

HB 1134:IMPLEMENTING THE 988 BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM

What does HB 1134 do?

- Increase public awareness of 988 crisis hotline through social media, development of informational material and signage at behavioral health agencies
- Develops recommendations on the creation of crisis workforce and resilience training collaboratives for the purpose of offering voluntary trainings for behavioral health crisis workers.
- Allows for 988 call center workers to have the same liability protection as 911 workers and liability protection for the transfer of calls between 911 and 988.
- Establishes endorsements for 988 rapid response crisis teams. Endorsed 988 teams to become primary response for 988 calls. Grant program created to support 988 response teams.

TALKING POINTS

- Washington state needs a robust crisis response system that can offer a full continuum of care across the state, especially in marginalized and rural communities.
- A NAMI poll in 2021 showed that 86% of Americans believe mental health crisis should receive a mental health response instead of police response.
- The NAMI poll also showed 85% of Black Americans say they would be afraid the police may hurt their loved ones or themselves. The lack of behavioral health prescribers disproportionately impacts BIPOC, low-income and rural communities.
- Americans remain largely unaware of the 988 emergency number, and just four percent report being familiar with it.
- SAMHSA reported in 2020 alone, the U.S. had one death by suicide about every 11 minutes and for people aged 10 to 34, suicide is the leading cause of death.
- Currently, 988 call center workers do not have liability protection like 911 workers. We need to protect our 988 crisis call center workers.

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