

We **Empower** People



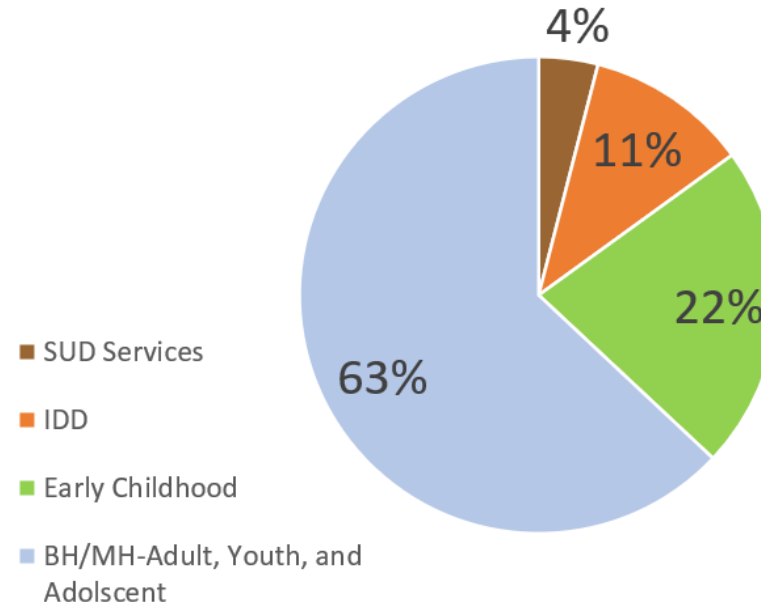
About Us-MHMR Tarrant

Serving North Texas since 1969

Services Provided:

- ✓ Mental Health
- ✓ Intellectual and Developmental Disabilities
- ✓ Addiction / Substance Use
- ✓ Child and Family Services
- ✓ Early Childhood Intervention (ECI)
- ✓ Criminal Justice Support
- ✓ Veterans
- ✓ Homelessness

