



Indiana 988 Implementation Update

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What is 9-8-8? We're Just Talking about a New Suicide Prevention Crisis Line, Right?



“9-8-8 is designated as the universal telephone number within the United States for the purpose of the **national suicide prevention and mental health crisis hotline system**”

S.2661 - National Suicide Hotline Designation Act of 2020
116th Congress (2019-2020)

LAW Hide Overview X

Sponsor: [Sen. Gardner, Cory \(R-CO\)](#) (Introduced 10/22/2019)

Committees: Senate - Commerce, Science, and Transportation

“Beginning July 16, 2022, 988 will be the new three-digit dialing code connecting people to the existing National Suicide Prevention Lifeline, where compassionate, accessible care and support is available for anyone experiencing mental health-related distress—**whether that is thoughts of suicide, mental health or substance use crisis, or any other kind of emotional distress.** People can also dial 988 if they are worried about a loved one who may need crisis support.”





What is 9-8-8 in Indiana?

- “Specifies that the division of mental health and addiction (division) has primary oversight over suicide prevention and crisis services activities and coordination and designation of the 9-8-8 crisis hotline centers. Sets forth requirements to be designated as a 9-8-8 crisis hotline center. **Establishes the statewide 9-8-8 trust fund.**”
- “**Not later than July 1, 2022**, the division may designate at least one (1) 9-8-8 crisis hotline center in Indiana to coordinate crisis intervention services and crisis care coordination to individuals accessing the **9-8-8 suicide prevention and behavioral health crisis hotline** (9-8-8 crisis hotline) from anywhere in Indiana twenty-four (24) hours a day, seven (7) days a week.”
- Per the bill, **DMHA will have oversight over**
 - 9-8-8 crisis hotline center(s)
 - Crisis receiving and stabilization services
 - Mobile crisis teams

House Bill 1468

Enrolled House Bill (H)

Authored by [Rep. Steven Davisson](#).

Co-Authored by [Rep. Edward Clere](#), [Rep. Brad Barrett](#), [Rep. Rita Fleming](#).

Sponsored by [Sen. Michael Crider](#), [Sen. Ed Charbonneau](#), [Sen. Vaneta Becker](#), [Sen. Ronald Grooms](#), [Sen. Jon Ford](#), [Sen. Lonnie Randolph](#).



What is 9-8-8 in Indiana?

- **The mobile crisis teams must include a peer certified by the division and at least one of the following:**
 - A behavioral health professional licensed under
 - An other behavioral health professional (OBHP) as defined in 440 IAC 11-1-12.
 - Emergency medical services personnel licensed under IC 16-31.
 - Law enforcement based co-responder behavioral health teams.
- **Crisis response services provided by a mobile crisis team must be provided under the supervision of:**
 - a behavioral health professional licensed under IC 25-23.6
 - a licensed physician or a licensed advance practice nurse or clinical nurse specialist.
- The supervision required under this subsection may be performed remotely.

House Bill 1222

Enrolled House Bill (H)

Authored by [Rep. Cindy Ziemke](#).

Co-Authored by [Rep. Ann Vermillion](#), [Rep. Julie Olthoff](#), [Rep. Carolyn Jackson](#).

Sponsored by [Sen. Michael Crider](#), [Sen. Jon Ford](#).

988 is More than a Number: It's a Chance to Transform Crisis Care



Someone to Contact

Statewide 988
Center(s)



