

# Delaware 988 Planning & Implementation

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DHSS

May 25, 2021

New Castle County Council

Community Services Committee

# What is 988?

- A direct, national, three-digit line to connect millions of Americans in emotional crisis to get the help they need.

When you've got a police, fire or rescue emergency, you call 911.

When you have an urgent mental health need, you'll call 988.

- The requirement to transition to 988 as the National Suicide Prevention Hotline will take effect on July 16, 2022.
- By July 2022, calls to 988 will be directed to the National Suicide Prevention Lifeline (1-800-273-TALK), which will remain operational during and after 988 transition.

**30**  
Percent

The percent the suicide rate has climbed since 1999

**1 in 5**  


people above the age of 12 has a mental health condition

**316**

For every one person that dies by suicide annually, 316 people seriously consider suicide

# History & Significance

- Mental health and suicide prevention advocates seeking a national, easy to remember 3-digit number for individuals in crisis took their idea to their state leaders and Members of Congress.
- Aug 2019: FCC Commission report to Congress recommending 988 for Americans in crisis to connect with suicide prevention and mental health counselors.
- Dec 2019: FCC initiates rulemaking to designate 988.
- Jul 2020 FCC adopted rules designating 988 with a July 2022 deadline for telecom providers to direct all 988 calls to the existing National Suicide Prevention Lifeline.

To learn more, visit: <https://www.fcc.gov/suicide-prevention-hotline>

# How will 988 increase crisis call volume?

## Baseline

- Assumed moderate steady growth rate of 7%.
- Based on historical lifeline volume patterns.

## Diverted Volume

- Assumed growth rate of 1% first year, increased to 20% in year 5.
- Assumed diversion rate 23-30% from current helplines in Y1 to 69-90% in Y5. Diversion from 911 from 1-2% in Y1 to 10-30% in Y5.
- Based on historical patterns and assumptions and literature.

## New Volume

- Driven by marketing and awareness.
- Assumed growth rate of 2-5% first year, increased to 5-15% in year 5.
- Based on estimated share of serviceable population not historically served, and experience from similar service rollouts in Australia and the UK.

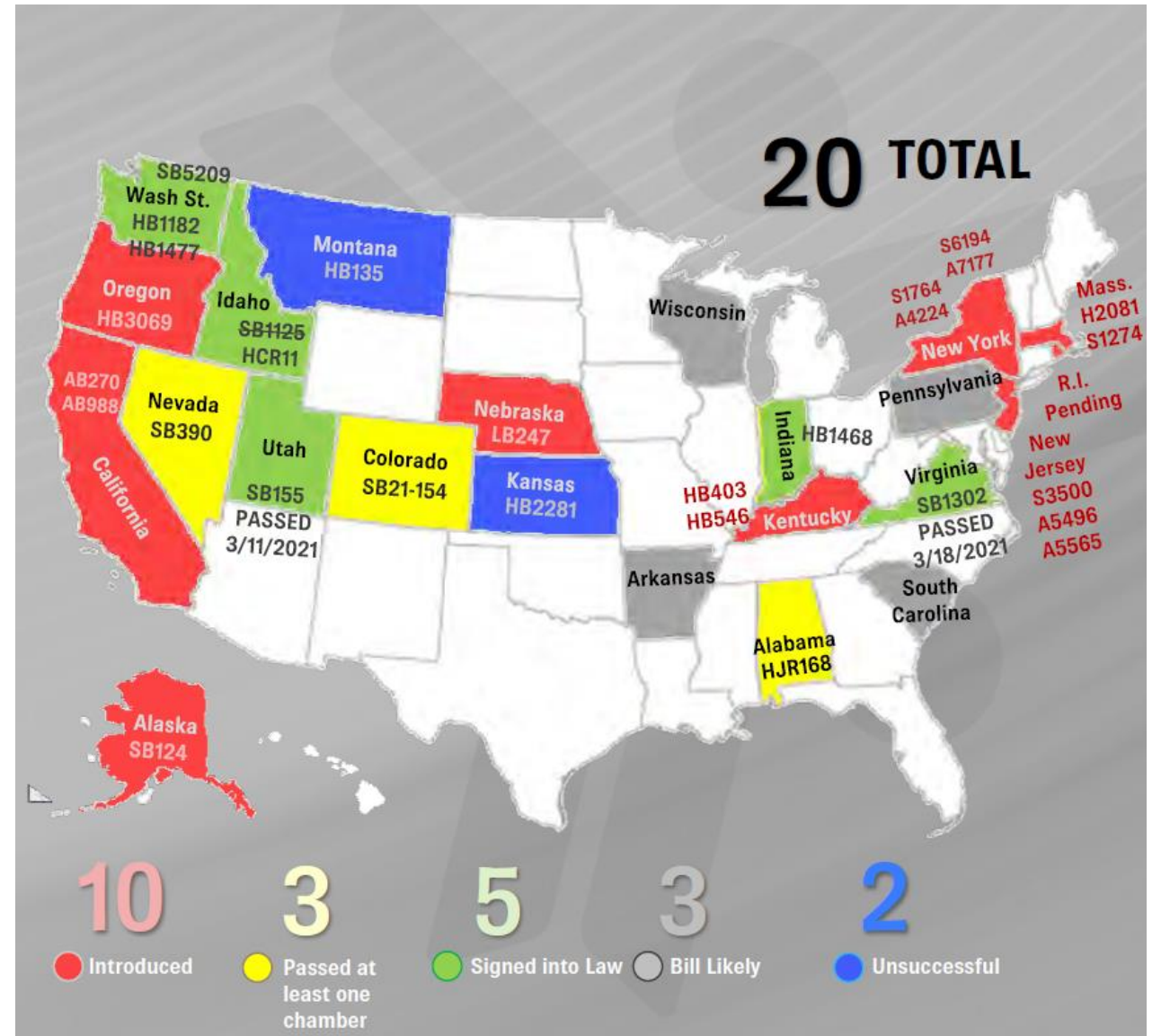
# Legislative activities across the country