MHMR Tarrant FY 22 Services Provided



89,025
Screening,
Assessment, &
Crisis Calls

71,763
Patients Served

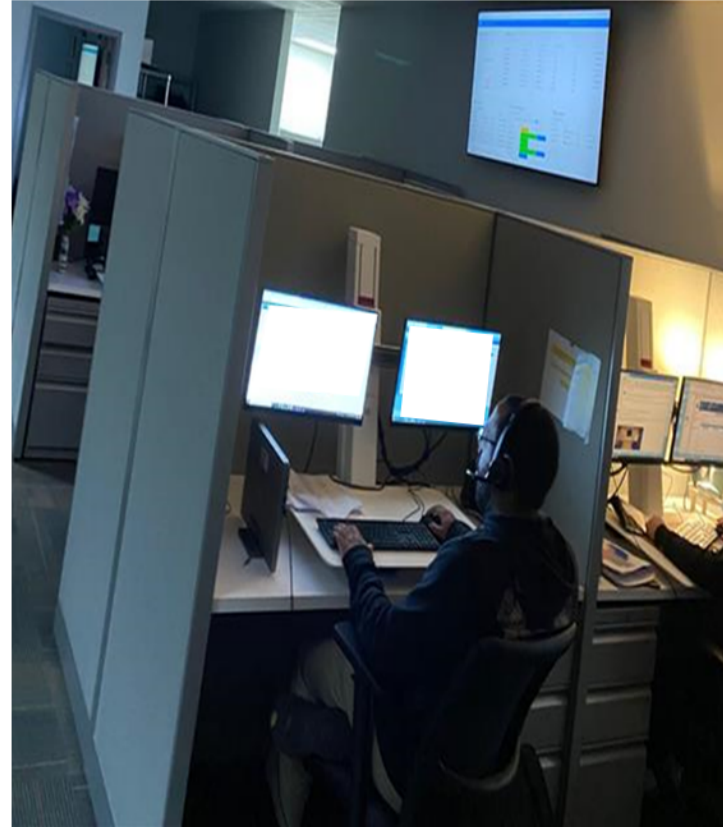
1.35 million
Total Services

ICARE Call Center of MHMR Tarrant

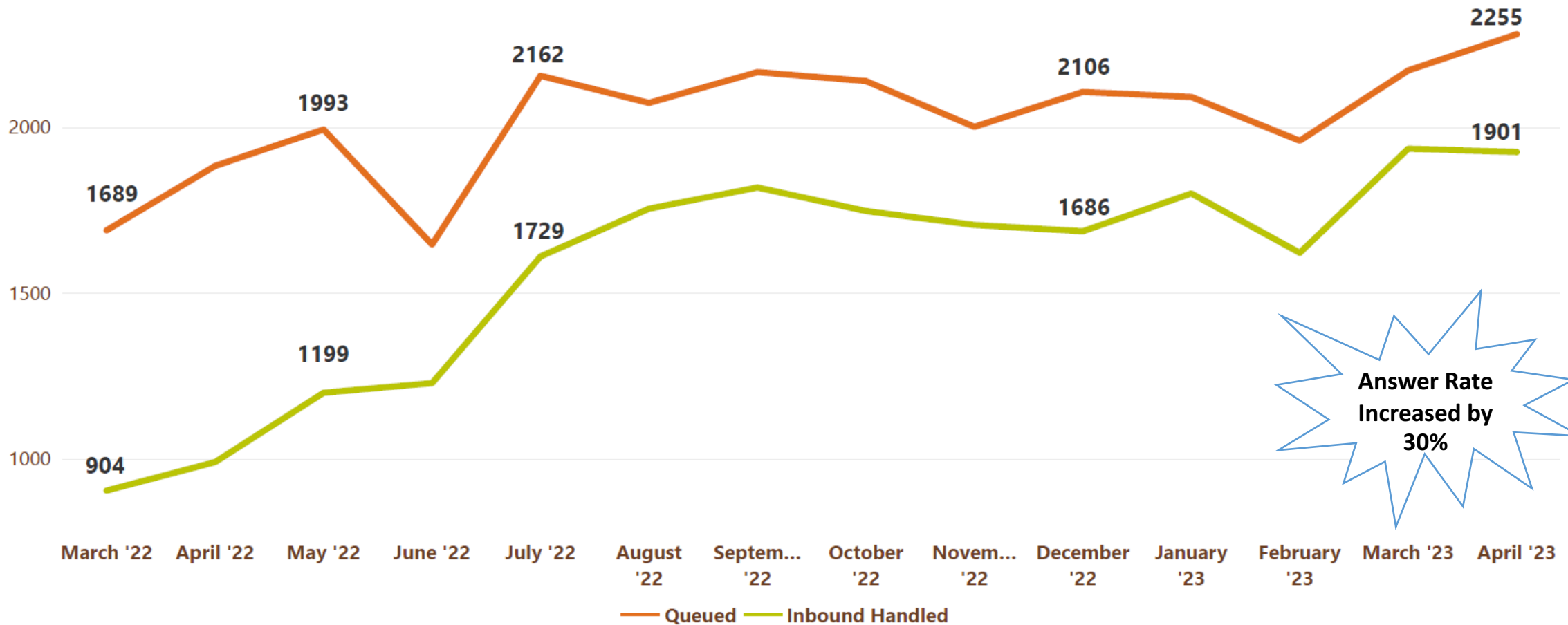
Available 24/7/365

Answers approx. 9,000 calls per month
for 9 Texas counties.

Serves as National Suicide Prevention
Lifeline Responder for 71 counties



988 Call Volume: Mar 2022–April 2023



ICARE Call Center-911 Partnership



MHMR Tarrant ICARE Call Center has partnered with Fort Worth PD PSAP to connect with individuals identified to be in crisis to divert law enforcement dispatch.

A 1-button transfer was established to warm transfer individuals identified as needing behavioral health services and resources.

ICARE collaborates with MedStar, our local ambulance provider, to divert individuals from emergency room transfer to alternate locations.



Words From A Few Callers.....

The caller stated they were very upset, physically unhealthy, and had recently gone through a breakup. The person said 988 Care Specialist displayed empathy, kindness and support! They said that they were wondering about an electronic device during the call and 988 Care Specialist took the time to assist, knowing that she didn't have to do this. The caller stated, "she went the extra mile for me"..., "she gave me Support", "which is what I called for"...

“extremely professional, very effective, caring and kind”.

“When I first started calling 988 I was not in a good place. The 988 Care Specialist listened to me today and I felt heard and supported.”



Integral Care

What is Integral Care?

