



# HOPE Has a New Number: 988

## The New Behavioral Health Crisis Number



### WHAT IS 9-8-8?

On October 17, 2020, the National Suicide Hotline Designation Act of 2020 was enacted. This act created a new number, 9-8-8, as a universal telephone number for national suicide prevention and a mental health crisis hotline system.

On July 16, 2022, 9-8-8 was activated across the U.S. All calls to 9-8-8 from Florida residents for assistance with suicide prevention and behavioral health crises are directed by telecommunications companies to Florida’s 12 National Suicide Prevention Lifelines.

### WHAT DOES FLORIDA NEED TO DO TO SUPPORT 9-8-8?

Every state was asked to submit a plan to implement the new 9-8-8 number by strengthening the capacity of its National Suicide Prevention Lifeline centers. Some of Florida’s 12 Lifeline centers are still under-staffed and under-funded and may not be able to respond to the increased volume expected when 9-8-8 goes into effect. This issue must be resolved to avoid long wait times or calls being transferred to a backup center that may be unfamiliar with local resources.

It is also vital that the state and local communities assist the Lifeline centers to work in concert with community behavioral health services, such as mobile response teams and centralized receiving facilities, to ensure that Florida residents in crisis receive a prompt and appropriate response to behavioral health crises.

### AN OPPORTUNITY TO INTERVENE EARLY AND EFFECTIVELY

The introduction of 9-8-8 is an opportunity for Florida to strengthen its overall crisis response system. Because people are linked to services and supported the first time they call 9-8-8, money is saved from repeated hospitalizations and other acute care services. Calls made to 9-8-8 and not 9-1-1 can relieve law enforcement agencies from responding to the vast majority of behavioral health crises. 9-1-1 can still be used to bring a law enforcement response in high-risk situations. Collaboration between 9-1-1 and Florida's Lifeline centers is essential.

### 3 KEY COMPONENTS OF AN EFFECTIVE CRISIS RESPONSE SYSTEM

#### NSPL LIFELINE CALL CENTERS

*Someone to Talk To*

Well-trained call-takers can effectively handle mental health, substance use, and suicidal crises, including by text and chat. Support is free and confidential.

Call-takers can refer callers to behavioral health providers for follow-up services.

Call-takers can send a mobile response team to address needs on-site.

#### MOBILE RESPONSE TEAMS

*Someone to Respond*

When an on-site response to a crisis is needed, Mobile Response Teams, staffed by trained clinicians and peers, can be deployed.

Mobile response teams can respond to crisis situations, arrange transportation to crisis stabilization, and connect people to services.

#### CRISIS STABILIZATION SERVICES

*A Place to Go*

Individuals in crisis can receive short-term (23 hour) stabilization services and be assessed at Centralized Receiving Facilities or other crisis stabilization centers.

Once stabilized, individuals can be linked to services in the community through the local Care Coordination system, avoiding the cost of repeated trauma and crises.



# 9-8-8 Q & A

## Is 9-8-8 a Florida number?

**NO.** 988 became active as a **nationwide** call number on July 16, 2022.

## Will 9-8-8 replace 9-1-1?

**NO.** 9-1-1 is still the number to call for most emergencies, such as reporting a crime in progress, a fire, or a life-threatening crisis.

9-8-8 should be used for behavioral health and suicide calls, thus relieving 9-1-1 of about 20% of their current calls and filling a gap in behavioral health crisis services that has existed since de-institutionalization.

9-8-8 can provide a *behavioral health response* for behavioral health crises.

## Will 9-8-8 replace 2-1-1?

**NO.** 2-1-1 offers vital community referrals to help people find food, shelters, healthcare, pay their bills, get help from disasters like hurricanes, apply for benefits, etc.

The majority of 2-1-1 call centers in Florida are also National Suicide Prevention Lifelines (NSPL), so they will receive both 2-1-1 and 9-8-8 calls.

## Should schools call 9-8-8?

**NO.** Public schools have their own school safety plans, which include protocols for helping students in crisis, including use of Mobile Response Teams.

## How do we pay for 9-8-8?

Florida's Lifeline centers have received some funding to expand their services, but more and continued funding will be required for staffing and infrastructure, as there will be an increase in the number of calls, texts and chats.



## What happens after a call to 9-8-8?

While most calls can be handled by the Lifelines, Mobile Response Teams and Crisis Stabilization Centers must be ready to provide an in-person response if needed.

We support work that identifies the gaps in the crisis response system and promotes collaboration between the Department of Children and Families and Agency for Health Care Administration (AHCA) to identify and leverage recurring funding sources.

## How will 9-8-8 save money?

The need for Emergency Room visits, hospitalizations, and police involvement will be lessened, because 9-8-8 links callers to behavioral health services in the community whenever possible.

Most crisis calls (about 85%) can be handled on the phone (or text or chat) thus saving the cost of sending crisis-care workers to the home.

Most importantly, death by suicide will be prevented and people needing behavioral health treatment will get help when and where they need it, avoiding repeated trauma, hospitalizations, incarcerations, and homelessness.

## The Florida 9-8-8 Advocacy Group

The Florida 9-8-8 Advocacy Group is a coalition of organizations that support building a comprehensive behavioral health crisis response system throughout Florida in conjunction with the 9-8-8 crisis call line.



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