Someone to Respond

Mobile Crisis Teams and
Mobile Response and
Stabilization Services




A Safe Place for Help

Subacute and Acute
Crisis Stabilization
Centers


A system capable of serving *anyone, anytime, anywhere*



The 988 Centers function as *Care Traffic Control Centers*



**Status Disposition
for Intensive
Referrals**



**24/7
Outpatient
Scheduling**



**Shared Bed
Inventory
Tracking**



**High-tech, GPS-
enabled Mobile
Crisis Dispatch**

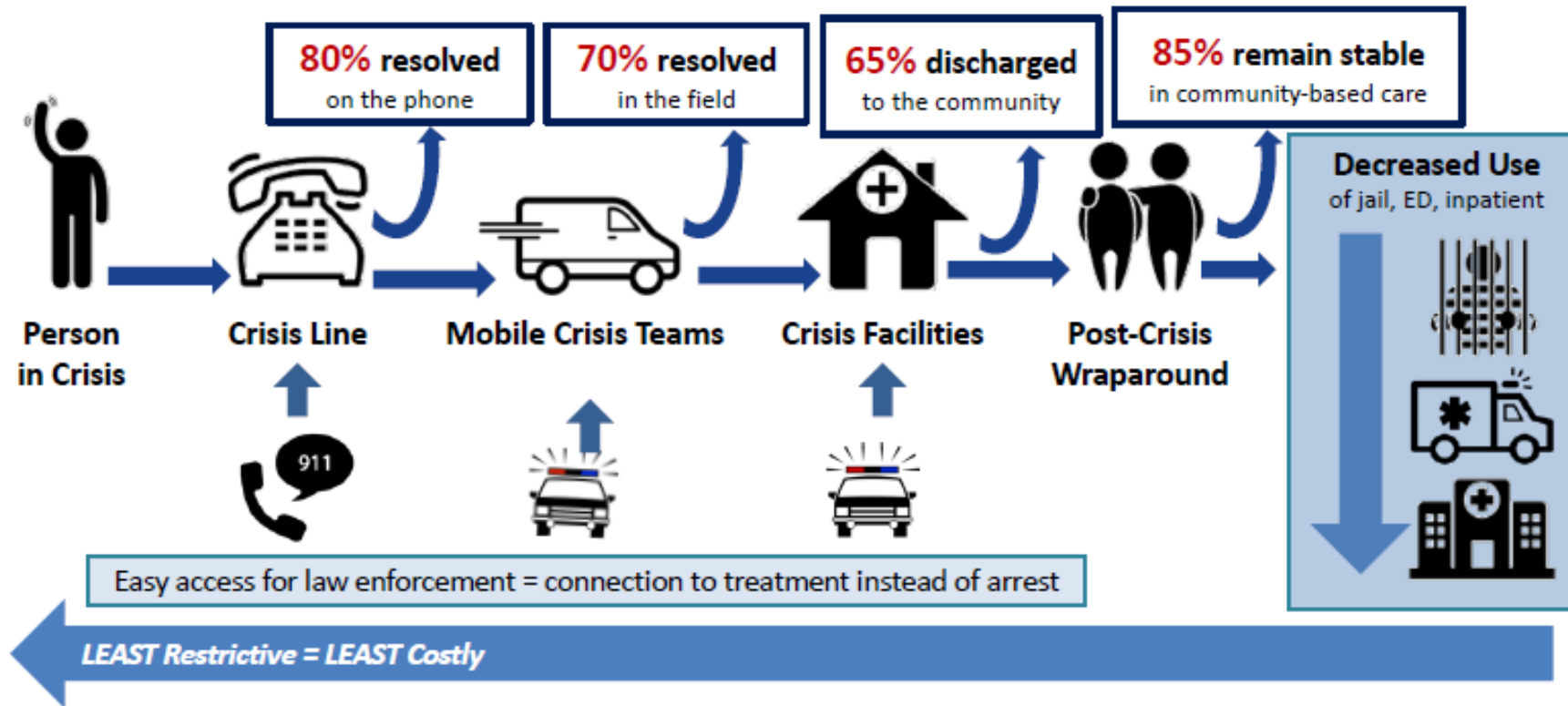


**Real-time
Performance
Outcomes Dashboards**

A Crisis System that Works

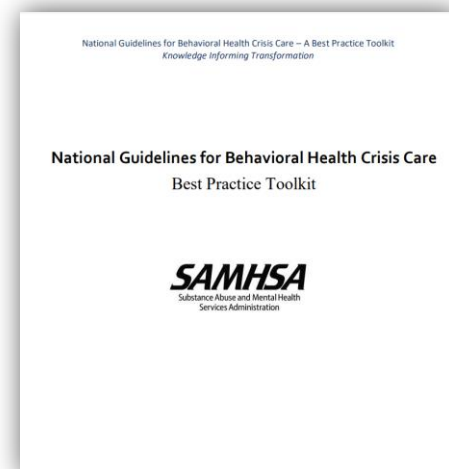


Crisis System: Alignment of services toward a common goal



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 above image is a reproduced slide from the April 2, 2021
Congressional Briefing: Mental Health is Not a Crime:
How 988 and Crisis Services will Transform Care*





Vision and Mission Statements for 9-8-8 (Indiana)

Vision

- *Providing quick, competent, and nation-leading crisis response services for every Indiana resident*

Mission

- *Creating a sustainable infrastructure that will fully coordinate crisis care for mental health, substance use, and suicidal crises*

Applying a recovery orientation that includes:

- *trauma-informed care,*
- *significant use of peer staff,*
- *person and family centered focus,*
- *collaboration with law enforcement,*
- *and a commitment to Zero suicide/suicide safer care and the safety of consumers and staff*

Peers are the Key that unlocks the Potential of Crisis Care



<u>Common Themes in Elevated Stress Response</u>	<u>Potential Ways to De-Stress Crisis Response</u>
Threat of Social Evaluation (e.g., public speaking)	Safety, Trustworthiness, Dignity and Respect
Lack of Control over Outcomes	Collaboration, Empowerment, and Peer Support
Unpredictability	Information Sharing and Peer Support
Perception of Things Getting Worse	Trustworthiness and Peer Support
No Frustration Outlets (e.g., hobby, exercise, etc.)	Peers Connecting to Local Support Systems
Low Social Support (e.g., rejection)	Peers Connecting to Local Support Systems

Federal Law Supports Funding the Entire System



“Use of 9-8-8 funds.--A fee or charge collected under this subsection shall only be imposed, collected, and used to pay expenses that a State ... is expected to incur that are reasonably attributed to—

- (A) ensuring the efficient and effective **routing of calls** made to the 9-8-8 national suicide prevention and mental health crisis hotline to an appropriate crisis center; and
- (B) **personnel and the provision of acute mental health, crisis outreach and stabilization services** by directly responding to the 9-8-8 national suicide prevention and mental health crisis hotline.”

“the fee or charge is held in a sequestered account to be **obligated or expended only in support of 9-8-8 services, or enhancements of such services**, as specified in the provision of State or local law adopting the fee or charge.”

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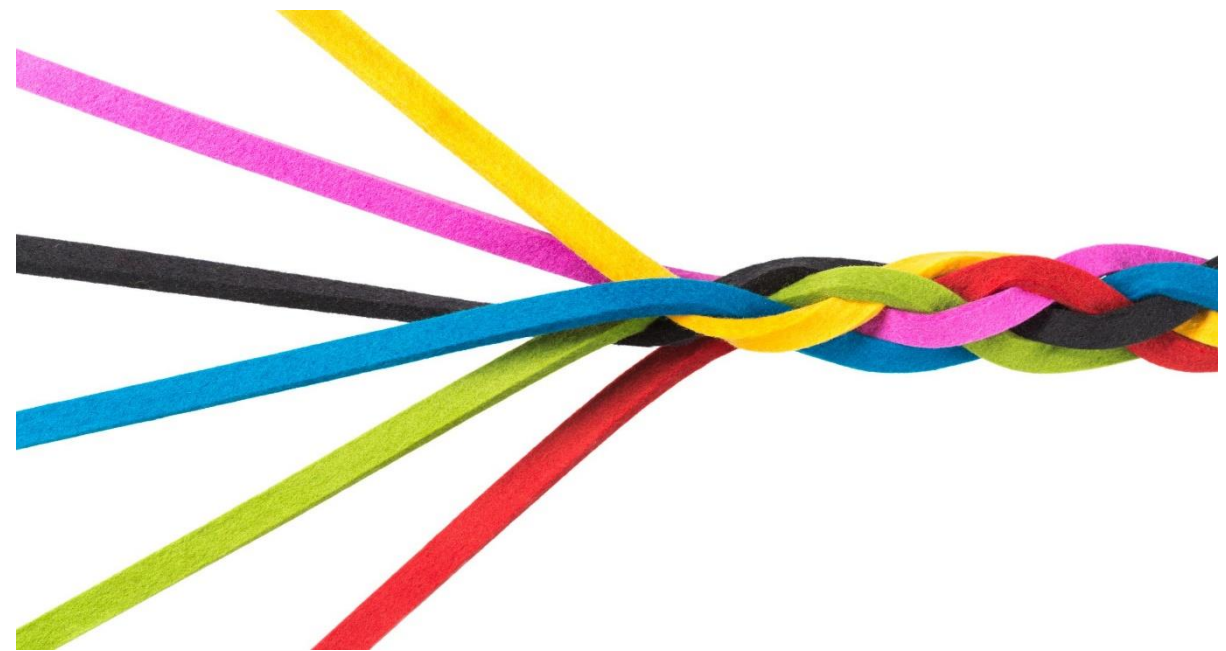
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Financial Sustainability: Braided Funding Strategies



- **Medicaid**
- **SAMHSA Block Grants**
- **Discretionary Grant Funding**
 - Vibrant Capacity Building Grant
 - Vibrant State 988 Planning Grant
 - SAMHSA 988 Cooperative Agreement
- **American Rescue Plan Act Funds**
 - Including Home and Community Based Funds
- **988 fee similar to 911?**
- **Medicare? Commercial Insurance?**



Equity, Inclusion, and Diversity in 988





What Does “All” Mean to Us?