- Integral care is the Local Mental Health Authority (LMHA) for Travis County
- **Mission:** Improve the lives of people effected by behavioral health and developmental and/or intellectual challenges
- **Vision:** Healthy Living for everyone
- We provided 441,281 services to 27,539 individuals in fiscal year 2022
- Helping people for over 55 years!
 - Established in 1967
 - Over **900** employees and over **45** locations across Travis County



Travis County
Residents Served



Staff in Austin/Travis
County



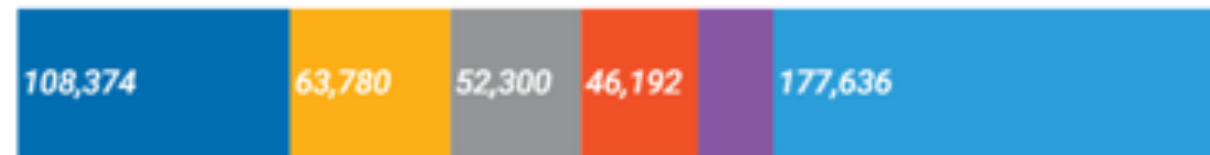
Operating
Budget



of Proud Service to
Our Community



Breakdown of Services - 478,887 Services Provided in FY2022



● Adult ● Crisis ● IDD ● Child & Family ● Substance Use ● Helpline

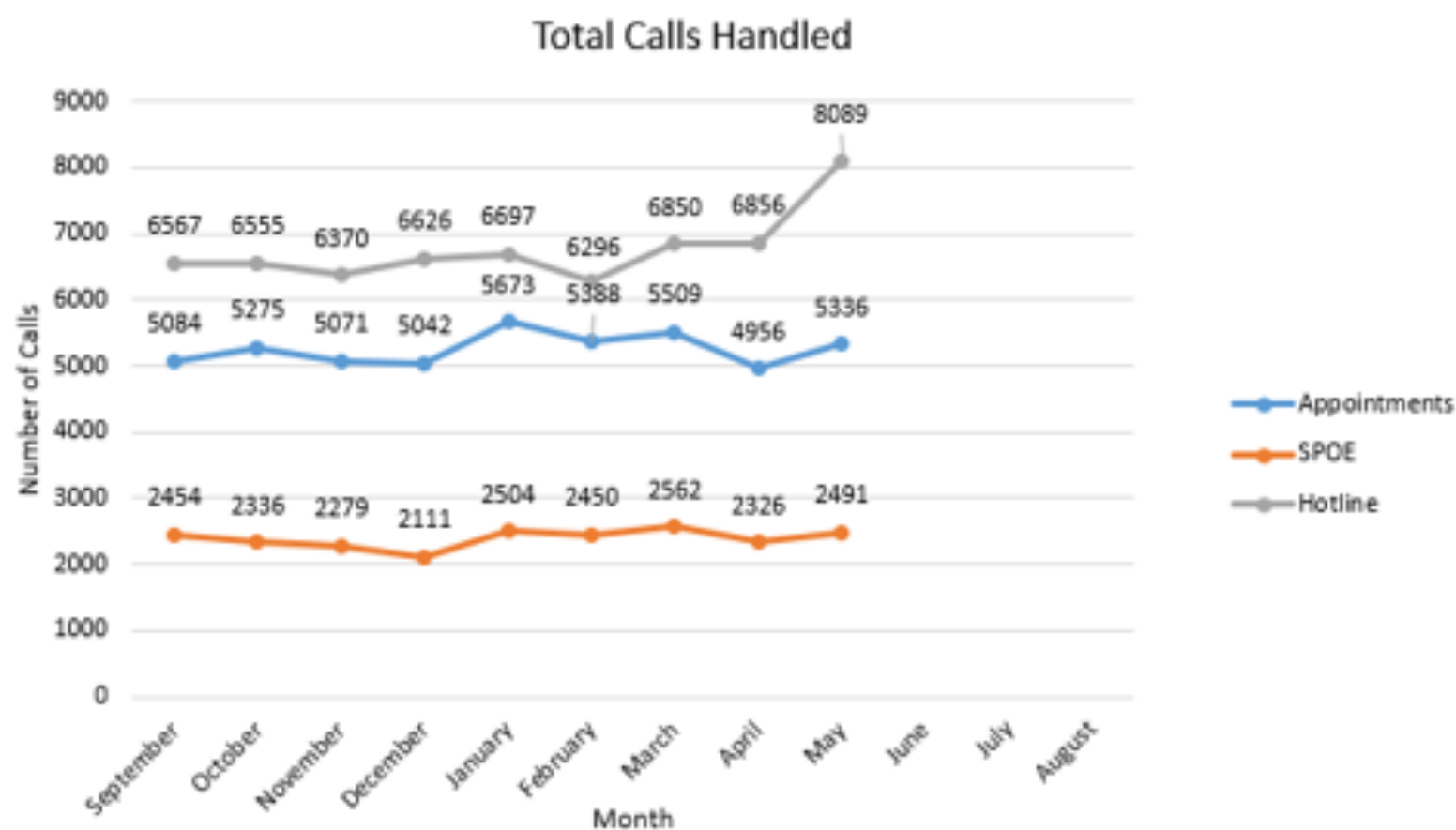


Crisis beginnings

- 1960s: Local Hotline (volunteers)
- 1980s: Local Hotline with staff
- 2006: MCOT established
- 2011: First responder training
- 2012: Lifeline (988) calls
- 2013: Expanded MCOT
- 2019: Co-locating with 911
- 2021: 911+4 option
- 2022: Started 988 chat/text

