

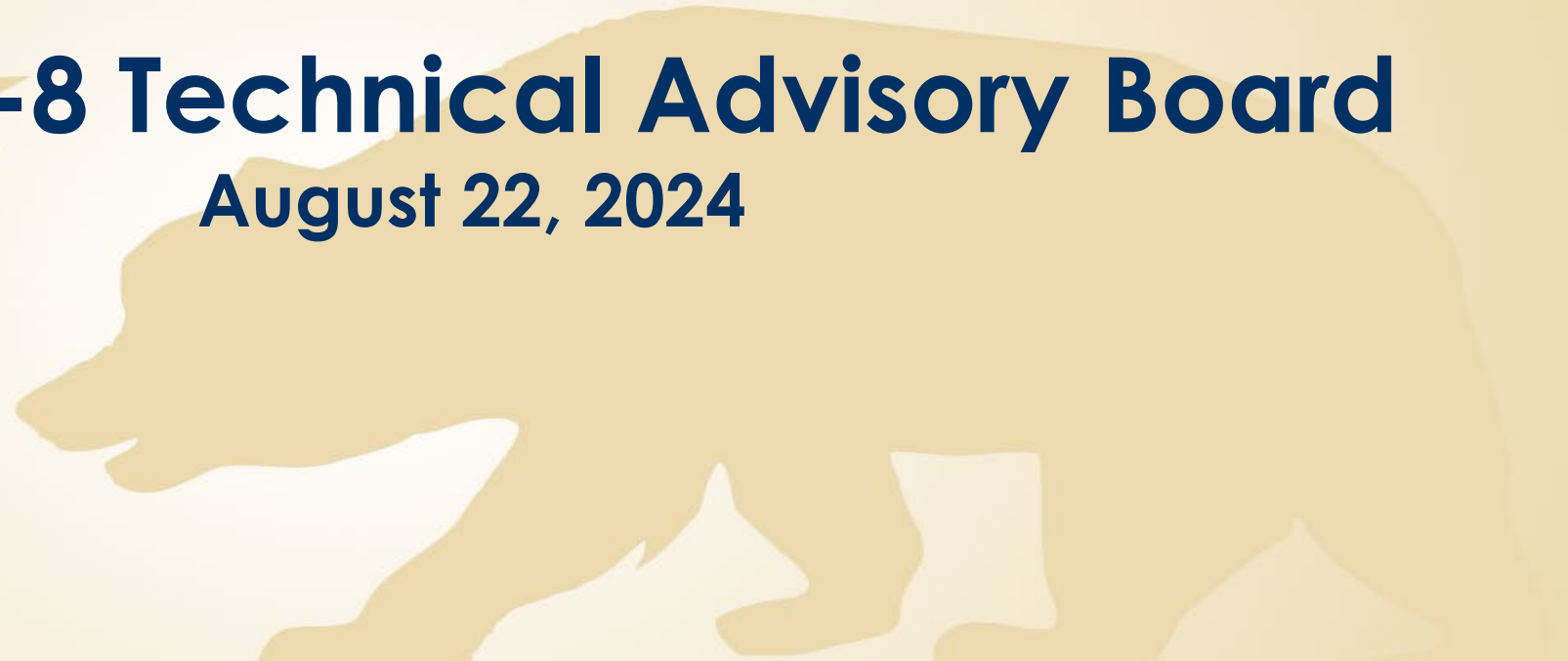


***Cal* OES**

GOVERNOR'S OFFICE
OF EMERGENCY SERVICES

State 9-8-8 Technical Advisory Board

August 22, 2024





Item 1: Welcome and Call to Order

Members of the Board

- Chair – Budge Currier, Governor's Office of Emergency Services (Non-voting)
- Dr. Anh Thu Bui, California Health and Human Services (CHHS)
- Dr. Eric Rafla-Yuan, UC San Diego School of Medicine
- Joe Sullivan, Chief Information Officer, Emergency Medical Services Agency (EMSA)
- Terri Galvan, Suicide Prevention Services, Wellspace Health
- Julian Aragon, DiDi Hirsch Mental Health Services
- Lan Nguyen, Crisis and Suicide Prevention Lifeline Manager, Santa Clara County
- Kristin Miller, Riverside Health Services, Behavioral Health Services Administrator
- Ametrius Sidney, California National Emergency Number Association (CALNENA)
- Jeff Hebert, California Public Safety Radio Association (CPRA)
- Tracy Gonzales, Ontario Fire Communications Manager
- Jennifer Kenton, Campbell Police Department Communications Supervisor
- Erinn Riley, Contra Costa County Sheriff Dispatch Supervisor
- Vacant, California Commission on Peace Officer Standards and Training (POST)
- Cerena Lewis, California Professional Firefighters



Item 1: Roll Call and Quorum

Bagley-Keene Open Meeting Act Updates

- Effective January 1, 2024, a quorum can only be established if a majority of the members of the board are in person.
- Remote participants cannot be counted to establish a meeting quorum*.
- Remote participants do count toward a majority to avoid a “serial” or “unofficial” meeting.
- Moving forward all meetings will be held in person in Sacramento, CA.

<https://oag.ca.gov/system/files/media/bk-open-meeting-act-guide-2023.pdf>

https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=GOV&division=3.&title=2.&part=1.&chapter=1.&article=9

*Note, remote member may count towards the quorum if they meet the requirements of Gov. Code 11123.2(j)(2).



Item 2: Approval of Previous Minutes

May 2024 meeting minutes:

- Meeting held on May 16, 2024, in person at 630 Sequoia Pacific Blvd, Sacramento, CA



Item 3: Legislative Update

Cal OES Legislative and External Affairs will provide information regarding legislation that may impact California's 9-8-8 system.