States can levy fee on mobile and IP enabled services to be used for 988 crisis centers and related services.

State has authority to issue fees and should evaluate telecommunications surcharge parameters, parity and cost arguments, and implementation dates.

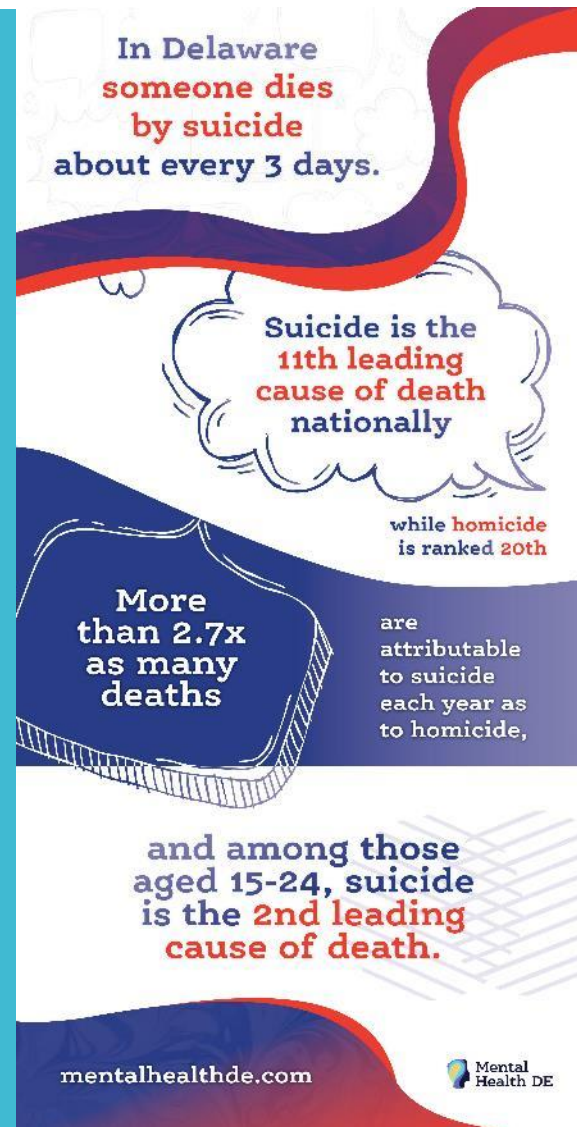
Many states have been introducing 9-8-8 legislation.

- See [NAMI 988 legislation tracker](#)



Source: Presentation on May 12, 2021 to the 988 Crisis Services Learning Community by Laura Evans (Vibrant) & Angela Kimball (NAMI) .

# What is Delaware's Suicide and Mental Health Crisis Response System like?



In Delaware **someone dies by suicide** about every 3 days.

Suicide is the **11th leading cause of death nationally**

while **homicide** is ranked **20th**

More than **2.7x** as many deaths are attributable to suicide each year as to homicide,

and among those aged 15-24, suicide is the **2nd leading cause of death.**

mentalhealthde.com

Mental Health DE

The infographic features a stylized profile of a person's head in white and blue, with a red and blue wavy line representing a ribbon or hair. Text is placed within and around these shapes. The website URL and logo are at the bottom.