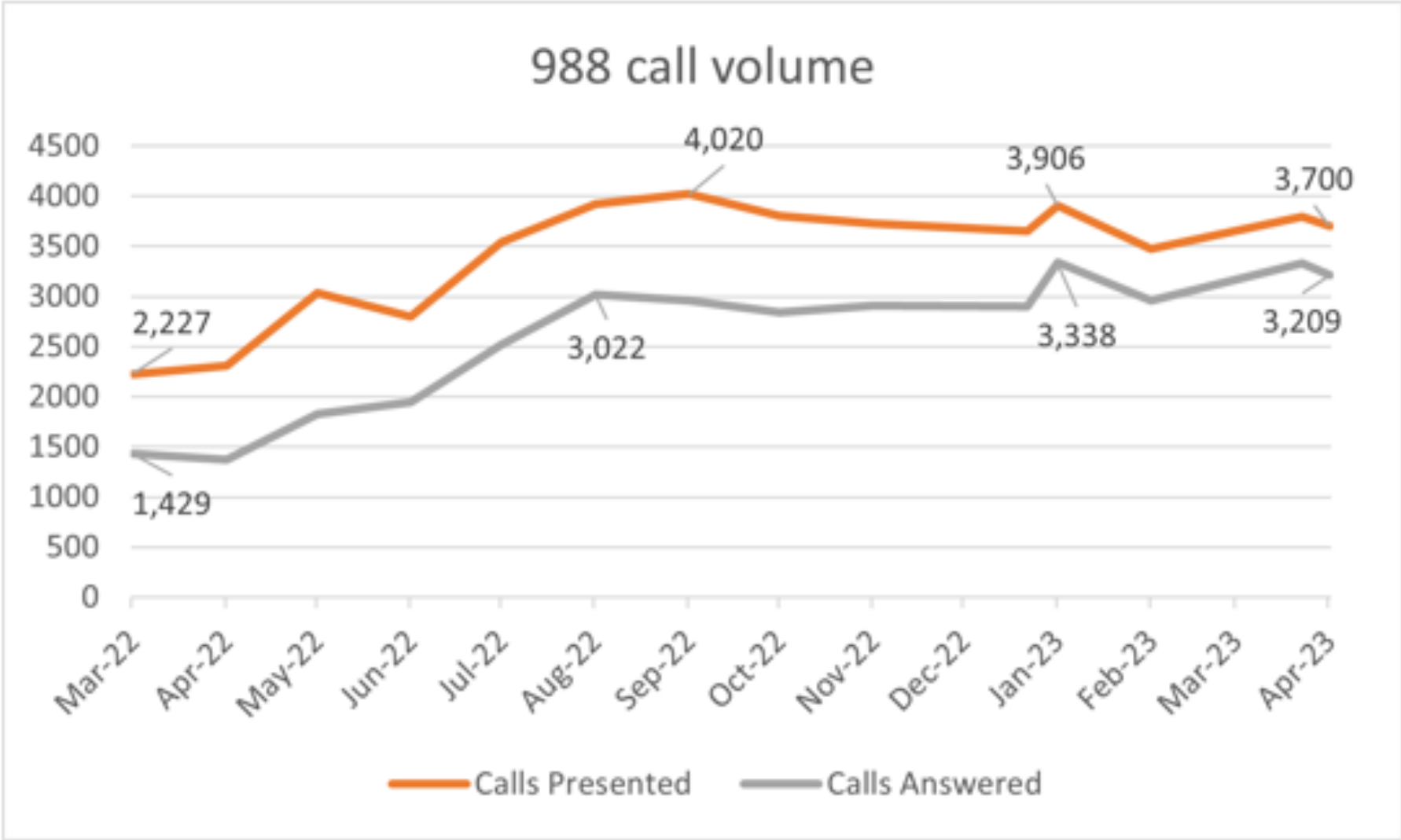


All calls across all queues: FY23 (so far)



- Approx. 15,000 calls/mo.
- Approx. 7,000 crisis calls/mo.
- Approx. 4,000 988 calls/mo.
- Answering 988 for 76 counties

988 call volume: Mar 2022 – April 2023



TOTAL Presented: 47,919
TOTAL Answered: 36,572

Average answer rate: 76%
(increase from 64% to 86%)