Item 4: Working Group Reports

The CA 9-8-8 Technical Advisory Board Working Groups will provide a report on the activities completed since the last meeting:

- 9-8-8 and 9-1-1 Interface Working Group Report: *Jeff Hebert and Tracy Gonzales*
- *During November's meeting, the 9-8-8 TAB will discuss and vote to approve the 9-1-1/9-8-8 transfer guidance document*
- Accessibility & Equal Access Working Group Report: *Dr. Anh Thu Bui and Dr. Eric Rafla-Yuan*



Item 5: Cal OES 9-8-8 Report

The Cal OES 9-8-8 System Director will provide updates regarding:

- Item 5-1: Statewide 9-8-8 CHS and CRM status
- Item 5-2: 9-1-1 to 9-8-8 Interface
- Item 5-3: SETNA 9-8-8 Surcharge
- Item 5-4: AB 988 Milestones

www.caloes.ca.gov/988



Item 5-1: Statewide 9-8-8 CHS and CRM Status

- Testing with Vibrant completed 5/2/24:
 - Validated call, chat, and text workflows
 - Compliant with all requirements identified by SAMHSA and Vibrant
 - Validated ability to provide reporting as directed by SAMHSA
- Waiting for approval from SAMHSA to begin phased deployment
 - Phased deployment will take minimum of 6 months after approval
 - Life-saving capabilities will dramatically improve 9-8-8 in California
- 9-8-8 Mobile Dispatch RFP has entered the negotiation phase, with anticipated contract award in September 2024.



Item 5-2: 9-1-1 to 9-8-8 Interface

GC 53123.2 (c) No later than July 1, 2024, the office shall verify interoperability between and across 9-1-1 and 9-8-8. This shall include verifying interoperability of telephone calls, texts, chats, and other similar capabilities consistent with the implementation of Next Generation 9-1-1.

- Defining the 9-1-1 to 9-8-8 Technical Interface
 - Cal OES verified full interoperability between the California Next Generation 9-1-1 System and the California 9-8-8 System during laboratory testing. The certification was issued on April 30, 2024.
 - Interoperability capabilities will be deployed to all 12 centers after receiving approval from SAMHSA to deploy the 9-8-8 technology.



Item 5-3: SETNA 9-8-8 Surcharge

- The 9-8-8 surcharge was set at \$0.08 for 2023 and 2024 by state statute.
- For 2025 and beyond, the fee must be calculated.
 - Budget requests are sent to Department of Finance for eligible expenditures for the 9-8-8 surcharge
 - **The CA State Legislature approves the budget, which sets the revenue that must be generated from the 9-8-8 surcharge**
 - Access line service providers send number of access lines to Cal OES
 - 9-8-8 surcharge is based on the budget and number of access lines
 - Letter is sent to CDTFA by October of each year



Item 5-3: SETNA 9-8-8 Surcharge and the Fund Condition Statement FY 2024-25

3414 988 State Suicide and Behavioral Health Crisis Services Fund^S

BEGINNING BALANCE	-	\$24,728	\$13,153
Adjusted Beginning Balance	-	\$24,728	\$13,153
REVENUES, TRANSFERS, AND OTHER ADJUSTMENTS			
Revenues:			
4140505 Suicide and Behavioral Health Telephone Surcharge	\$24,506	44,276	44,276
Total Revenues, Transfers, and Other Adjustments	\$24,506	\$44,276	\$44,276
Total Resources	\$24,506	\$69,004	\$57,429
EXPENDITURE AND EXPENDITURE ADJUSTMENTS			
0530 Secretary for California Health and Human Services Agency (State Operations)	-	5,500	-
0690 Office of Emergency Services (State Operations)	-	9,632	9,648
0690 Office of Emergency Services (Local Assistance)	-	20,280	20,280
4260 State Department of Health Care Services (State Operations)	-	773	728
4260 State Department of Health Care Services (Local Assistance)	-	19,000	12,500
7600 California Department of Tax and Fee Administration (State Operations)	78	666	622
Less funding provided by General Fund (State Operations)	-300	-	-
Total Expenditures and Expenditure Adjustments	-\$222	\$55,851	\$43,778
FUND BALANCE	\$24,728	\$13,153	\$13,651
Reserve for economic uncertainties	24,728	13,153	13,651



Item 5-3: SETNA 9-8-8 Surcharge Calculation Example – Draft

Description	Ref.	Amount
Authorized Budget Expenditure	B1	\$43,778,000
Revenue Needed for Next Budget Year	B2	\$43,778,000
<u>Estimated Number of Access Lines</u>	<u>B3</u>	<u>46,513,154</u>
Surcharge Per Month	B4	\$0.08
Projected Annual Revenue	B5	\$44,652,627

**Note: The number of access lines for 2023 is unknown
The table shows an estimated number of access lines**



Item 5-4: 9-8-8 Implementation Milestones

9-8-8 Technical Advisory Board Tasks

GC 53123.2 (2) (A) Establish and convene the State 988 Technical Advisory Board for purposes of advising the office on the following:

- (i) Recommendations on the feasibility and plan for sustainable interoperability between 988, 911, and behavioral health crisis services, including the identification of any legal or regulatory barriers to the transfer of 911 calls.
- (ii) The development of technical and operational standards for the 988 system that allow for coordination with California's 911 system.
- (iii) The creation of standards and protocols for when 988 centers will transfer 988 calls into the "911" public safety answering points or points (PSAP), and vice versa.