Who is represented on the Equity Committee?

Immigrant Community

Deaf and Hard of Hearing Community

LGBTQ+++ Population

Rural Areas and Farm Communities

Persons with Disabilities- Intellectually and Developmentally

Incarcerated Community

Veterans

BIPOC Communities

Substance Use Disorder

Tribal Communities

Amish

Religious Communities

& many other groups and communities



What is the Equity Committee Working On?

Short term plan

Long term plan

Community engagement

Identifying gaps in services

Increasing access to 988 and support services





988 Committees: Answering Questions for the Infrastructure of the Indiana 988 Crisis Line

Who is at the table?



- NSPL Center Representatives
- First Responder Representatives
- Crisis and Suicide Intervention Representatives
- Intellectual and Developmental Disability Representatives
- Medicaid Representatives
- Community Mental Health Center (CMHC) Representatives
- NAMI Representatives
- Crisis Intervention Team Representatives
- Those with Lived Experiences
- Those with Extensive Knowledge of Local/State Resources
- Those with a Passion for Equitable and Accessible Mental Health Services and Criminal Justice Diversion



988 Planning Committees

Operations and
Training

- Developing standardized operational standards and training for Indiana's 988 Centers

Equity

- Ensuring that people in crisis are treated justly according to their circumstances

Marketing and
Education

- Improving public understanding and awareness of 988 services

Resources, Referrals,
and Linkages

- Ensuring 988 centers have up-to-date resources and linkage information

Goal of the 988 Planning Committees



Each committee's overall goal is to help realize the State of Indiana's vision for 988 which is to provide quick, competent, and nation-leading crisis response services for every Indiana resident.



911 and 988 Working Together to Serve All Indiana Residents

Forming Relationships and Understanding One Another



- 121 Public Safety Answering Points (PSAPs) in Indiana
- December 2021 all were invited to join a committee to look at interoperability
- Goal was to have representation from all 4 quadrants of the state, as well as central Indiana

First Meeting Held in January



- 24 members
- 21 counties represented
- All 4 quadrants and Central Indiana
- Representatives from the State 911 Board



Why did you commit to being a part of this working group?



- Suicide is one of the hardest calls that 911 dispatchers take, and dispatchers often feel uneasy to give the wrong response and advice to the caller.
- Indiana leads in many ways for 911, and 988 should do the same.
- COVID has increased behavioral health calls and it is time to change our response to the caller to give them better services.

Why did you commit to being a part of this working group?



- Set standards for Indiana.
- Personal family impact regarding suicide. If services would have been different then, what would the outcome have been?
- Importance of mental health and suicide prevention in our communities, workplaces, and society.
- To destigmatize mental health needs.

Our Work Together - 911/988 Interoperability Committee



- Bridging language barriers between PSAPs and 988 -Codes, signals, and behavioral health language
- Data Collection - different platforms within law enforcement
- Training - what is currently offered, when, and how vs. what do we want for the future
- What calls for service is 911 comfortable diverting to 988
- Understanding the role and training of 988 crisis specialists at our NSPLs

Growing CIT in Indiana

13 counties active, 8 planning, 6 interested, 2 modified, 1 MH training

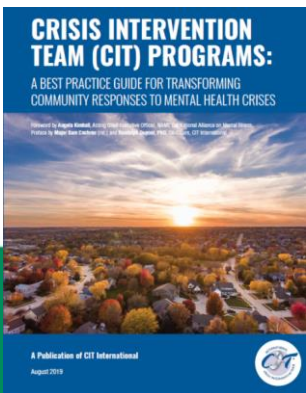
Crisis Intervention Team (CIT) Program Goals

To **improve safety during law enforcement encounters** with people experiencing a mental health crisis, for everyone involved.

To increase connections to **effective and timely** mental health services for people in mental health crisis.

To **use law enforcement strategically during crisis situations**—such as when there is an imminent threat to safety or a criminal concern—and increase the role of mental health professionals, peer support specialists, and other community supports.

To **reduce the trauma** that people experience during a mental health crisis and thus **contribute to their long-term recovery**.



Thank you!

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