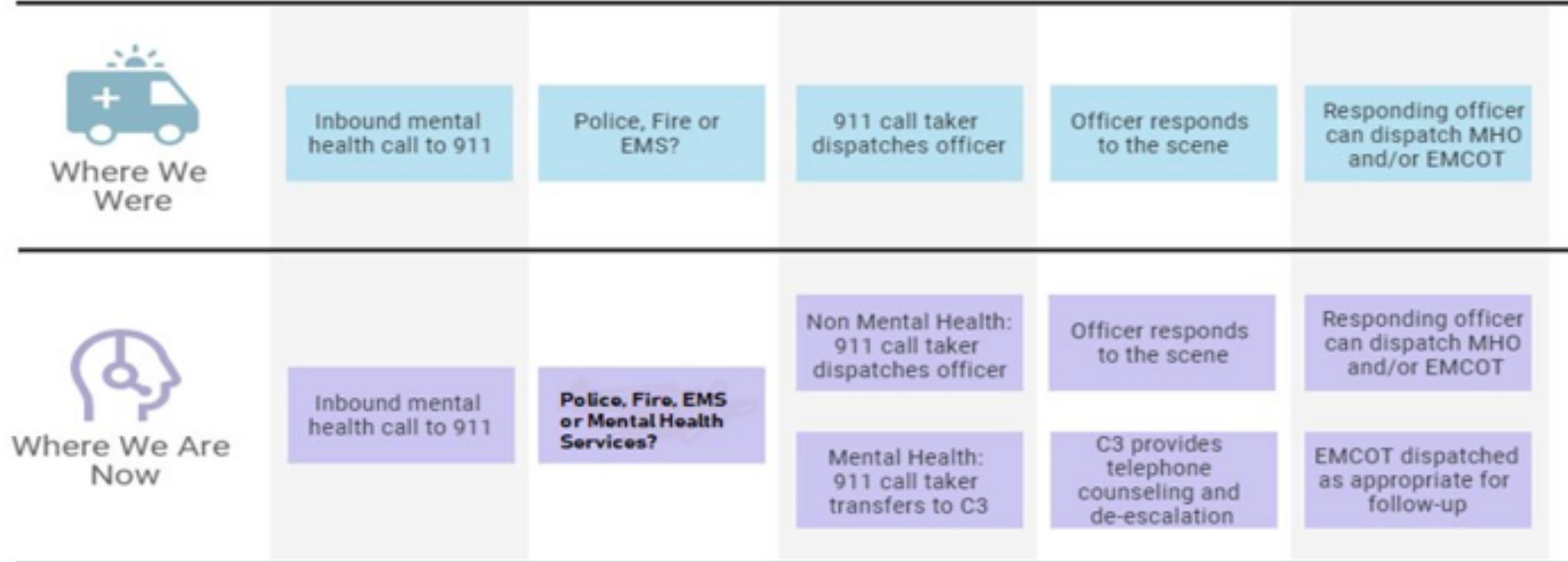


911 partnerships

- “It all started with pancakes”
- No wrong door
- 1-2% of calls include 911
 - Majority voluntary
- Training (2011)
- MCOT & EMCOT
 - Goal: diversion
 - Co-response & tele-video
- 911+4 (911 call center)



“Police, fire, EMS, mental health?”



911 calls for transfer

Eligible for transfer

- Individuals with non-emergency mental health crisis
- No evidence of active or imminent violence
- Mental health crisis involving youth
- May benefit from de-escalation efforts prior to first responder arrival

Ineligible for transfer

- Violent behavior (self/others)
- Physical possession of weapons
- Commission of a crime
- Severe intoxication, poisoning or injury
- Imminent risk of hurting/killing self/others

Outcomes: 911+4 (FY22)

6,981

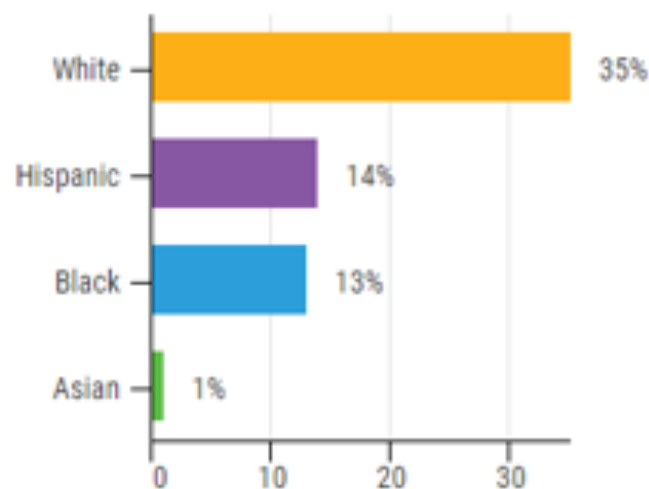
Calls Handled



81%

Diverted to Clinician

- 1** **23%** IC Follow Up
- 2** **27%** Emotional Support
- 3** **12%** Resources Provided
- 4** **9%** EMCOT Dispatch