Item 5-4: 9-8-8 Implementation Milestones – Center Visits

- Purpose
 - Establish collaboration and communication between newly appointed Cal OES 9-8-8 Director and each 9-8-8 Center
- 8 visits completed
- Insights:
 - Day to day business operations
 - Unique challenges, but also innovative solutions
 - Desire for both leadership and an advocate



Item 6: CHHS Updates

CHHS will provide an update on 9-8-8 related activities



**Update on 988-crisis
project to
Cal OES
Technical Advisory
Board**

August 22, 2024

Anh Thu Bui, MD
Project Director, 988-Crisis Care Continuum

Agenda

- CalHHS 988-Crisis Project highlights
- 988-Crisis Policy Advisory Group and Workgroup Updates
- Draft Recommendations – highlights, potential intersection with Cal OES Technical Advisory Board's work
- Next Steps



CalHHS 988- Crisis Project highlights



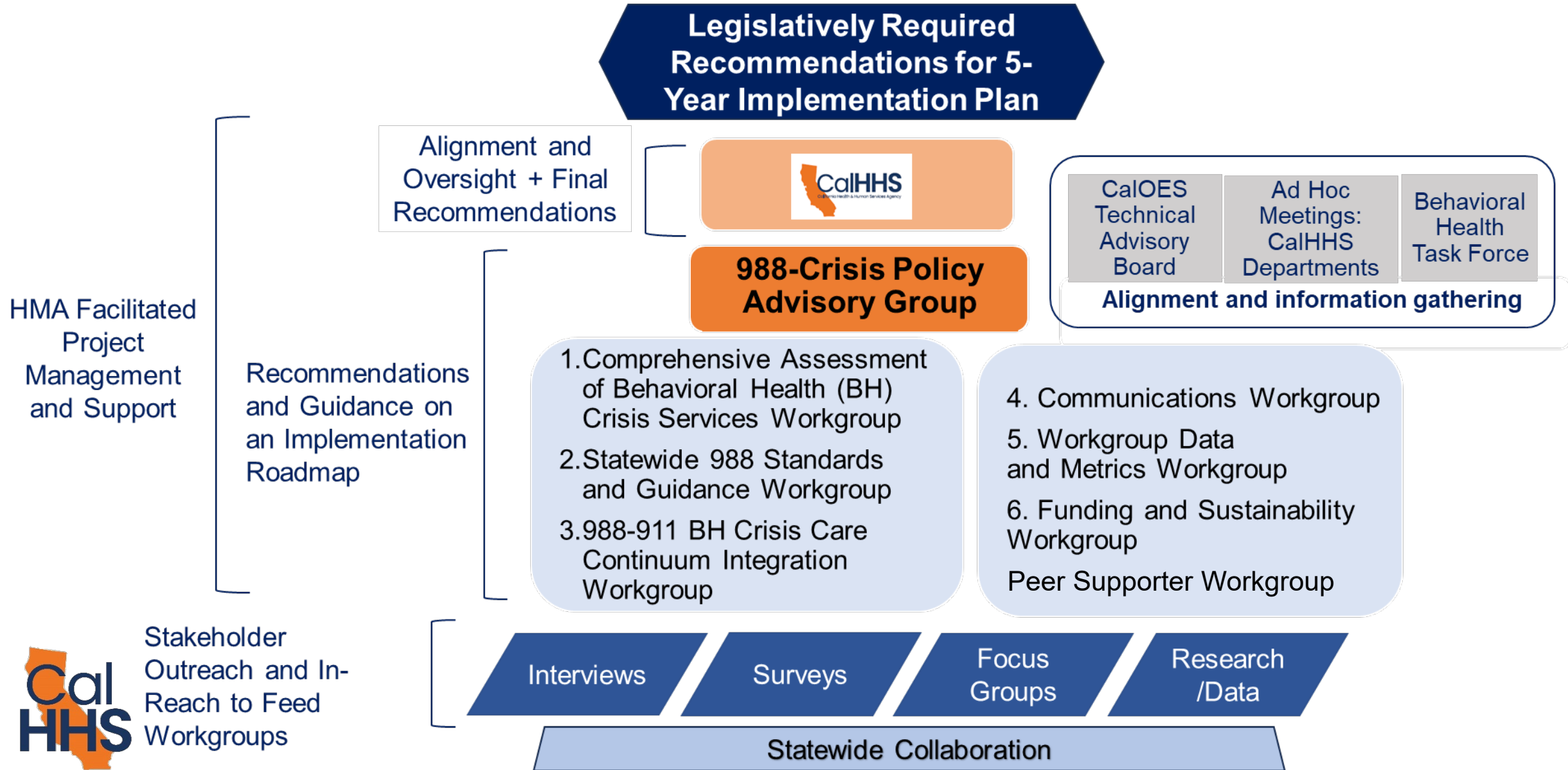
AB 988 Legislation

The Miles Hall Lifeline and Suicide Prevention Act was authored by Assemblymember Bauer-Kahan (AD-16) and enacted in September 2022:

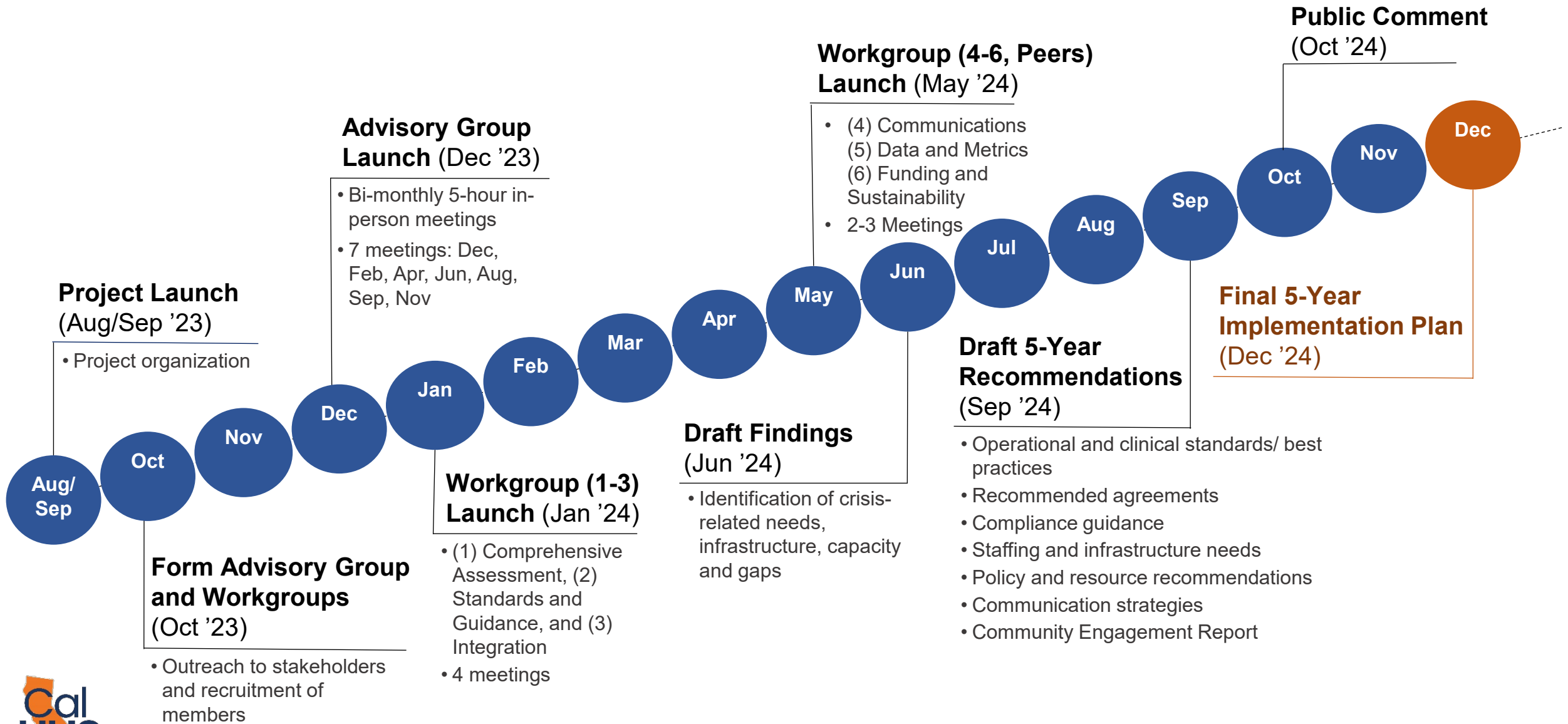
- Creates the 988 State Suicide and Behavioral Health Crisis Services Fund via surcharges on telecom per access line per month
- Requires the California Governor's Office of Emergency Services (Cal OES) to convene a state 988 Technical Advisory Board
- Requires CalHHS to convene a state 988 policy advisory group (988-Crisis Policy Advisory Group) to advise on a set of recommendations for the five-year implementation plan for a comprehensive 988 system by December 31, 2024
 - AB 988 underwent further modifications in [AB 118](#), the trailer bill that incorporates the implementing language of the California State Budget.
 - Requires CalHHS to post regular updates, no less than annually, regarding the implementation of 988 on its public internet website, until December 31, 2029



AB 988 Organizing Structure



Key Milestones



Policy Advisory Group Meeting Schedule

#	Topics	Date
1	<ul style="list-style-type: none"> Orientation to the Process and Workgroups Relationship Building 	12/13/23
2	<ul style="list-style-type: none"> Grounding in CCC-P and Comprehensive Assessment Approach Breakouts on Access, Equity, Coordination 	2/7/24
3	<ul style="list-style-type: none"> Information from Comprehensive Assessment Draft recommendations for Standards and Guidance and Integration 	4/24/24
4	<ul style="list-style-type: none"> Discussion of Data, Goals and Metrics Draft recommendations for Communications 	6/26/24
5	<ul style="list-style-type: none"> Discussion of Community Engagement Continued discussion of other emerging recommendations 	8/14/24
6	<ul style="list-style-type: none"> Review draft 5-year implementation plan Review finance and sustainability, governance, peers 	9/18/24
	PUBLIC COMMENT PERIOD	October 2024
7	Final Policy Advisory Group Meeting: review of the implementation plan	11/20/24



988-Crisis Policy Advisory Group and Workgroup Updates



AB 988: 988-Crisis Policy Advisory Group (PAG)

Members of the 988-Crisis Policy Advisory Group must include:

- Department of Health Care Services
- The Office of Emergency Services
- State Department of Public Health
- Representatives of counties
- Representatives of employees working for county behavioral health agencies and agencies who subcontract with county BH agencies who provide these services
- 988 Centers
- Health plans
- Emergency medical services
- Law enforcement
- Consumers, families, and peers
- Other local and statewide public agencies.



988-Crisis Policy Advisory Group Members

Amanda Levy, Deputy Director for Health Policy and Stakeholder Relations, California Department of Managed Health Care (DMHC)

Anete Millers, Director of Regulatory Affairs, California Association of Health Plans (CAHP)

Ashley Mills, Assistant Deputy Director, Community Wellness, California Department of Public Health (CDPH)

Bianca Christian, Associate Therapist, California Coalition for Youth*

Brenda Grealish, Executive Officer, Council on Criminal Justice and Behavioral Health (CCJBH)

Budge Currier, Assistant Director, Public Safety Communications California Governor's Office of Emergency Services (Cal OES)

Chad Costello, Executive Director, California Association of Social Rehabilitation Agencies (CASRA)

Christine Stoner-Mertz, Chief Executive Officer, CA Alliance of Child and Family Services

Doug Subers, Director of Governmental Affairs, California Professional Firefighters

Elizabeth Basnett, Director, California Emergency Medical Services Authority (EMSA)

Erika Cristo, Assistant Deputy Director, California Department of Health Care Services (DHCS)

Dr. Jana Lord, Chief Operating Officer, Sycamores

Jeff Hebert, 911 Communications Coordinator, San Diego Sheriff's 911

Jennifer Oliphant, Hope for Tomorrow Program Director, Two Feathers Native

American Family Services

Jessica Cruz, Chief Executive Officer, NAMI - California

John Boyd, Vice President Behavioral Health and Wellness, Kaiser Permanente, NCAL

Kasey Suffredini, Senior Vice President of Prevention, The Trevor Project

Kenna Chic, former President of Project Lighthouse

Keris Jän Myrick, Vice President of Partnerships, Inseparable (Mental Health Advocacy and Programs)

Kirsten Barlow, Vice President, Policy, California Hospital Association (CHA)

Lan Nguyen, Division Manager, Crisis and Suicide Services, County of Santa Clara Behavioral Health Services Department

