Becca BALINT
US REPRESENTATIVE VERMONT

988 AND 911 INTEGRATION ACT

Reps. Balint (D-VT) & Matsui (D-CA)

The *988 and 911 Integration Act* corresponds to Section 302 of the *988 Implementation Act*.

THE PROBLEM

For decades, 911 has been the only number for Americans to call in times of emergency. However, this system was not designed with mental health crises in mind – and often results in individuals in behavioral health crises being hospitalized, incarcerated, or even harmed or killed.

One of the goals of building a crisis response system that incorporates 988 and mobile crisis response teams was to shift the response to mental health crises from law enforcement and public safety officials to trained mental health professionals and crisis response teams. However, some communities have lagged when it comes to transferring calls between 911 and 988, determining the most appropriate responders, and harmonizing workflows to allow for that response.

SUMMARY

The 988 and 911 Integration Act would establish a panel, jointly convened by the Department of Health and Human Services and the Department of Justice, to make recommendations on integrating 988 and 911 services. The panel would include representatives from each segment of the crisis care response network, including behavioral health professionals, law enforcement officers, and crisis response professionals, and would update its recommendations every five years.

Specifically, the panel would:

- Provide recommendations on technical and operational integration of the 988 and 911 call lines and appropriate response;
- Establish training, staffing, and protocol requirements to ensure that 988 and 911 dispatch personnel respond appropriately to callers in crisis;
- Ensure appropriate care is provided to members of particularly vulnerable communities, including Native Americans, veterans, and service members; and
- Develop data collection and reporting standards to monitor outcomes for individuals who contact 911 and 988 in mental health crisis.