Top Outcomes

APD Officers can also directly request a CTECC intervention when responding to a 911 Call



428 of these requests resulted in cancelling the need for a officer response

14%

Of calls were related to an individual experiencing **suicidal ideations**



1,484
Hours
Provided



3,867
Individuals
Assisted

Testimonial

“The Helpline was literally a lifesaver... My husband had just passed away. If I hadn't had the Helpline, I wouldn't be here today. They gave me reassurance that I was not alone, that there was help out there. They connected me to the ongoing care within Integral Care. Today, I have my case manager, my peer support specialist, my nutritionist, my personal trainer. It's an overall, well-rounded support system that I've gotten through Integral Care. It's made my life whole again.”



988 and 911 Programs

De-escalation and Diversion at Its Best!

Jennifer Battle, VP Community Access and Engagement



The HARRIS CENTER for Mental Health and IDD



FY 2022

87K people served

2M services provided

2,600 dedicated employees

\$325M annual budget

About Us

The Harris Center is the largest provider of community-based behavioral health and IDD services in the State of Texas. Located in Houston, Texas, The Harris Center provides a full continuum of services to better serve one of the most diverse and multi-cultural communities in the nation.

Our Mission

To transform the lives of people with behavioral health and IDD needs.

Our Vision

To empower people with behavioral health and IDD needs to improve their lives through an accessible, integrated, and comprehensive recovery-oriented system of care.



Mental Health Treatment



Intellectual and Developmental Disabilities Services



Comprehensive Psychiatric Emergency Program



Forensic Services



Crisis and Access Line 24/7

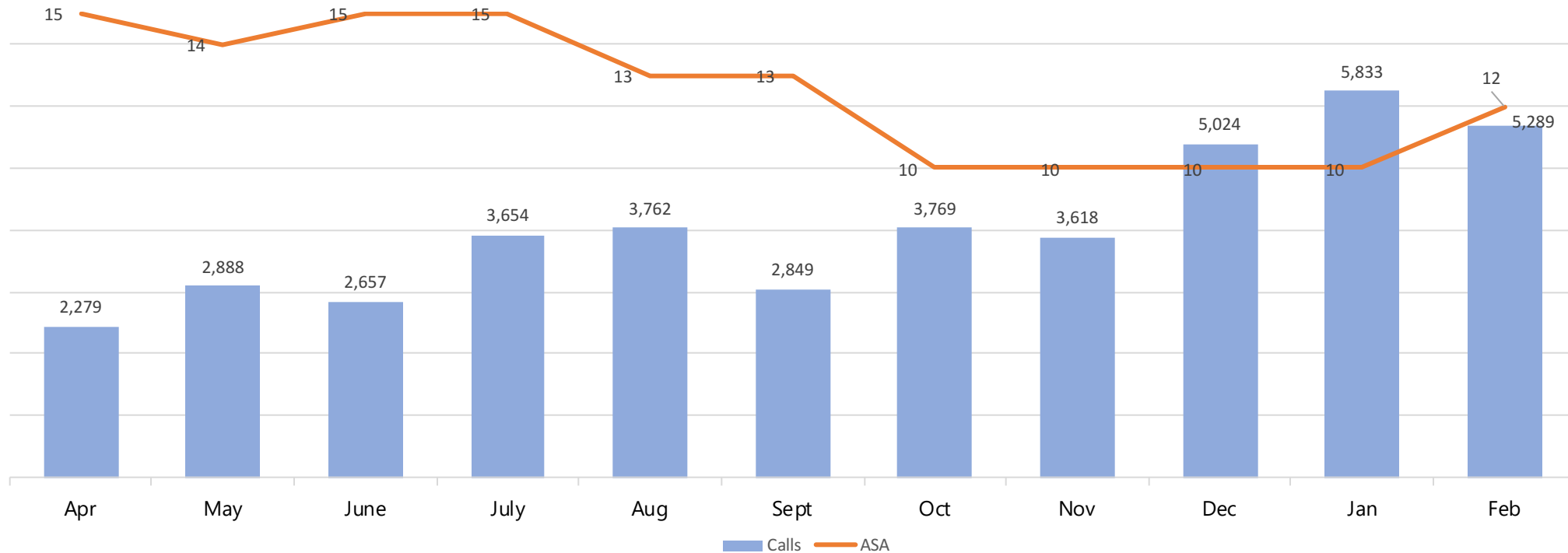
Behavioral Health and IDD Access Hub

- Available 24/7/365
- Answers approx. 30,000 calls a month
- 62 full time degreed Crisis Line Counselors
- 20 full time Access Line Specialists
- Serves as the 988 responder for 46 Texas counties and Crisis Line for 39