988-Crisis Policy Advisory Group Members

Lei Portugal Calloway, Certified Medi-Cal Peer Support Specialist, Telecare Orange County

Melissa Lawton, Chief Program Officer, Seneca Family of Agencies

Michael Tabak, Lieutenant, San Mateo County Sheriff's Office*

Michelle Doty Cabrera, Executive Director, County Behavioral Health Directors Association (CBHDA)

Miguel Serricchio, Executive Vice President, LSQ Funding Group

Nancy Bargmann, Director, California Department of Developmental Services

Phebe Bell, Behavioral Health Director, Nevada County

Rayshell Chambers, Commission Member, Mental Health Services Oversight and Accountability Commission (MHSOAC)

Rebecca Bauer-Kahan, CA State Assemblymember/Author of AB988, State of California, AD 16

Rhyan Miller, Behavioral Health Deputy Director, Riverside County

Robb Layne, Executive Director, California Association of Alcohol and Drug Program Executive, Inc (CAADPE)*

Robert Smith, Chairman, Pala Band of Mission Indians

Roberto Herrera, Deputy Secretary, Veterans Services Division, California Department of Veterans Affairs (CalVet)

Ryan Banks, CEO, Turning Point of Central Valley, Inc.

Shari Sinwelski, Vice President of Crisis Care, Didi Hirsch

Sohil Sud, Director, Children and Youth Behavioral Health Initiative, California Health & Human Services Agency

Stephanie Welch, Deputy Secretary of Behavioral Health, California Health and Human Services Agency (CalHHS)

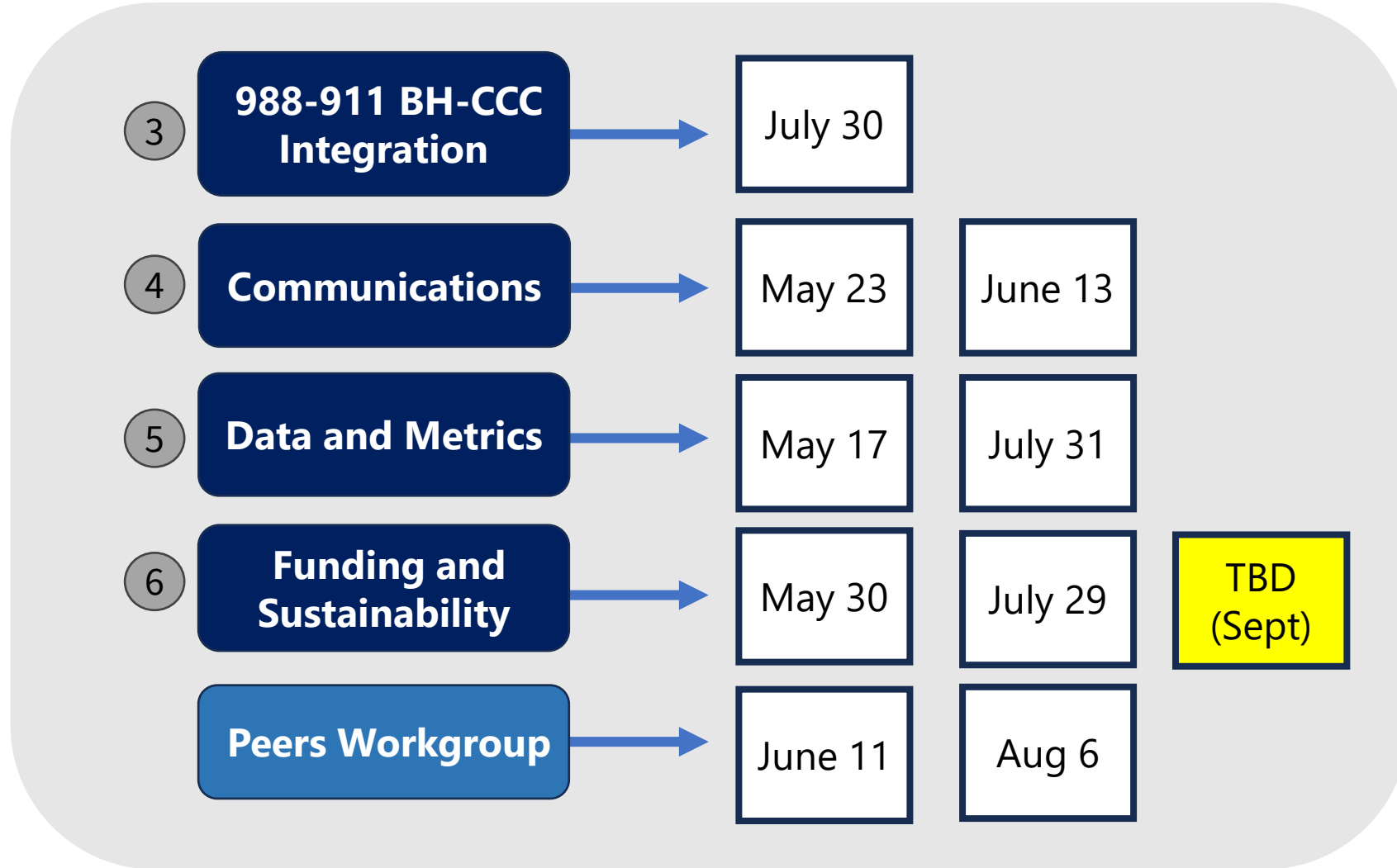
Stephen Sparling, California Coalition for Youth

Susan DeMarois, Director of California Department of Aging (CDA)