- Suicide was the 11th leading cause of death in Delaware overall in 2019, but among top 5 for people younger than 55. 48.4% of firearm deaths were suicides.
- Three main MH crisis hotline/response services in Delaware:
  - ContactLifeline, Inc. (1-800-273-TALK)
  - Adult Crisis Response (DSAMH):
    - 1-800-652-2929 for Northern Delaware
    - 1-800-345-6785 for Southern Delaware
  - Youth Crisis Response (Guidance/DPBHS):
    - 1-800-969-HELP
- Other resources:
  - Veterans Affairs/Military
  - Behavioral health providers
  - 911

# Key Elements of 988 Planning Grant



## 8 Core 988 Planning & Implementation Principles

- 24/7 coverage (calls, chats and text)
- Financial stability
- Capacity building
- Operational, clinical and performance standards
- Multi-stakeholder coalition
- Linkage to local crisis services
- Follow-up services
- Alignment in public messaging

Community of Practice and Technical Assistance

# Planning for 988 Implementation in Delaware

- 988 Planning & Implementation Coalition
  - 10-month planning grant from Vibrant
  - Leveraging cross-agency partnerships, incl. Delaware Suicide Prevention Coalition
  - Monthly meetings
  - Workgroups

- Phased approach

Analysis & engagement

Exploration & envisioning

Strategizing & action



# A Cross-sectoral Partnership



# 988 Workgroups

## Technology & Routing

- What technology infrastructure is required to route 988 calls, text, and chats? What is the logistics of serving special populations?
- How will 911 calls and law enforcement activities be integrated?
- How would a request to dispatch mobile crisis teams be directed?
- What are the data and performance metrics?
- What is the staffing need and costs?

## Care Operation & Logistics

- What are the standard procedures for mobile crisis dispatch?
- Where should clients who need additional services be directed?
- How can follow-up care be coordinated?
- What is the staffing need and costs?

## Funding & Legislative Needs

- What are existing and new funding streams to support 988 implementation and sustainability?
- What is the feasibility of implementing 988 fees and how will it work?
- Are there legal and contractual issues that need to be addressed regarding licensing, privacy protection, and data sharing?

## Communications

- How to disseminate information in alignment with national 988 campaigns.
- Who are the key partners and channels for public messaging and engagement?
- Should there be specific campaigns targeted at specific populations?
- How do we evaluate marketing campaigns?
- What is the staffing need and costs?

# This is the moment: Coordinated Crisis Care Continuum



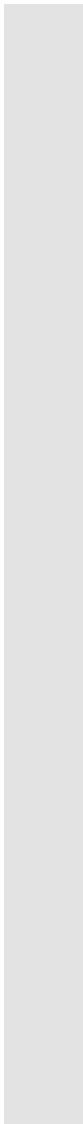
Someone to  
Talk to

Someone to  
Respond

Somewhere to  
Go

Thank you

- Claire Wang ([claire.wang@delaware.gov](mailto:claire.wang@delaware.gov))



## Delaware 988 Planning Coalition

As of 5/20/2021

ORGANIZATION	REPRESENTATIVE
<b>ContactLifeline, Inc. - Delaware's NSPL call center</b>	Dr. Jackie Cousin, Executive Director
<b>National Alliance on Mental Illness (NAMI)</b>	Dr. Josh Thomas, Executive Director; Annie Slease, Director of Advocacy
<b>9-1-1 – Delaware State Police &amp; Department of Corrections</b>	Joseph Mulford, Assistant Chief of Communications; Vanessa Bennifield & Michael Records, DOC Bureau of Healthcare, Substance Abuse and Mental Health Services
<b>Mental Health Association of Delaware (MHA)</b>	Jennifer Seo, Deputy Director; Jennifer Smolowitz, Suicide Prevention Coalition Coordinator
<b>Recovery Innovations International (RI)</b>	Natascha Hughes, State of Delaware Director
<b>Community Advocates</b>	Elizabeth Booth, Community Legal Aid; Barbara Antlitz, Camp Rehoboth; Lydia Deleon, Westside Family Healthcare; Dr. Jon Cooper, Colonial School District; Pamela Ann, Community Advocate; LaVaida Owens White, Faith Community; Elisa Dillar, Elected Official
<b>Lt. Governor's Office</b>	Sydney Garlick, Behavioral Health Coordinator
<b>Military &amp; VA Partners</b>	Lauren Unrath & Christine Kubik, Delaware National Guard; Kent Johnson & Matthew Jacobs, Department of Veteran Affairs; Craig Gilbert, Dover Air Force Base
<b>TA Provider</b>	Linda Langford, EDC, Grant Manager; Kat Olbrich, American Foundation for Suicide Prevention
<b>Delaware Department of Health and Social Services (DHSS)</b>	-Division of Substance Abuse and Mental Health: Claire Wang, Associate Deputy Director; Glenn Owens, Administrator of Crisis Services; Nuno Martins, Behavioral Health Administrator; Joe Aronson, Chief of Governmental and Interagency Relations; Lisa Johnson, Senior Advisor Informatics; Samantha Parker, Contractor -Division of Public Health: Amanda Bundek, Epidemiologist II -Division of Management Services: Amy Herb, Planner IV;
<b>Delaware Department of Services for Children, Youth and their Families (DSCYF)</b>	Division of Prevention and Behavioral Health Services: Aileen Fink, Director; Jandy Albury, Mental Health Program Administrator II; Malia Boone, MRSS Youth Crisis Services Program Manager-contractor