The Harris Center 988 Data

**132% increase
in call volume**



**50% of Texas volume
answered at The
Harris Center**

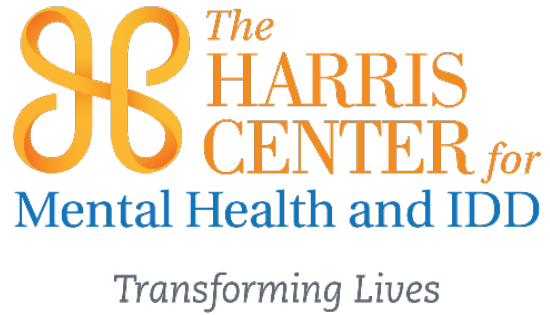
The 911 Crisis Call Diversion Team

The HARRIS CENTER for Mental Health and IDD

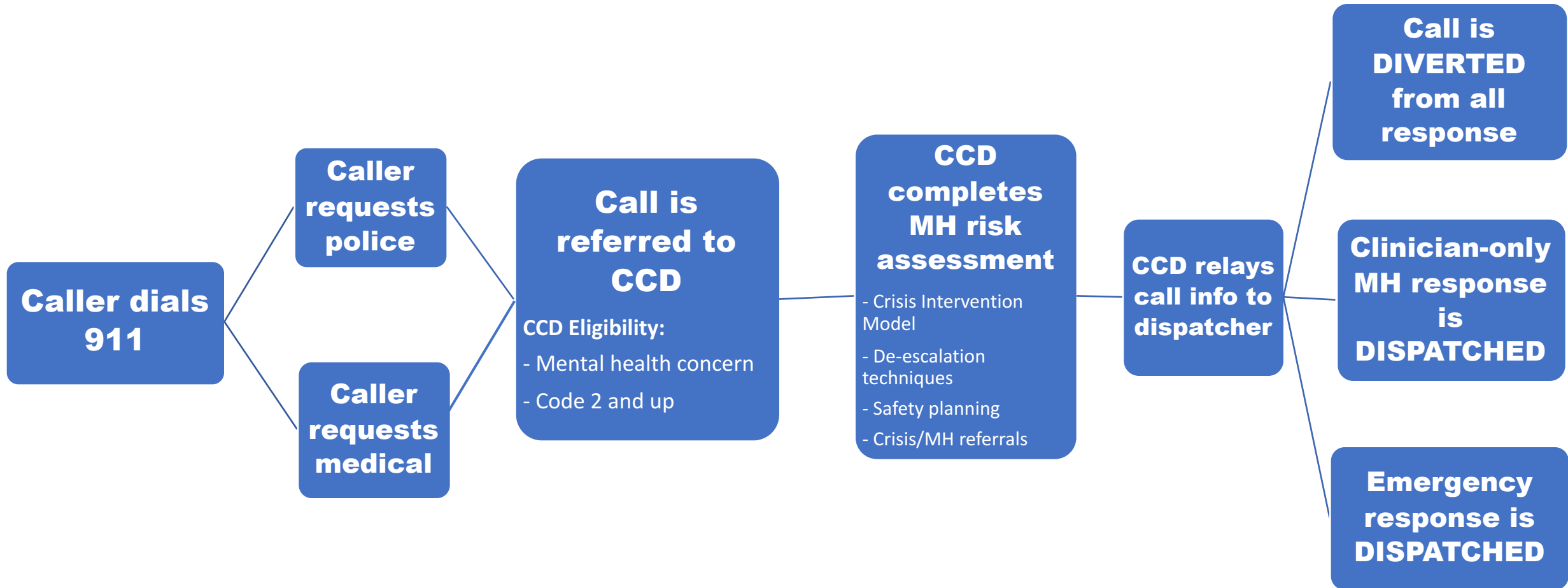
Transforming Lives



Crisis Call Diversion Stakeholders



The CCD Call Flow



Triage Questions for CCD Eligibility

911 Call Taker – for Codes 2 and up only

- ✓ Are you aware of or do they appear to have mental issues? (Has to be a “Yes” response)
- ✓ Is this call-in reference to their mental state? (Has to be a “Yes” response)