Tara Gamboa-Eastman, Director of Government Affairs, Steinberg Institute

Taun Hall, Executive Director, The Miles Hall Foundation

Workgroups





Draft Recommendations



Desired Outcomes of the Future CA Crisis System: PAG and Workgroup Input

The Future State... (Adapted from the CCC-P)	Characterized by...
Consistent statewide access	<ul style="list-style-type: none"> ▪ Increased capacity, affordability, and range of services ▪ Connecting people in crisis to immediate and ongoing care
High quality services	<ul style="list-style-type: none"> ▪ An array of essential crisis services across the continuum ▪ A comprehensive strategy for data measurement and quality of care that is inclusive of all populations and geographies
Coordination across and outside the continuum	<ul style="list-style-type: none"> ▪ Offering the least restrictive responses to crisis ▪ Robust formal and informal community-based partnerships
Serves the needs of <i>all</i> Californians	<ul style="list-style-type: none"> ▪ Services that are culturally and linguistically responsive ▪ Services that are person- and family-centered ▪ Services that are delivered regardless of insurance/payer source

988 5-Year Implementation Plan

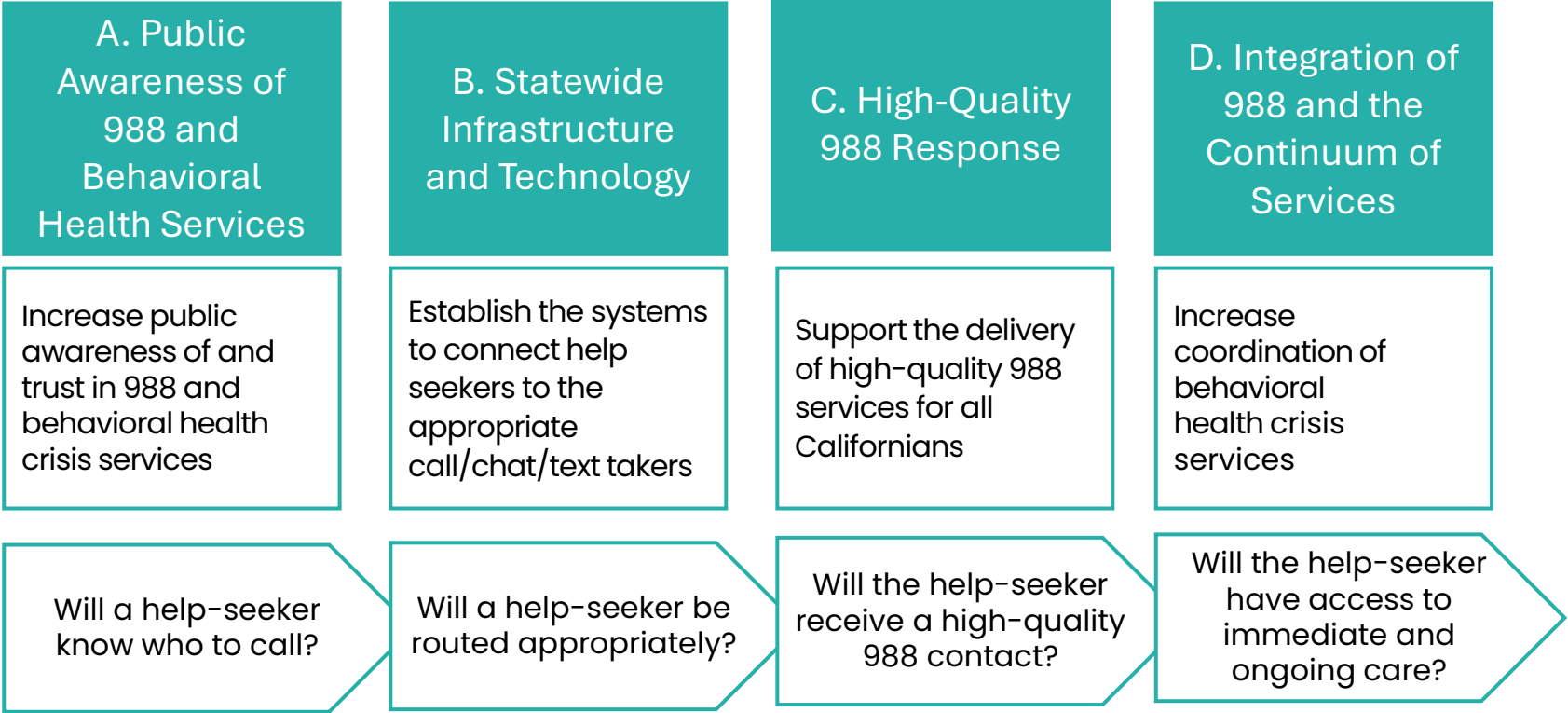
- The Implementation Plan is grounded in recommendations by the Policy Advisory Group to the State (via a set of “should” statements)
- The focus of the Plan is on the integration of 988 Crisis Lines into the Crisis Care Continuum in alignment with AB988 and related funding
- The plan and the work over the last months have highlighted key issues and areas across the continuum that need to be resolved over the 5-year planning and beyond
- The draft implementation activities focus on areas where the state has responsibility and accountability for coordinating behavioral health transformation efforts – at various stages of development – at a statewide level
- To get to a next level of detail on implementation activities will require time, resources, and ongoing discussion

Organizing Framework – Foundational Principles

1. All Californians, regardless of insurance coverage, location, or other factors, should have timely access to quality crisis care.
2. Californians should have access to 988 through phone, text and chat 24/7 with calls answered, whenever possible, in state by 988 Crisis Centers with knowledge of how to connect with local resources
3. Individuals in crisis should have access to timely therapeutic/appropriate care (and reduce unnecessary law enforcement involvement where possible)

VISION
Equitable, Accessible, High-Quality Behavioral Health Crisis System for All Californians

GOALS



CROSS CUTTING RECOMMENDATIONS



Cal OES TAB/CalHHS Policy Advisory Group Topic Alignment

(i) Recommendations on the feasibility and plan for sustainable interoperability between 988, 911, and behavioral health crisis services, including the identification of any legal or regulatory barriers to the transfer of 911 calls.

- (4) A state governance structure to support the implementation and administration of behavioral health crisis services accessed through 988.
- (5) 988 infrastructure, staffing, and training standards that will support statewide access to crisis counselors through telephone call, text, and chat, 24 hours per day, seven days per week.
- (6) Access to crisis stabilization services and triage and response to warm handoffs from 911 and 988 call centers.
- (9) Recommendations to achieve coordination between 988 and the continuum of behavioral health crisis services...

