

The 988 Suicide and Crisis Lifeline: What it Means for Hospitals

988 – the new three-digit dialing code for mental health, substance use and suicide crises – is now available nationwide. This easy-to-remember number will be accessible for everyone in crisis, no matter where they live.

Established after Congress passed the bipartisan *National Suicide Hotline Designation Act of 2020*, the 988 Suicide & Crisis Lifeline (previously the National Suicide Prevention Lifeline) will connect people in crisis and their loved ones with one of the roughly 200 local call centers or national back-up call centers that make up the Lifeline network. These call centers are staffed by trained crisis counselors, who will answer calls and provide support, help and connection to additional resources. Unlike 911, which dispatches police and EMS to respond, 988 is more than a number – it's a response itself.



988 is an important step to help people in crisis and their families receive lifesaving support, but it's only the first step.

To improve the response—and outcomes—for people in crisis, every community should have a well-designed crisis system that includes: **24/7 local crisis call centers** with staff who are trained to help people in crisis; **mobile crisis teams** consisting of non-law enforcement professionals who can de-escalate a crisis and connect people to care; and **crisis stabilization programs** that provide short-term stabilization in a living room-like setting and connect people to more intensive or community-based care.

If we implement a full crisis system of care in our communities, it will:

- Connect people in crisis to appropriate and effective care more quickly, reducing the severity or impact of a crisis on the individual and reducing the need for more intensive responses
- Give people in a mental health crisis the option of somewhere to go to lessen the demand on emergency departments
- Provide a more therapeutic response and help prevent hospitalizations
- Decrease psychiatric boarding in emergency departments

Hospitals can't be the only place to go in crisis – but without action, communities will continue to rely on law enforcement and hospitals for crisis response.

Hospitals can help improve crisis care. Hospitals are an important stakeholder as policymakers consider resources and policies that will shape this new crisis system of care. To inform these decisions, hospitals can:

- Highlight the costs—for patients and providers— when people experiencing psychiatric emergencies are held in emergency departments
- Voice support for crisis services such as mobile crisis teams and crisis stabilization options
- Provide clinical and operational expertise, as a key stakeholder, to help inform the design, implementation, and continuous improvement of local 988 crisis response
- Support legislation that creates standards, designates funding, and establishes oversight for the 988 Suicide & Crisis Lifeline and crisis response services

A full crisis response system can help ensure that every person in crisis receives the help they need and deserve. Learn more about 988 and how to get involved at ReimagineCrisis.org and SAMHSA.gov/988.