HFD Call Taker – for calls endorsing mental health concerns

- ✓ Are you currently attempting to kill or harm yourself or anyone else? (Has to be “No” or “Unknown” response)
- ✓ Are there any weapons involved? (Has to be “No” or “Unknown” response)
- ✓ Awake Now? (Has to be “Yes” or “Unknown” response)
- ✓ Is there any bleeding? (Has to be “No” or “Unknown” response)
- ✓ Is this call within CCD’s operating hours? (Has to be “Yes” to transfer to CCD)

Mental Health Call Codes

There are 27 MH Call Codes. CCD is authorized to assist on the following:

CIT Call Codes:

- **2150 – SUICID/JUST OCC/WPN UNK/CIT**
- **2151 – SUICID/JST OCC/NO WPN/CIT**
- **2841 – WELFARE CK/THT SUICID/CIT**
- **2842 – WELFARE CHECK/URGENT/CIT**
- **3041 – DISTURBANCE/CIT**
- **3052 – TRESPASSER/PROWLER/CIT**
- **3082 – SUSPICIOUS PERSON/CIT**
- **3842 – WELFARE CHECK/CIT**

Non-CIT Call Codes:

- **3040 – DISTURBANCE/UNK WEAPON**
- **3044 – DISTURBANCE/FAMILY**
- **3050 – TRESPASSER/PROWLER**
- **3080 – SUSPICIOUS PERSON**
- **4089 – SUSPICIOUS EVENT**
- **5030 – SEE COMPLAINTANT/UNK**

***CCD may only assist on these non-CIT call codes if a MH concern is also documented in the call slip's notes.**

CCD Referral Sources

Referrals to CCD can be made via:

- **Direct call transfer**
- **Call back request**
- **Self-initiated call back**

- 911 Call Takers
- HFD Call Takers
- HPD Dispatchers
- Watch Command / Dispatch Supervisors
- Police Desk Unit
- Teleserve
- Patrol
- Computer Aided Dispatch (CAD)



911 CCD Highlights

- Working in partnership with LMHA Crisis Line/Lifeline/988 since 2016
- Over 12,500 calls completely diverted away from Law Enforcement Response
- Over 5,500 calls completely diverted away from EMS response since 2017
- 58% of calls for service are completely diverted away from LE or EMS.
- Dedicated Mobile Crisis Rapid Response Team created in 2022 is able to respond to in person requests. Approximately 13% of calls.
- For calls that still need law enforcement dispatch there is a 43% decrease in officer time on scene.

Success Story

An insurance representative contacted 911 to request a welfare check on a client who endorsed suicide due to grief after her fiancé recently passed away.

The CCD Counselor found the call on CAD and initiated a reach out call to the client directly. The client stated that she has been sad since her fiancé died three months ago. The client denied that she had a plan, intent, or access to means for suicide. The client reported she is depressed and sometimes thinks about dying, but she does not want to die.

CCD Counselor empathized with the client's grief and explored coping skills and protective factors. The CCD Counselor provided the client with community referrals to The Harris Center's Crisis Line, Bo's Place, and the Grief Recovery Center for emotional support.

The CCD Counselor later followed up with the client and the client stated that she was able to secure an appointment with the Grief Recovery Center. The client stated she was feeling better after talking and thanked the CCD Counselor for the resources and for following up.



911 Crisis Call
Diversion



James Greathouse,
911 Crisis Call Diversion



Grief Recovery Center

Success Story



Citizen called 911,
Spoke with HFD Call Taker

A citizen called 911 as they observed the client laying on the ground hysterically crying due to seeing her brother pass away and experiencing SI with plan to jump off a bridge.

MCOT Rapid Response accepted the call from the Crisis Call Diversion Counselor. MCOT Rapid Response staff was able to engage with client who reported a history of mental health issues with ineffective medication. Client denied being currently suicidal but expressed wanted psychiatric assistance without hospitalization.

MCOT Rapid Response staff was able to coordinate a same day appointment with MCOT's psychiatrist so that client could receive immediate care for psychiatric medication needs. Continues to meet with MCOT for long term linkage.



Valerie Hernandez,
911 Crisis Call Diversion



Linda Ellis,
MCOT Rapid Response



Jahrvae White,
MCOT Rapid Response



Dr. Villarreal,
MCOT Psychiatrist



Nancy Rosillo,
MCOT Clinician

Jennifer Battle, MSW
VP Community Access and Engagement
The Harris Center for Mental Health and IDD
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