Corresponds to 988-Crisis Workgroups 2, 3 and 6

GOAL B: Statewide Infrastructure and Technology

GOAL C: High quality 988 response

GOAL D: Integration of 988 and the continuum of services

Cal OES TAB/CalHHS Policy Advisory Group Topic Alignment

(ii) The development of technical and operational standards for the 988 system that allow for coordination with California's 911 system.

(3) Compliance with state technology requirements or guidelines for the operation of 988.

Corresponds to 988-Crisis Workgroup 2

GOAL B: Statewide Infrastructure and Technology

Cal OES TAB/CalHHS Policy Advisory Group Topic Alignment

(iii) The creation of standards and protocols for when 988 centers will transfer 988 calls into the "911" public safety answering point or points (PSAP), and vice versa.

Corresponds to 988-Crisis Workgroups 2 and 3

GOAL B: Statewide Infrastructure and Technology

(1) SAMHSA requirements and national best practices guidelines for operational and clinical standards, including training requirements and policies for transferring callers to an appropriate specialized center, or subnetworks, within or external to, the National Suicide Prevention Lifeline network.

(9) Recommendations to achieve coordination between 988 and the continuum of behavioral health crisis services. Recommendations shall address strategies for verifying that behavioral health crisis services are coordinated for a timely response to clearly articulated suicidal or behavioral health contacts made or routed to 988 services as an alternative to a response from law enforcement, except in high-risk situations that cannot be safely managed without law enforcement response and achieving statewide provision of connection to mobile crisis services, when appropriate, to respond to individuals in crisis in a timely manner.



Goal B: Statewide Infrastructure and Technology

Establish the systems to connect help seekers to the appropriate call/chat/text takers

Recommendation	Implementation Activities
<p>B.1. The technology should be in place to route 988 contacts safely and efficiently anywhere in California (including to mobile crisis dispatch)</p>	<ul style="list-style-type: none">a. Deploy the state technology platform to the 988 Crisis Centers and provide associated trainingb. Continue to build the technology platform to enable system interoperability and enhance coordination across the crisis care continuumc. Provide the Customer Relationship Management (CRM) and/or mobile crisis dispatch tool to support connection of help seekers to community-based crisis responsed. Implement improvements to the technology based on geo-routing rulemaking
<p>B.2. The State should develop guidance and related policy to connect and transfer help seekers to the appropriate call/text/chat support, including for transfers between 988 and 911 and between 988 Crisis Centers and other crisis service access points and helplines</p>	<ul style="list-style-type: none">a. Provide feedback on transfer criteria between 911-988 developed by the CalOES TAB 911/988 Interface Working Groupb. Develop guidance for transfers between 988 and other lines (e.g., 211, County Access Lines, Warmlines)c. Develop guidance for transfers between 988 and mobile crisis dispatch lines

Goal B: PAG Input

- Some words and phrases would benefit from definitional clarity (e.g., interoperability, geo-routing, geo-location).
- There was a suggestion to shift language to be more focused on consumer outcomes.
- Regarding the technology platform:
 - The platform needs to evolve to meet needs of both help seekers and call takers and innovations and learnings from the field.
 - The state should explore how to use the technology data reporting and collection.
 - The activities should include training.
- Regarding transfer guidance:
 - Ensure protocols are evidence-based and do not unintentionally or inadvertently perpetuate disparities.
 - Clarify how mobile crisis team dispatches should be handled; different approaches may be needed for different communities.
 - Guidance is needed on transfers between 988 and other lines, considering the scope and preparedness for diverse crisis situations.

Goal C: High quality 988 response

Support the delivery of high-quality 988 services for all Californians

Recommendation	Implementation Activities
C.1. The State should establish a process for assessing the clinical quality of the 988 services consistent with the state’s vision and federal mandates	<ul style="list-style-type: none">a. Examine the current 988 network’s capacity to meet existing key performance indicatorsb. Identify mechanisms to aid with call volume projections and growth forecastingc. Establish baseline standards for 988 Crisis Center performanced. Develop guidance for 988 Crisis Centers to utilize during various behavioral health crises including suicide, mental health, and substance use-related 988 contacts
C.2. The State should create baseline standards for staffing and training at 988 Crisis Centers to ensure person-centered, culturally responsive assistance	<ul style="list-style-type: none">a. Evaluate existing training standards for 988 Crisis Counselorsb. Establish statewide training standards for 988 Crisis Centers that are responsive to the diverse needs of California help-seekersc. Evaluate existing staffing needs and identify mechanisms to assess future staffing needs to support the core requirements of 988 Crisis Centersd. Determine best practices and provide resources to 988 Crisis Centers to mitigate compassion fatigue and burnout among crisis counselors
C.3. The State should establish a process to review and designate California 988 Crisis Centers	<ul style="list-style-type: none">a. Develop a state-level process to designate 988 Crisis Centersb. Develop a process to continually assess the overall capacity of the 988 Crisis Center network to ensure adequate network coveragec. Establish a process to expand current operations of existing 988 Crisis Centers and/or designate additional centers to meet network coverage needsd. Establish a process for state-level monitoring and support to meet state and national quality standards

Goal C: PAG Input

- Consider reorganizing the recommendations
 - Combining Key Performance Indicators with staffing and separating recommendations specific to quality
 - Differentiate between activities to meet current national standards and activities to meet California's definition of behavioral health crises
- Include mechanisms for consumer feedback in the evaluation process
- Regarding staffing:
 - Align staffing needs, qualifications, and oversight with the shifting scope of responsibilities of 988 centers
 - Involve staff in baseline assessments of staffing needs
 - Address cultural competency and standards consistency
- Regarding designation:
 - Establish California-specific standards for designation processes
 - Explicitly state the authority to remove designation
 - Include technical assistance as part of state support for Crisis Centers

Goal D: Integration of 988 and the continuum of services

Increase coordination of behavioral health crisis services

Recommendation	Implementation Activities
<p>D.1 The State should promote collaboration and coordination of state, county and regional behavioral health and cross sector partners to connect individuals in behavioral health crises to immediate and ongoing care</p>	<ul style="list-style-type: none"> a. Evaluate how 988 Crisis Centers currently coordinate with 911 Public Safety Answering Points (PSAPs), County Behavioral Health, Emergency Medical Services (EMS) and others in the system b. Support the development and updating of resource directories to ensure 988 Crisis Centers have information on local response and safe places to go c. Align coordination efforts with technology solutions (<i>See Goal Area B1</i>)
<p>D.2. The State should support connection of 988 help seekers to timely and effective community-based responses, including mobile crisis dispatch when appropriate</p>	<ul style="list-style-type: none"> a. Identify mechanisms to build and sustain 24/7 Medi-Cal Mobile Crisis Teams b. Identify mechanisms to build and sustain 24/7 all payer Mobile Crisis Teams c. Assess gaps in locally operated community-based mobile crisis services d. Propose a process and/or structure to support connection and coordination with mobile crisis services
<p>D.3. The State should assist communities in expanding available facilities and services that stabilize crisis and support quality services during and after a behavioral health crisis</p>	<ul style="list-style-type: none"> a. Establish an inventory of existing services/facilities that stabilize crisis including entry and exclusion criteria and funding sources b. Develop policy recommendations to address potential barriers to entry, including costs, financial sustainability and benefits of implementing such policy c. Build on Behavioral Health Continuum Infrastructure Program (BHCIP), California Advancing and Innovating Medi-Cal (CalAIM) and other initiatives to increase the availability of alternative models including Peer Respite, Sobering Centers, and traditional Crisis Residential Treatment Programs

Goal D: PAG Input

- There are a variety of terms included in the current draft that would benefit from definitions. These include equity, access, peer support, cross-sector partners, etc.
- Promoting collaboration:
 - The implementation activities should describe what follows from any evaluation. There was also a suggestion to acknowledge that in-person support resources are limited, especially in high-acuity situations.
- Connecting help seekers to community-based crisis service response:
 - There was a suggestion to broaden the definition of mobile crisis to include other field-based crisis services.
- Safe places to be:
 - Identify resources that exist between acute care and low-acuity needs, with an emphasis on connecting help seekers to the least restrictive resources relative to their needs.
 - Ensure payers' responsibilities are clear to consumers and referring providers.
 - Frame future responses to avoid defaulting to ER visits, particularly in rural areas.

Next Steps

- Workgroup 6 (Funding and Sustainability) meeting TBD early September
- Next meeting of the Policy Advisory Group: September 18, 2024, at Allenby Building in Sacramento
- Public notice and zoom link (as well as recording and slides from previous meetings) available at [988-Crisis Policy Advisory Group - California Health and Human Services](#)

Upcoming PAG Meetings

#	Meeting Dates (10am-3pm)	Location
6	September 18, 2024 Topics: <ul style="list-style-type: none">- Draft Plan Review- Finance and Sustainability- Governance- Peers	In-Person, Allenby Building, Sacramento
7	November 20, 2024	In-Person, Allenby Building, Sacramento

Draft Plan for PAG
Review Distributed in
Advance

For more information:

Please email [CHHS AB988Info <AB988Info@chhs.ca.gov>](mailto:AB988Info@chhs.ca.gov)

Visit [CalHHS's 988 Suicide and Crisis Lifeline Webpage](#)

[988-Crisis Policy Advisory Group - California Health and Human Services](#)

988 Suicide & Crisis Lifeline

The 988 Lifeline is an easy to remember three-digit number that anyone can call to receive support when experiencing a suicidal, mental health and/or substance use- related crisis. To reach the Lifeline, people can call or text 988 or chat at Lifeline (988lifeline.org). People who are worried about a loved one who may need crisis support may also use 988 to receive guidance and support. This number is in addition to existing national, state-wide, and local call lines for emergency and non-emergency support.

 Text/Chat 988

There are additional national, state-wide, and local call lines for emergency and non-emergency support.

- [988 Suicide and Crisis Lifeline FAQ](#)
- [Relationship between 988 and 911 FAQ](#)
- Additional information regarding 988 can be found on [SAMHSA's 988 Website](#), including answers to [Frequently Asked Questions](#).



Item 7: FCC and Vibrant Updates

- The FCC has released a Notice of Proposed Rulemaking for 9-8-8 georouting, FCC Docket No 18-336:

<https://www.fcc.gov/document/fcc-proposes-improvements-wireless-call-routing-988-lifeline-0>

- Over 3,000 Comments were received
- Reply Comments were due to FCC on July 29, 2024
- FCC rulemaking process can take 6-18 months to complete
- Vibrant:
 - Centers are in active discussions regarding updated Vibrant Network Agreement



Item 8: Review of 9-1-1/9-8-8 Transfer Guidance Document

- The 9-8-8 Technical Advisory Board will discuss and vote on the 9-1-1/9-8-8 transfer guidance document.



Item 9: FCC Proposed Rulemaking for 9-8-8 Georouting

- The 9-8-8 Technical Advisory Board will discuss what action to take regarding the FCC proposed rulemaking for 9-8-8 georouting.



Item 10: Agenda Items for Future Meetings

Board requests for matters to be placed on a future agenda.

2024 Meeting Dates:

- November 21, 2024, 10 AM – 12 PM



Item 11: Public Comment

Public Comment



Item 12: Adjourn

Thank you for attending this meeting of the California State 9-8-8 Technical Advisory Board.

- **General Information:**

Samantha Huelsenkamp, State 9-8-8 Technical Advisory Board Liaison at (916) 894-5155, or via email at Samantha.Huelsenkamp@CalOES.ca.gov

- **Media Information:**

Bryan May, Public Information Officer at (916) 845-8449, or via email at Bryan.May@caloes.ca.gov